

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

<b>HOBBBS OGD</b> <b>DEC 27 2016</b> <b>RECEIVED</b>		WELL API NO. 30-025-43456	
OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
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.)		6. State Oil & Gas Lease No.	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		7. Lease Name or Unit Agreement Name Neptune 10 State Com	
2. Name of Operator EOG Resources, Inc.		8. Well Number 505H	
3. Address of Operator P.O. Box 2267 Midland, TX 79702		9. OGRID Number 7377	
4. Well Location Unit Letter M : 468 feet from the South line and 411 feet from the West line Section 10 Township 24S Range 33E NMPM County Lea		10. Pool name or Wildcat Triple X; Bone Spring, West	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3615' 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.

12/15/16 Ran 93 jts 9-5/8", 40#, J55 LTC casing and 26 jts 9-5/8", 40#, HCK55 LTC casing set at 5138'.  
12/16/16 Cement lead w/ 1160 sx Class C, 12.7 ppg, 2.37 CFS yield;  
tail w/ 308 sx Class C, 14.8 ppg, 1.37 CFS yield.  
Circulated 308 sx cement to surface. WOC 12 hrs.  
Tested casing to 2500 psi for 30 minutes. Test good.  
Resumed drilling 8-3/4" hole.

Spud Date:

12/11/16

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 Analyst DATE 12/19/2016  
Type or print name Stan Wagner E-mail address: \_\_\_\_\_ PHONE: 432-686-3689  
**For State Use Only**  
APPROVED BY: Mary Brown TITLE AO/II DATE 12/29/2016  
Conditions of Approval (if any): \_\_\_\_\_