Submit 1 Copy To Appropriate District Office <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88210 <u>District II</u> – (575) 748-1283 Subscript St. Attacia NM 88210	Form C-103 Revised July 18, 2013 WELL API NO.
District III - (505) 334-6178 1220 South St. Francis Dr. District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	30-025-44371 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.
87505 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	 Lease Name or Unit Agreement Name Ares 4 State 8. Well Number 705H
2. 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 WC-025 G-09 S243310P; Upper WC
4. Well Location Unit Letter O Section 4 Township 24S Range 33E NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3582' 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 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 OTHER: OTHER: OTHER: Image: Closed or completed operations. 13. Describe proposed or completed operations. CClearly 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. 2/11/18 Ran 7-5/8", 29.7#, HCP-110 BTC SCC (0'-1100') Ran 7-5/8", 29.7#, HCP-110 FXL (1100'-12017') 2/12/18 Cement lead w/ 295 sx Class C, 11.5 ppg, 2.90 CFS yield; tail w/ 180 sx Class H, 15.6 ppg, 1.19 CFS yield. ETOC at 4272'. Tested casing to 2600 psi for 30 minutes. Test good. 2/13/18 Resumed drilling 6-3/4" hole. 	
Spud Date: 1/31/18 Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Than to an TITLE Regulatory Analyst	DATE 2/14/18
Type or print name Stan Wagner E-mail address:	PHONE: 432-686-3689
APPROVED BY: When Marp TITLE Staff Mgg Conditions of Approval (if any):	DATE 3-2-18