Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
Office <u>District I</u> – (575) 393-6161 Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	WELL API NO. 30-025-42580
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Sonto Fo NIM 87505	STATE FEE
<u>District IV</u> – (505) 476-3460 Santa FC, 1110 87505 1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505 SUNDRY NOTICES AND REPORTS ON WELLS	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	Condor 32 State
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well Number 701H
2. Name of Operator EOG Resources, Inc.	9. OGRID Number 7377
3. Address of Operator	10. Pool name or Wildcat
P.O. Box 2267 Midland, TX 79702	WC-025 G-09 S253336D Upper WC
4. Well Location Unit Letter A 160 feet from the North line and 937	feet from the East line
Section 32 Township 25S Range 34E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
3321' 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 CASING	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
CLOSED-LOOP SYSTEM APD Extension 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.	
EOG Resources requests a 1-year extension to our approved APD for this well.	
This APD is currently set to expire on 5/20/2017.	
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 () con TITLE Regulatory Analyst DATE 4/05/2017	
Stan Wagner	422 686 2680
Type or print name E-mail address:	PHONE: 432-080-3089
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APPROVED BY:	DATE 9/03/12
Conditions of Approval (if any):	

Salar Salar