

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

Form C-103
Revised July 18, 2013

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

WELL API NO. 30-025-42086
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 Hearns 27 State Com
8. Well Number 301H
9. OGRID Number 7377
10. Pool name or Wildcat Triste Draw; Bone Spring, East

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 PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator
EOG Resources, Inc.

3. Address of Operator
P.O. Box 2267 Midland, TX 79702

4. Well Location
Unit Letter M : 210 feet from the South line and 600 feet from the West line
Section 27 Township 24S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3480' GR

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 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.

12/05/14 TD at 15402' MD.

12/06/14 Ran 349 jts 5-1/2", 17#, P110 LTC casing set at 15402'.

12/07/14 Pumped RA tracer. Pumped 140 bbls freshwater gelled spacer, 5 mCl of Scandium 46 in last 30 bbls of spacer. Pumped 50 bbls of tuned spacer, 5 mCl of Iridium 192 in last 25 bbls of spacer.

Cemented lead w/ 250 sks Class H, 11.5 ppg, 2.76 yield;

tail w/ 1250 sks Class H, 14.6 ppg, 1.325 yield.

Pressured casing to 4700 psi to rupture cementing plug.

12/08/14 Released rig.

E-PERMITTING -- New Well _____
Comp. _____ P&A _____ TA _____
CSNG PM Loc Chng _____
ReComp _____ Add New Well _____
Cancl Well _____ Create Pool _____

Spud Date: 11/21/14

Rig Release Date: 12/08/14

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

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 12/09/14

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

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 12/16/14

Conditions of Approval (if any):

DEC 18 2014