| Submit 1 Copy To Appropriate District Office | State of New Mexico | | Form C-103 Revised July 18, 2013 | |
|---|--|---|--|---------|
| <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Natural Resources | | WELL API NO. | |
| <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | 30-025-42970 5. Indicate Type of Lease | |
| <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 87505 | Santa Fe, NM 87505 | | 6. State Oil & Gas Lease No. | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BARRATON ED | | | 7. Lease Name or Unit Agreement Name | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | | Lomas Rojas 26 State Com | |
| 1. Type of Well: Oil Well Gas Well Other | | | 8. Well Number 703H | |
| 2. Name of Operator EOG Resources, Inc. | | 9. OGRID Number 7377 | | |
| 3. Address of Operator P.O. Box 2267 Midland, TX 79702 | | 10. Pool name or Wildcat WC-025 G-09 S253336D; Upper Wolfcamp | | |
| 4. Well Location B 721 North 1985 East | | | | |
| Unit Letter: | feet from the | line and | feet from the | line |
| Section 26 | Township 25S R 11. Elevation (Show whether DR | ange 33E | NMPM County Lea | |
| 3344' 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 ☐ ALTERING CASIN | | | | OINO 🗆 |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL | | | | |
| PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB | | | | |
| DOWNHOLE COMMINGLE | | | | |
| CLOSED-LOOP SYSTEM OTHER: | | OTHER: | | |
| 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. | | | | |
| | | | | |
| ✓ 12/15/15 Spud 14-3/4" hole. Ran 27 jts 10-3/4", 40.5#, J55 STC casing set at 1159'. | | | | |
| 12/16/15 Cement lead w/ 544 sx Class C, 13.5 ppg, 1.74 CFS yield; | | | | |
| tail w/ 179 sx Class C, 14.8 ppg, 1.34 CFS yield. | | | | |
| Circulated 75 bbls cement to surface. WOC 20 hrs. Tested casing to 1500 psi for 30 minutes. Test good. | | | | |
| Resumed drilling 9-7/8" hole. | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Spud Date: 12/15/15 | Rig Release Da | ate: | | |
| | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | |
| | | | | |
| SIGNATURE TITLE Regulatory Analyst | | 12/17/2 | .015 | |
| Type or print name Stan Wagne | er / E-mail addres | s: | PHONE: 432-68 | 86-3689 |
| For State Use Only | or State Use Only | | | 141 |
| APPROVED BY: | TITLE | etroieum Engine | DATE 01/15 | 4/16 |
| APPROVED BY: DATE 1/14/16 Conditions of Approval (if any): | | | | |