

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

June 19, 2008

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, NM 87505

HOBBS OCD

OCT 24 2013

WELL API NO. 30-025-08113
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: Red Tank Federal
8. Well Number 2 SWD
9. OGRID Number 7377
10. Pool name or Wildcat SWD: Delaware

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other SWD
2. Name of Operator EOG Resources, Inc.
3. Address of Operator P.O. Box 2267 Midland, TX 79702
4. Well Location Unit Letter N : 542 feet from the South line and 1958 feet from the West line Section 14 Township 22S Range 32E NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: casing repair ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

10/01/13 MIRU to repair casing leak.  
10/02/13 POOH w/ 2-7/8" IPC production tubing and packer.  
10/03/13 RIH w/ CBP set at 5305'. Dump bail cement.  
10/04/13 RIH w/ 132 jts 4", 11#, L80 casing set at 5300'.  
10/05/13 RIH and pump 255 sx Class C cement, 14.8 ppg, 1.32 yield.  
10/08/13 RIH and tag cement at 5360'.  
10/09/13 Drill and clean out to 5445'.  
10/10/13 RIH w/ 2-3/8" IPC injection tubing and 4" arrowset packer set at 5228'.

Spud Date:

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 Analysis DATE 10/21/2013

Type or print name Stan Wagner E-mail address: \_\_\_\_\_ PHONE 432-686-3689

For State Use Only

APPROVED BY [Signature] TITLE DIST. MGR DATE 10-24-2013

Conditions of Approval (if any):

OCT 29 2013

Submit 3 Copies To Appropriate District  
Office  
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Form C-103  
June 19, 2008

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4. Well Location Unit Letter <u>N</u> : <u>542</u> feet from the <u>South</u> line and <u>1958</u> feet from the <u>West</u> line Section <u>14</u> Township <u>22S</u> Range <u>32E</u> NMPM County <u>Lea</u>		8. Well Number 2 SWD
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 7377
		10. Pool name or Wildcat SWD; Delaware

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 type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: casing repair <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

10/10/2013 Performed MIT test to 520 psi for 30 minutes. Test good.  
Returned to injection.

Spud Date:

Rig Release Date:

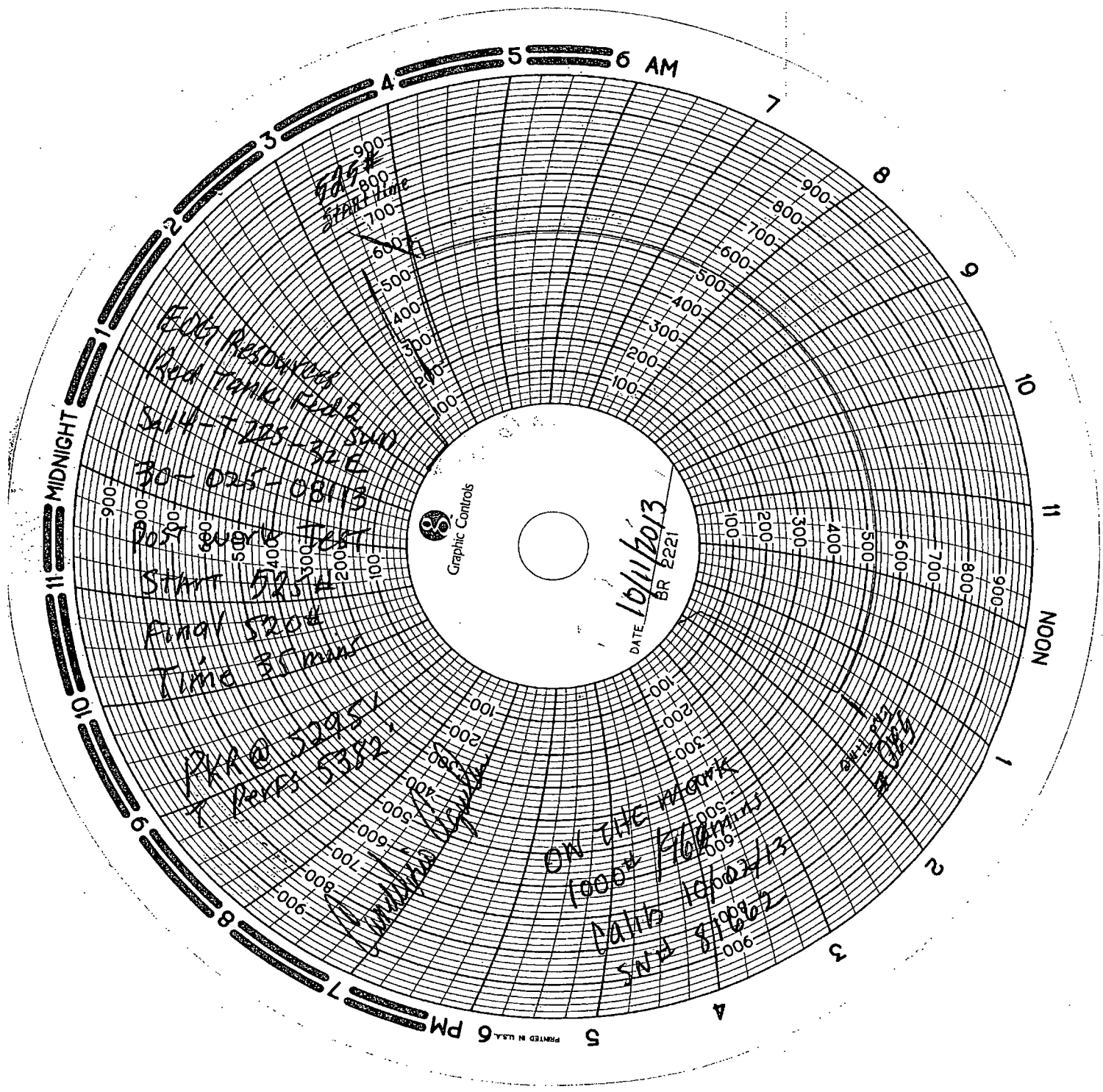
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Stan Wagner TITLE Regulatory Analysis DATE 10/21/2013

Type or print name Stan Wagner E-mail address: \_\_\_\_\_ PHONE 432-686-3689

For State Use Only

APPROVED BY [Signature] TITLE Director DATE 10-24-2013  
Conditions of Approval (if any): \_\_\_\_\_



EDGE REDDING  
Red Tank F222  
514-7225-32 E  
30-025-08113  
2057  
START 0254  
Final 5204  
Time 30mins

PRR @ 3095  
Perfs 5382

ON THE MARK  
10000  
CATH 10000  
SND 81002



DATE 10/1/13  
BR 221

On the Mark Services

*[Signature]*

Candelario Aguilar  
EOB Resources

10/11/13

Serial #

81662

Calibrated 10/02/13

# Red Tank Fed #2 SWD

API# 30-025-08113  
Sect 14, T22S, R32E  
542' FSL & 1958' FWL  
Lea County, NM



WI 100.00000%  
DRILLING 6/10/1994  
LAST REVISED 10/30/2013  
SPUD 6/21/1994  
TD 6/21/1994  
SMB

Formation Tops	GL	KB	10'	Hole	AFE #
					TOC 10'-12' from surface
				12-1/4"	TOC @ Surface
935' Rustler					
1280' Salado					
1280' Salado					
4440' Castille					
4772' Delaware					
					</