

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

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|---|--|---|
| OIL CONSERVATION DIVISION 1220 S. St. Francis Dr. Santa Fe, NM 87505 | | WELL API NO. 30-025-41753 |
| | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| (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"/> | | 6. State Oil & Gas Lease No. VO-8699 |
| | | 7. Lease Name or Unit Agreement Name Nervosa BTT State Com |
| 2. Name of Operator EOG Y Resources Inc. | | 8. Well Number 1H |
| 3. Address of Operator 104 South Fourth St. Artesia, NM 88210 | | 9. OGRID Number 025575 |
| 4. Well Location Unit Letter H : 2440 feet from the North line and 760 feet from the East line Section 24 Township 21S Range 33E NMPM County Lea | | 10. Pool name or Wildcat Berry; Bone Spring North |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3694' GR | | |

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

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|--|--|--|---|
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | INT TO PA P&A NR 7M P&A R | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input checked="" type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | | CASING/CEMENT JOB <input 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.

6/18/18—Notify OCD of move in, pump 500 sxs to surface.
~~6/19/18~~—Cement fell pump another 40 sxs to surface verified RDMO.

well is P&A'd

Spud Date:

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.
Restoration Due By 6-19-2019

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

SIGNATURE Chris Romero TITLE Agent DATE 6/28/18

Type or print name Chris Romero E-mail address: _____ PHONE: _____

For State Use Only

APPROVED BY: Mark Whitaker TITLE P.E.S. DATE 07/11/2018

Conditions of Approval (if any):