Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-025-45226
District II - (575) 748-1283 811 S. First St., Artesia, NM 883			5. Indicate Type of Lease
1000 Pio Person Pd. Mr. 1010 A 27410. 4			STATE 🔀 FEE 🗌
District IV - (505) 476-3460 Santa Fe, NIVE AND 0 2010			6. State Oil & Gas Lease No.
87505			
SUNDRY NASU AS AND REPORTS ON WA			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR CAPPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			ARES 4 STATE
PROPOSALS.)			0. 37-11 37
1. Type of Well: Oil Well Gas Well Other			8. Well Number 302H
2. Name of Operator EOG RESOURCES INC			9. OGRID Number 7377
3. Address of Operator PO BOX 2267 MIDLAND, TX 79702			10. Pool name or Wildcat
			TRIPLE X; BONE SPRING
4. Well Location Unit Letter O 834' feet from the SOUTH line and 1744' feet from the EAST line			
Section 4 Township 24S Range 33E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3581' GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
NOTICE OF INTENTION TO: SUBS			
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRII			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT			JOB
DOWNHOLE COMMINGLE			
CLOSED-LOOP SYSTEM			nletion M
OTHER: OTHER: Completion 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.			
00/47/2040 DANIL 90 2 7/9" TPC AND CAS LIFT VALVES SET TPC @ 40 446"			
02/17/2019 RAN L-80 2 7/8" TBG AND GAS LIFT VALVES, SET TBG @ 10,446' / P 🖍 . PUT WELL BACK ON PRODUCTION			
TOT WELL BACK ON TROBUSTION			
		,	
Spud Date: 10/23/2018	Rig Release Da	te: 11/5/2	018
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE KAREE	TITLE Sr. R	egulatory Admini	strator DATE 06/19/2019
Type or print name Kristina Agee E-mail address: *kristina_agee@eogresources.com PHONE: 432-686-6996			
/1 1			
For State Use Only Petrol			
APPROVED BY:	TITLE	Petroleum E	ngineer DATE Objecting
Conditions of Approval (17 any):	`		7