Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	30-025-43254
District II – (575) 748-1283 811 S. First St., Artesia, NM 8890 District III – (505) 334-6178 1000 Bio Brazos Bd. Artec. NM 87410 District III – (505) 334-6178	5. Indicate Type of Lease
	STATE FEE
$\frac{\text{District IV} - (505) 476-3460}{1220 \text{ S. St. Francis Dr., Santa Fe, NM}} \frac{1200 \text{ S. St. Francis Dr., Santa Fe, NM}}{0.2016}$	6. State Oil & Gas Lease No. VB-2054
87505 SUNDRCNOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALE) O DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Weasel BXD State Com
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	8. Well Number
1. Type of Well: Oil Well 🖾 Gas Well 🗌 Other	1H -
2. Name of Operator	9. OGRID Number
EOG Y Resources, Inc. / 3. Address of Operator	025575 10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210	Antelope Ridge; Bone Spring, North
4. Well Location	
Unit Letter D : 200 feet from the North line and	200 feet from the West line
	400 feet from the West line
Section17Township23SRange35E11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Lea County
3,360' GR	,
12. Check Appropriate Box to Indicate Nature of Notice,	Report or Other Data
NOTICE OF INTENTION TO: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN	т јов
CLOSED-LOOP SYSTEM	5' new hole
13. Describe proposed or completed operations. (Clearly state all pertinent details, and	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Con proposed completion or recompletion.	mpletions: Attach wellbore diagram of
proposed completion of recompletion.	
12/21/16 – Made 5' new hole. TD 60'. Hole size 20".	
Note: 30" culvert with locking lid installed on 6/17/16.	
Toto. 50 curver with looking he instance on or 1710.	
Spud Date: 5/31/16 Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledg	e and beller.
SIGNATURE and Datte TITLE Assistant Regulatory Lead	DATE <u>December 27, 2016</u>
Type or print name <u>Laura Watts</u> E-mail address: <u>laura_watts@eogresou</u>	rces.com PHONE: <u>575-748-4272</u>
For State Use Only	
APPROVED BY: Accepted for Record Only	DATE
Conditions of Approval (if any):	
APPROVED BY: DATE DATE DATE	