

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

Form C-103  
Revised July 18, 2013

WELL API NO. <b>30-025-45225</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>Ares 4 State</b>	
8. Well Number <b>203H</b>	
9. OGRID Number <b>7377</b>	
10. Pool name or Wildcat <b>Triple X; Bone Spring</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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator <b>EOG Resources, Inc.</b>	
3. Address of Operator <b>P.O. Box 2267 Midland, TX 79702</b>	
4. Well Location Unit Letter <b>P</b> : <b>330</b> feet from the <b>South</b> line and <b>330</b> feet from the <b>East</b> line Section <b>4</b> Township <b>24S</b> Range <b>33E</b> NMPM County <b>Lea</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3584 GR</b>	

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 checked="" 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.

10/28/18 TD @ 14839'  
10/29/18 Run 5-1/2", 20#, ICYP-110 (0'-14839')  
Cmt lead 390 sx Class C, 10.8 ppg, 2.69 yld  
Middle 355 sx Class C, 11.5 ppg, 2.16 yld  
Tail 1465 sx Class H, 14.8 ppg, 1.18 yld  
TOC @ 2087' by Calc.  
10/30/18 Rig Release

Spud Date:

10/6/18

Rig Release Date:

10/30/18

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

SIGNATURE Renee Jarratt TITLE Regulatory Analyst DATE 11/01/18  
Type or print name Renee' Jarratt E-mail address: \_\_\_\_\_ PHONE: 432-686-3644  
**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 11/06/18  
Conditions of Approval (if any): \_\_\_\_\_