Submit I Copy To Appropriate District State of New	Mexico	Form C-103
	Energy, Minerals and Natural Resources	
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 OIL CONSERVATION		
<u>District III</u> – (505) 334-6178 1220 South St		5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV - (505) 476-3460 Santa - Santa	87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PROPOSALS TO A		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM CLUTTER SUCH		Ares 4 State
PROPOSALS.)   1. Type of Well: Oil Well   Gas Well   Other		8. Well Number 202H
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		Triple X; Bone Spring
4. Well Location Unit Letter O : 804 feet from the South line and 1730 feet from the East line		
Unit Letter       :       feet from the       line and       feet from the       line         Section       4       Township       24S       Range       33E       NMPM       County       Lea		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3581 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		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PANDA		
PULL OR ALTER CASING  MULTIPLE COMPL  OWNHOLE COMMINGLE	CASING/CEMEN	ТЈОВ
OTHER: OTHER: OTHER: III OTHER: III OTHER:		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
10/22/18 Spud 17-1/2" hole		
10/23/18 Run 13-3/8", 54.5#, J55, STC (0'-1342') Cmt lead 1055 sx, Class C, 13.5 ppg, 1.72 yld   ∕		
Tail 265 sx Class C, 14.8 ppg, 1.33 yld		
Test to 1500 psi/30 min - good 🛛 🗸 🗸		
Release Pre-set rig.		
Spud Date: 10/22/18 Rig Release	Date:	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE AUGU AMUTA TITLE Regulatory Analyst DATE 11/12/18		
Renee' varratt 432-686-3644		
Type or print name E-mail address: PHONE: PHONE:		
Engine#		
APPROVED BY:		
Conditions of Approval (if any):		