Office	To Appropriate Distri	5	tate of New M	lexico tural Resources C	Ĵ	Form Revised July 1		
	Dr., Hobbs, NM 8824		interais and 14a إ	IOBBS	WELL API NO.	30-025-425		
	Ártesia, NM 88210		NSERVATIO	- 4 2008	5. Indicate Type of			
	os Rd., Aztec, NM 874		0 South St. Fr. Santa Fe, NM		STATE 5. State Oil & Gas			
<u>District IV</u> – (5 1220 S. St. Fra 87505	05) 470-3460 ncis Dr., Santa Fe, NM		, inter i e, i (i)	RECEIVE	g. State Off & Gas	s Lease no.		
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					7. Lease Name or Unit Agreement Name COCKATOO BWO STATE			
PROPOSALS.) 1. Type of Well: Oil Well 🔀 Gas Well 🗌 Other					8. Well Number	1H		
2. Name of Operator EOG RESOURCES INC					9. OGRID Number 7377			
3. Address		) BOX 2267 MIDLA	10. Pool name or Wildcat WILSON;BONE SPRING					
4. Well Location Unit Letter M : 200 feet from the SOUTH line and 660 feet from the WEST line								
	t Letter <u>IVI</u> tion 19	<u> </u>		Range 35E	NMPM		line	
			Show whether D	R, RKB, RT, GR, etc.)		County LEA		
3629' GR								
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data								
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF								
	REMEDIAL WORH	CHANGE PLUG AND AB		REMEDIAL WORI		ALTERING ČASIN P AND A		
	TER CASING			CASING/CEMENT			PNR	
							,	
OTHER:	OP SYSTEM			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 plugged and abandoned this well using the following procedure:								
(11/10/2018)Current TD was 35', fill 30"X15"X20" hole w/ Wallach ready cement, verify cement at surface								
$\smile$				-				
				proved for Pluggin				
				der bond is retaine npletion of the C-1				
	Report of Well Plugging, which may be found on							
			the Re	OCD web page un storation Due By	11-10-2019			
	r							
Spud Date:	06/30	)/2015	Rig Release I	Date:				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.								
SIGNATURE	Kay	Maddox	TITLE Re	gulatory Analyst	DA	re11/20/201	8	
Type or print For State Us	name <u>Kay Ma</u> e Only	xobb	E-mail addre	ss: kay_maddox@eog	gresources.com PHC	DNE: <u>432-686-3</u>	658	
	$\overline{\mathcal{N}}$	Lax LI	-TITLE P.	ΨС		E 11/26/2	NR	
APPROVED Conditions of	Approval (if any)	:		F. 9,	DA'I	<u> </u>	<u>40</u>	

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