Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I – (575) 393-6161	OIL CONSERVATION DIVISION		Revised July 18, 2013 WELL API NO.	
1625 N. French Dr., Hobbs, NM 88240 District II (575) 748-1283			25-42733	
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178			icate Type of Lease	
1000 Rio Brazos Rd., Aztec NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE FEE	
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa I C, IVIVI 87303		e Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			se Name or Unit Agreement Name Ihog BWX State Com	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other		8. We	ll Number	
2. Name of Operator			RID Number	
EOG Y Resources, Inc.			575	
<ol> <li>Address of Operator</li> <li>South Fourth Street, Artesia, NM 88210</li> </ol>			10. Pool name or Wildcat Wildcat; Lower Bone Spring	
4. Well Location				
Unit Letter C : Unit Letter N	200 feet from the North 330 feet from the South		feet from the West line feet from the	
Section 20		nge 36E NMPM		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2,943' GR				
2,745 UK				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING			ENT REPORT OF:  ☐ ALTERING CASING ☐	
TEMPORARILY ABANDON				
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMENT JOB			
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM  OTHER:		OTHER: 5' new hole		
	oleted operations. (Clearly state all 1		rtinent dates, including estimated date	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
1/12/17 – Made 5' new hole. TD 170'. Hole size 9".				
N				
Note: 30" culvert with locking lid installed on 10/26/15.				
Spud Date: 9/1/15	Rig Release Da	ite:		
I hereby certify that the information	above is true and complete to the be	est of my knowledge and bel	ief.	
0	111-			
SIGNATURE AQUA	TITLE Assistan	nt Regulatory Lead	DATE <u>January 13, 2017</u>	
Type or print name Laura W	atts E-mail address: <u>lau</u>	ra_watts@eogresources.com	PHONE: <u>575-748-4272</u>	
For State Use Only	A sated for Record	Only		
APPROVED BY:	TITLE		DATE	
Conditions of Approval (if any):	- MA A ()	.1.01		
Conditions of Approval (if any):  Mills Jaory  1/18/2017				