

Submit 1 Copy To Appropriate District 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
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

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

HOBBS OCD
OCT 18 2017
RECEIVED

Form C-103
Revised July 18, 2013

WELL API NO. 30-025-44060
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Ruby 2 State Com
8. Well Number 602H
9. OGRID Number 7377
10. Pool name or Wildcat Hardin Tank Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3304' GR

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator EOG Resources, Inc.	
3. Address of Operator P.O. Box 2267 Midland, TX 79702	
4. Well Location Unit Letter D : 220 feet from the North line and 1277 feet from the West line Section 2 Township 26S Range 34E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3304' GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

10/5/17 Spud 14-3/4" hole.
Ran 24 jts 10-3/4", 40.5#, J55 STC casing set at 1050'.
10/6/17 Cement lead w/ 660 sx Class C, 13.8 ppg, 1.64 CFS yield;
tail w/ 250 sx Class C, 14.8 ppg, 1.36 FFS yield.
Circulated 404 sx cement to surface. WOC 16 hrs
Tested casing to 1500 psi for 30 minutes. Test good.
Resumed drilling 8-3/4" hole.


Spud Date:

10/5/17

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE


Stan Wagner

TITLE

Regulatory Analyst

DATE

10/09/2017

Type or print name

E-mail address:

PHONE:

432-686-3689

For State Use Only

Petroleum Engineer

APPROVED BY:

TITLE

DATE

10/14/17

Conditions of Approval (if any):