| Submit 1 Copy To Appropriate District Office | State of New Mexico | | Form C-103 | | |
|---|--|------------------|--|---------------------|--|
| District I - (575) 393-6161 | Energy, Minerals and Natural Resources | | Revised July 18, 2013 WELL API NO. | | |
| 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 | | | 30-025-41518 | 3 | |
| 811 S. First St., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | 5. Indicate Type of | | |
| <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | STATE | FEE 🗌 🔻 | |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM | Santa Fe, NM 87505 | | 6. State Oil & Gas I | Lease No. | |
| 87505 | | | | | |
| | ICES AND REPORTS ON WELL | | 7. Lease Name or U | nit Agreement Name | |
| (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 | | | Fruit Loop 29 State | | |
| PROPOSALS.) 1. Type of Well: Oil Well | Well Gas Well Other OCD - HOBBS | | | 8. Well Number 501H | |
| 2. Name of Operator | V 07/11/2016 | | 9. OGRID Number 7377 | | |
| EOG Resources, Inc. 3. Address of Operator | RECEIVED | | 10. Pool name or Wildcat | | |
| P.O. Box 2267 Midla | nd, TX 79702 | J 2 2 | THE RESERVE THE PARTY OF THE PA | 13330F; Bone Spring | |
| 4. Well Location C | 200 North | 198 | 30 | . West | |
| Unit Letter: | feet from the | line and | feet from t | heline | |
| Section 29 | | tange 33E | | County Lea | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3719' GR | | | | | |
| | | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | | TERING CASING | |
| TEMPORARILY ABANDON | | | | | |
| PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB | | | | | |
| DOWNHOLE COMMINGLE | | | | | |
| CLOSED-LOOP SYSTEM OTHER: | П | OTHER: Comp | oletion | X | |
| 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. | | | | | |
| 12/11/15 Prep well for completion. Ran CBL, TOC of production casing is at surface. | | | | | |
| 02/03/16 Perform pre-frac casing test to a max pressure of 10009 psi. 04/16/16 MIRU for completion | | | | | |
| 04/17/16 Begin 22 stage completion. | | | | | |
| 04/23/16 Finish perforating and frac. Perforated from 11282' to 15666', 0.35", 1374 holes. Frac w/ 542 bbls acid, 10,947,820 lbs proppant, 294,175 bbls load water. | | | | | |
| 04/27/16 RIH to drill out plugs and clean out well. | | | | | |
| 04/28/16 Finish drill and clean out. 04/29/16 RIH w/ 2-7/8" production tubing, 5-1/2" production packer, and gas lift assembly. Packer set at 10650'. | | | | | |
| EOT at 10679. Flowback. | | | | | |
| 05/07/16 First production to sales. | | | | | |
| 05/25/16 Shut-in waiting for 06/17/16 First gas sales. | or gas pipeline. | | | | |
| | | | | 1 | |
| Spud Date: | Rig Release D | ate: | | | |
| | | | |] | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and benef. | | | | | |
| SIGNATURE Stan (1) a | Reg | gulatory Analyst | DATE | 1/20/11 | |
| | TITLE | , , , | DATE | 432-686-3689 | |
| Type or print name Stan Wagne | E-mail addres | s: | PHON | IE: 432-686-3689 | |
| For State Use Only | | | | | |
| APPROVED BY: | TITLE | Petroleum Engi | neer DATE | 07/13/2016 | |
| Conditions of Approval (if any): | 7 | | | ,, | |

KZ