

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  
CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
**HOEBS OGD**  
**APR 26 2018**  
**RECEIVED**  
*Amended*

Form C-103  
Revised July 18, 2013

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>30-025-44258</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>EOG Resources, Inc.</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>P.O. Box 2267 Midland, TX 79702</b>		7. Lease Name or Unit Agreement Name <b>Convoy 28 State Com</b>
4. Well Location Unit Letter <b>B</b> : <b>538</b> feet from the <b>North</b> line and <b>1635</b> feet from the <b>East</b> line Section <b>28</b> Township <b>24S</b> Range <b>33E</b> NMPM County <b>Lea</b>		8. Well Number <b>704H</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3526' GR</b>		9. OGRID Number <b>7377</b>
		10. Pool name or Wildcat <b>WC-025 G-09 S2433361 Upper WC</b>

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☒  
OTHER: ☐

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.

3/14/18 Resumed drilling 6-3/4" hole.  
4/02/18 TD at 22440' MD  
Ran 5-1/2", 20#, CYHP-110 DQX (0'-22420')  
4/03/18 Cement lead w/ 975 sx Class H, 14.5 ppg, 1.25 CFS yield. ETOC at 10077'.  
Good casing test to 6500 psi.  
4/04/18 Released rig.

\*CORRECTED REPORT\*

Spud Date:

1/5/18

Rig Release Date:

4/4/18

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

SIGNATURE

*Stan Wagner*  
Stan Wagner

TITLE

Regulatory Analyst

DATE

4/26/2018

Type or print name

E-mail address:

PHONE:

432-686-3689

**For State Use Only**

APPROVED BY:

*Karen Sharp*  
Karen Sharp

TITLE

*Staff Mgr*  
Staff Mgr

DATE

4-27-18

Conditions of Approval (if any):