

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 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
JAN 18 2019

WELL API NO.	30-025-31929
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name TRISTE DRAW 36 STATE	
8. Well Number	1H
9. OGRID Number	7377
10. Pool name or Wildcat	SWD;DEVONIAN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3682' GR	

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO CHANGE TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-103) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other SWD

2. Name of Operator  
EOG RESOURCES INC

3. Address of Operator  
PO BOX 2267 MIDLAND, TX 79702

4. Well Location  
Unit Letter E : 1980 feet from the NORTH line and 510 feet from the WEST line  
Section 36 Township 23S Range 32E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3682' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input type="checkbox"/>	

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 this well:

01/04/2019 MIRU  
01/05/2019 Spot 25 sxs CL C cmt @ 6787', WOC  
01/08/2019 Tag TOC @ 6607', NMOCD apprvd tag, set CIBP @ 5220'  
01/09/2019 Tag CIBP @ 5229', press tst good, pmp 55 sxs CL C cmt CTOC @ 4663', tag TOC @ 4623',  
pmp 25 sxs CLC cmt @ 1400', CTOC @ 1147'  
01/10/2019 Tag TOC @ 1162', perf csg @ 702'  
01/11/2019 Sqz perms W/260 sxs CL C cmt, circ cmt to surface, filled hole W/2.5 bbls cmt, WOC, verified cement

Spud Date:

5/12/1993

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Kay Maddox

TITLE Regulatory Analyst

DATE 01/17/2019

Type or print name Kay Maddox

E-mail address: kay\_maddox@eogresources.com PHONE: 432-686-3658

For State Use Only

APPROVED BY:

Kerry Fortner

TITLE

Compliance Officer A

DATE

1-18-19

Conditions of Approval (if any):