

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

Form C-103  
Revised July 18, 2013

HOBBS  
NOV 03 2017  
RECEIVED

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

WELL API NO. <b>30-025-44061</b>
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 <b>Ruby 2 State Com</b>
8. Well Number <b>603H</b>
9. OGRID Number <b>7377</b>
10. Pool name or Wildcat <b>Hardin Tank Bone Spring</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3295' GR</b>

**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 ☒ Gas Well ☐ Other ☐

2. Name of Operator  
**EOG Resources, Inc.**

3. Address of Operator  
**P.O. Box 2267 Midland, TX 79702**

4. Well Location  
Unit Letter **C** : **220** feet from the **North** line and **2220** feet from the **West** line  
Section **2** Township **26S** Range **34E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3295' 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.

10/19/17 Spud 17-1/2" hole.  
10/20/17 Ran 13-3/8", 40.5#, J55 STC casing set at 988'.  
Cement lead w/ 820 sx Class C, 13.8 ppg, 1.64 CFS yield;  
tail w/ 310 sx Class C, 14.8 ppg, 1.36 CFS yield.  
Circulated 162 bbls cement to surface.  
10/21/17 Tested casing to 1500 psi for 30 minutes. Test good.  
Resumed drilling 12-1/4" hole.

Spud Date:

10/19/17

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 10/30/2017  
Type or print name Stan Wagner E-mail address: \_\_\_\_\_ PHONE: 432-686-3689  
**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 11/07/17  
Conditions of Approval (if any): \_\_\_\_\_