

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

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

HOBBS OCD

WELL API NO. 30-025-43862
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 Hearns 34 State Com
8. Well Number 712H
9. OGRID Number 7377
10. Pool name or Wildcat *WC-025 G-09 S243336I; Upper Wolfcamp

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL OR 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 <u>P</u> : <u>300</u> feet from the <u>South</u> line and <u>568</u> feet from the <u>East</u> line Section <u>34</u> Township <u>24S</u> Range <u>33E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3484' 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 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.

7/2/18 Ran 7-5/8", 29.7#, HCP-110 BTC SC (0'-1336')
Ran 7-5/8", 29.7#, ICYP-110 FXL (1336'-11705')
7/3/18 Cement lead w/ 349 sx Class C, 11.5 ppg, 2.43 CFS yield;
tail w/ 162 sx Class H, 15.6 ppg, 1.23 CFS yield.
Tested casing to 2500 psi. ETOC at 3367' calc by volume.
Resumed drilling 6-3/4" hole.

How long? good test?

Spud Date:

5/31/18

Rig Release Date:

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

SIGNATURE

Stan Wagner

TITLE

Regulatory Analyst

DATE

7/05/2018

Type or print name

Stan Wagner

E-mail address:

PHONE:

432-686-3689

For State Use Only

APPROVED BY:

Karen Sharp

TITLE

Staff Mgr

DATE

7-13-18

Conditions of Approval (if any):