Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NA & BBS (Diergy, Min District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NNRECEIVED San 87505	SERVATION DIVISION	Form C-103 Revised July 18, 2013 WELL API NO. 30-025-43496 5. Indicate Type of Lease STATE FEE X 6. State 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well A Gas Well Other		 7. Lease Name or Unit Agreement Name OPHELIA 27 8. Well Number 503H
2. Name of Operator EOG RESOURCES IN	NC (9. OGRID Number 7377
3. Address of Operator PO BOX 2267 MIDLANI	D, TX 79702	10. Pool name or Wildcat BRADLEY; BONE SPRING
4. Well Location Unit Letter F : 2420 feet from the North line and 2100 feet from the West line Section 27 Township 26S Range 33E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3266' GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB P AND A DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: OTHER: Ran tubing		
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent 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.		
04/30/2017Opened well to flowback - First Production06/02/2017Ran GLV's and 2 7/8" L-80 tubing, EOT @ 11,086', put wellright back on production		
Spud Date: 01/25/2017	Rig Release Date:	04/07/2017
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Nam Muddox	TITLE Regulatory Ana	
Type or print name Kay Maddox	E-mail address: kay_maddo	x@eogresources.com PHONE: 432-686-3658
For State Use Only APPROVED BY: Conditions of Approval (if any):		m Engineer DATE 07 /20/17