

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

WELL API NO. 30-025-45464
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 CARAVAN 28 STATE COM
8. Well Number #602H
9. OGRID Number 7377
10. Pool name or Wildcat [96682] TRISTE DRAW, BONE SPRING, EAST

**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-40) FOR SUCH PROPOSALS.)

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

2. Name of Operator  
EOG RESOURCES

3. Address of Operator  
P O BOX 2267, MIDLAND TX 79702

4. Well Location  
Unit Letter D : 481 feet from the NORTH line and 361 feet from the WEST line  
Section 28 Township 24S Range 33E NMPM County LEA COUNTY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3532 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.

04/14/19 20" Conductor hole  
04/14/19 12-1/4" HOLE  
04/14/19 Surface Casing @ 1,334'  
Ran 9-5/8" 40# J-55 LTC  
Lead Cement w/ 585 sx Class C (1.76 yld, 13.5 ppg), Tail w/ 90 sx Class C (1.36 yld, 14.8 ppg)  
Test casing to 1,500 psi for 30 min - good Circ 351 sx cement to surface Resume Drilling 8-3/4" hole

Spud Date:

04/14/19

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 04/15/19

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  DATE 04/19/19  
Conditions of Approval (if any):