| Submit 1 Copy To Appropriate District State of New Office  |                              |             |   | Form C-103<br>Revised July 18, 2013 |
|--|------------------------------|-------------|---|-------------------------------------|
| District I – (575) 393-6161 Energy, Minerals and Natural Resources<br>1625 N. French Dr., Hobbs, NM 88240  |                              |             | WELL API NO.                                  |                                     |
| <u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 88210   | District II - (575) 748-1283 |             | 30-025-43859                                  |                                     |
| $\frac{\text{District III} - (505) 334-6178}{1220 \text{ South St. Francis Dr.}}$  |                              |             | 5. Indicate Type of Lease<br>STATE X FEE      |                                     |
| 1000 Rio Brazos Rd., Aztec, NM 87410     Santa Fe, NM 87505       District IV - (505) 476-3460     Santa Fe, NM 87505  |                              | 7505        | 6. State Oil & Gas Lease No.                  |                                     |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505   | A A 🖌                        | BBS OCD     |   |                                     |
|  | TICES AND REPORTS ON WELLS   | JEDS VV     | 7. Lease Name or Unit                         | Agreement Name                      |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH 2 2018                |                              |             |   | 34 STATE COM                        |
| PROPOSALS.)  |                              |             | 8. Well Number 7                              |                                     |
| 1. Type of Well: Oil Well Gas Well Other   2. Name of Operator RECEIVED  |                              |             | /   | 709H                                |
| 2. Name of Operator EOG RESOURCES INC  |                              |             | 9. OGRID Number                               | 7377                                |
| 3. Address of Operator<br>PO BOX 2267 MIDLAND, TX 79702  |                              |             | 10. Pool name or Wildo<br>WC025 G09 S243336I; |                                     |
| 4. Well Location   |                              |             |   |                                     |
| Unit Letter O  | 275' feet from the SOUTH     |             |   |                                     |
| Section 34   |                              |             | NMPM Cou                                      | nty LEA                             |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3467' GR   |                              |             |   |                                     |
| 12. Check American Deck Indiana Nickey (Nickey Deck) Other Dete  |                              |             |   |                                     |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |                              |             |   |                                     |
|  |                              |             |   |                                     |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A   |                              |             |   |                                     |
| PULL OR ALTER CASING I MULTIPLE COMPL CASING/CEMENT JOB  |                              |             |   |                                     |
|  |                              |             |   |                                     |
| CLOSED-LOOP SYSTEM   |                              | OTHER: Comp | lation  | $\overline{\nabla}$                 |
| OTHER: OTHER: OTHER: Completion M<br>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.   |                              |             |   |                                     |
| 08/22/2018 Rig released  |                              |             |   |                                     |
| 08/27/2018 MIRU prep to frac -Test void to 5000 psi, seals & flanges to 8500 psi   |                              |             |   |                                     |
| 09/16/2018 Begin perf & frac<br>09/30/2018 Finish 39 stages perf & frac, 12,684-22,583' 2100 3 1/8'' shots, 24,166,801 lbs   |                              |             |   |                                     |
| proppant + 335,855 bbls load fluid   |                              |             |   |                                     |
| 10/04/2018 Drilled out plugs and clean out wellbore  |                              |             |   |                                     |
| 10/06/2018 Opened well to flowback<br>Date of First Production   |                              |             |   |                                     |
|  |                              |             |   |                                     |
|  |                              |             |   |                                     |
|  |                              |             |   |                                     |
| Spud Date: 06/03/2018  | Rig Release Dat              | e: 08/22/2  | 018   |                                     |
|  |                              |             | 010   |                                     |
| ·  |                              |             |   |                                     |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.   |                              |             |   |                                     |
| Ka Maddal  |                              |             |   |                                     |
| SIGNATURE MULACY TITLE Regulatory Analyst DATE 10/18/2018  |                              |             |   |                                     |
| Type or print name Kay Maddox E-mail address: kay_maddox@eogresources.com PHONE: 432-686-3658  |                              |             |   |                                     |
| For State Use Only   |                              |             |   |                                     |
| APPROVED BY DATE Sharp TITLE Stuff May DATE 10-24-18   |                              |             |   |                                     |
| Conditions of Approval (if any):   |                              |             |   |                                     |

-