| Submit 1 Copy To Appropriate District Star  |                      | ate of New Me            | te of New Mexico    |                     | Form C-103                           |   |            |             |  |
|---|----------------------|--------------------------|---------------------|---------------------|--------------------------------------|---|------------|-------------|--|
| <u>District I</u> – (575) 393-6161 Energy, Mir  |                      |                          | nerals and Natu     | ral Resources       | Revised July 18, 2013 WELL API NO.   |   |            |             |  |
| 1625 N. French Dr., Hobbs, NM 88240   |                      |                          |                     |                     | 30-025-                              |   |            |             |  |
| 811 S. First St., Artesia, NM 88219 BB OIL CONSERVATION DIVISION  |                      |                          |                     |                     | 5. Indicate Type of Lease            |   |            |             |  |
| Submit 1 Copy To Appropriate District Office  District I – (575) 393-6161  1625 N. French Dr., Hobbs, NM 88240  District III – (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, NM 87505  SUNDRY NOTICES AND REPORTS ON WELLS |                      |                          |                     |                     | STAT                                 |   | FEE [      | _           |  |
| District IV - (505) 476-3460 Santa Fe, NM 87505   |                      |                          |                     |                     | 6. State Oil                         | & Gas Leas  | se No.     |             |  |
| 87505   |                      |                          |                     |                     |                                      |   |            |             |  |
| SOUTH THE PARTY OF WELLS  |                      |                          |                     |                     | 7. Lease Name or Unit Agreement Name |   |            |             |  |
| (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.)   |                      |                          |                     |                     | Andele 16 State Com                  |   |            |             |  |
| 1. Type of Well: Oil Well Gas Well Other  |                      |                          |                     |                     |                                      | 8. Well Number 704H                                       |            |             |  |
| Name of Operator     EOG Resources, Inc.  |                      |                          |                     |                     |                                      | 9. OGRID Number 7377                                      |            |             |  |
| 3. Address of Operator P.O. Box 2267 Midland, TX 79702  |                      |                          |                     |                     |                                      | 10. Pool name or Wildcat Pitchfork Ranch; Wolfcamp, South |            |             |  |
| 4. Well Loc   | eation               |                          | 0 - 11              |                     |                                      |   |            |             |  |
| Un  | it Letter M          | : 300 feet fro           | m the South         | line and 82         | 4 fee                                | t from the  | West       | line        |  |
| Sec   | etion                | 16 Towns                 | hip 25S Ra          | nge 34E             | NMPM                                 | Cou   | nty Lea    | 3           |  |
|   |                      | 11. Elevation (Sa        | how whether DR,     | RKB, RT, GR, etc.)  |                                      |   |            |             |  |
| 3354' GR  |                      |                          |                     |                     |                                      |   |            |             |  |
| 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  |                      |                          |                     |                     |                                      |   |            | SING [      |  |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A  |                      |                          |                     |                     |                                      |   |            |             |  |
| PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☑   |                      |                          |                     |                     |                                      |   |            |             |  |
| DOWNHOLE COMMINGLE  |                      |                          |                     |                     |                                      |   |            |             |  |
| CLOSED-LO   | OOP SYSTEM           |                          |                     | OTHER:              |                                      |   |            |             |  |
|   | ribe proposed or co  | ompleted operations. (   | Clearly state all r |                     | d give pertinent                     | t dates, incl   | uding esti | imated date |  |
| 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.  |                      |                          |                     |                     |                                      |   |            |             |  |
| 9/11/17 TD at 17427' MD.  |                      |                          |                     |                     |                                      |   |            |             |  |
| 9/12/17 Ran 5-1/2", 20#, (278 jts) ECP-110 DWC, (114 jts) HCP-110 RDT BTX, (3 jts) ECP-110 LTC  |                      |                          |                     |                     |                                      |   |            |             |  |
| casing set at 17406'.<br>9/13/17  Cement w/ 580 sx Class H, 15.6 ppg, 1.20 CFS yield. WOC 8 hrs. ETOC at 10200'.  |                      |                          |                     |                     |                                      |   |            |             |  |
| 9/13/17 Cerrient w/ 360 sx Class H, 15.6 ppg, 1.20 CFS yield. WOC 8 fils. E10C at 10200. 9/14/17 Released rig.  |                      |                          |                     |                     |                                      |   |            |             |  |
|   |                      | 5                        |                     |                     |                                      |   |            |             |  |
|   |                      |                          |                     |                     |                                      |   |            |             |  |
|   |                      |                          |                     |                     |                                      |   |            |             |  |
|   |                      |                          |                     |                     |                                      |   |            |             |  |
|   |                      |                          |                     |                     |                                      |   |            |             |  |
|   |                      |                          |                     |                     |                                      |   |            |             |  |
|   | 0/0/47               |                          |                     | 0/44/47             |                                      |   |            |             |  |
| Spud Date:  | 8/3/17               |                          | Rig Release Da      | te: 9/14/17         |                                      |   |            |             |  |
|   |                      |                          |                     | ,                   |                                      |   |            |             |  |
| I haraby carti  | fy that the informat | tion above is true and c | omplete to the he   | est of my knowledge | e and helief                         |   |            |             |  |
| Thereby certi   | ly that the informa  |                          | omplete to the or   | st of my knowledge  | c and benefit.                       |   |            |             |  |
| SIGNATURE Han Way TITLE Regulatory Analyst  |                      |                          |                     |                     |                                      | DATE  | 9/18/2     | 017         |  |
| SIGNATURE THE   |                      |                          |                     |                     |                                      |   | 132 69     | 36.3680     |  |
| Type or print name Stan Wagner E-mail address:  |                      |                          |                     |                     |                                      | PHONE:  | 432-00     | 0-3009      |  |
| For State Us  | e Only               |                          |                     |                     |                                      |   |            | 86-3689     |  |
| APPROVED  | RV: 67               | Tand                     | TITLE               | Petroleum Eng       | ineer                                | DATE 6  | 19/2       | 9/17        |  |
| Conditions of   | DI                   |                          |                     |                     |                                      | _DILLI O  | / /        |             |  |