

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

HOBBS
APR 04 2019
RECEIVED

WELL API NO. 30-025-45527
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 GEM 36 STATE COM
8. Well Number 201H
9. OGRID Number 7377
10. Pool name or Wildcat [97838] JENNINGS; UPPER BONE SPRING SHALE

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator EOG RESOURCES	
3. Address of Operator P O BOX 2267, MIDLAND TX 79702	
4. Well Location Unit Letter <u>A</u> : <u>618</u> feet from the <u>NORTH</u> line and <u>1182</u> feet from the <u>EAST</u> line Section <u>36</u> Township <u>25S</u> Range <u>32E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3426 GL	

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: DRILL CSG <input checked="" 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.

03/28/19 8-3/4 hole
03/28/19 1st Intermediate Casing @ 4,697'
Ran 9-5/8", 40# J-55 LTC (0' - 3,706')
Ran 9 5/8" 40# HCK-55 LTC (3,706' - 4,697')
Lead Cement w/ 250 sx Class C (2.24 yld, 12.7 ppg), followed w/860 sx Class C (2.32 yld, 12.7 ppg), Tail w/400 sx Class C (1.42 yld, 14.8 ppg)
Test casing to 2,200 psi for 30 min - OK. Circ 201 sx cement to surface Resume Drilling 8-3/4" hole

1 P.M.

Spud Date: 03/10/19

Rig Release Date:

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

SIGNATURE Emily Follis TITLE Sr. Regulatory Administrator DATE 04/02/19

Type or print name Emily Follis E-mail address: emily_follis@eogresources.com PHONE: 432-848-9163
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 04/04/19
Conditions of Approval (if any):