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 5/410 District IV = (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICE SAMD 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 C Gas Well Other 2. Name of Operator EOG Resources, Inc.	Form C-103 Revised July 18, 2013 WELL API NO. 30-025-44116 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name Condor 32 State 8. Well Number 705H 9. OGRID Number 7377
3. Address of Operator P.O. Box 2267 Midland, TX 79702	10. Pool name or Wildcat Bobcat Draw; Upper Wolfcamp
4 Well Location	
Unit Letter B : 220 feet from the North line and 99	feet from theline
Section 32 Township 25S Range 34E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM County Lea
3321' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: OTHER:	ILLING OPNS. P AND A
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.	
12/29/17 Resumed drilling 12-1/4" hole. 12/31/17 Ran 9-5/8", 40#, J-55 LTC (0'-4032') Ran 9-5/8", 40#, HCK-55 LTC (4032'-5203') Cement lead w/ 910 sx Class C, 42.7 ppg, 2.37 CFS yield; tail w/ 410 sx Class C, 14.8 ppg, 1.45 CFS yield. Circulated 140 bbls cement to surface. Tested casing to 2300 psi for 30 minutes. Test good. ✓ 01/01/18 Resumed drilling 8-3/4" hole.	
Spud Date: 10/27/17 Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Stan Way TITLE Regulatory Analyst	DATE
Type or print name Stan Wagner E-mail address:	PHONE:
For State Use Only APPROVED BY: Aren Sharp TITLE Ataff Mgr DATE 2-8-18 Conditions of Approval (if any):	