Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103	
Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 DBBS OFFONSERVATION DIVISION		ources WELL API NO	Revised July 18, 2013	
		30-025-43	3404	
<u>District III</u> – (505) 334-6178 1220 South St. Francis Dr.		5. Indicate Typ STATE	e of Lease	
1000 Rio Brazos Rd., Aztec, NM 8740 V_2 1 2016 Santa Fe, NM 87505		6. State Oil & O		
1220 S. St. Francis Dr., Santa Fe, NM RECEIVED				
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		TOA	7. Lease Name or Unit Agreement Name Braswell 16 State Com	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			8. Well Number 709H	
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator			9. OGRID Number	
EOG Resources, Inc.		7377	7377 /	
3. Address of Operator P.O. Box 2267 Midland, TX 79702			or Wildcat S263327G; Upper Wolfcamp	
4. Well Location D 270	North	740	West	
	from the li vnship 26S Range 33		County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3280' GR				
	200 GR			
12. Check Appropriate E	Box to Indicate Nature o	f Notice, Report or Othe	er Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLI PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JULICAL			P AND A	
CLOSED-LOOP SYSTEM	ОТНЕ	3.		
13. Describe proposed or completed operations	s. (Clearly state all pertinent	details, and give pertinent da		
of starting any proposed work). SEE RUL proposed completion or recompletion	E 19.15.7.14 NMAC. For N	Iultiple Completions: Attach	wellbore diagram of	
10/22/16 Spud 14-3/4" hole.				
10/23/16 Ran 24 jts 10-3/4", 40.5#, J55 STC casing set at 1042'.				
Cement lead w/ 487 sx Class C, 13.5 ppg, 1.75 CFS yield;				
tail w/ 259 sx Class C, 14.8 ppg, 1.34 CFS yield.				
Tested casing to 1500 psi for 30 minutes. Test good.				
10/24/16 Resumed drilling 8-3/4" hole.				
	_			
Spud Date: 10/22/16	Rig Release Date:		1.10	
			#10.1	
I hereby certify that the information above is true ar	d complete to the best of my	knowledge and belief.		
		J		
SIGNATURE Stan Wagn	TITLE Regulatory	/ Analyst	DATE 10/25/16 HONE: 432-686-3689 ATE 11/21/2016	
Type or print name Stan Wagner	E-mail address:	Р	HONE: 432-686-3689	
For State Use Only				
APPROVED BY: Maley Brown TITLE Dist . Supervised ATE 11/21/2016 Conditions of Approval (if any):				
Conditions of Approval (if any):			11	
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