Submit 1 Copy To Appropriate District Office District I – (575) 393-6161		State of New Mexico HOBBS OCD- RECEIVED 11/16/20 Form C-103				
		Energy, Minerals and Natural Resources			Revised July 18, 2013	
1625 N. French	Dr., Hobbs, NM 88240	237		WELL API NO.	40750	
<u>District II</u> – (57: 811 S. First St	5) 748-1283 Artesia, NM 88210	OIL CONSERVATION	OIL CONSERVATION DIVISION		-46753	
District III - (50	05) 334-6178	1220 South St. Fra	ncis Dr.	5. Indicate Type of Lease STATE X FEE		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460		Santa Fe, NM 8	7505	6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505						
				7. Lease Name or Unit	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				HEMLOCK 32 STATE		
PROPOSALS.)				0. W. II.V.		
1. Type of Well: Oil Well Gas Well Other				20211		
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 M : 304' feet from the SOUTH line and 534' feet from the WEST line						
Section 32 Township 23S Range 33E NMPM County LEA						
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
3661' GR						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
					RING CASING	
	ILY ABANDON [COMMENCE DRI		D A	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE						
CLOSED-LOOP SYSTEM						
OTHER: OTHER: Completion					oxdot	
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.						
09/15/2020 Ran tubing and gas lift valves, set 2 7/8" tubing @ 9794', put well back on production.						
ı						
Spud Date:	02/02/2020	Rig Release D	oate: 03/03	/2020		
_ I						
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
SIGNATURE	Kay Maddo	x TITLE Rec	gulatory Analyst	DATE	11/16/2020	
Type or print	name <u>Kay Maddo</u>)X E mail addras	E-mail address: kay_maddox@eogresources.com PHONE: _432-638-8475			
For State Use	•	E-man addres	E-mail address: kay_maddox@eoglesources.com PHONE: 432-638-84/5			
·		1 8 / 11	TITLE LM II DATE 12/3/2020)/2/2020	
APPROVED I		TITLE LM II		DATE_12	./3/2020	
Conditions of	Approval (if any):					