

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.	30-025-45629
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	HEARNS 34 STATE
8. Well Number	405H
9. OGRID Number	7377
10. Pool name or Wildcat	[59900] TRIPLE X; BONE SPRING

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL TO 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	
2. Name of Operator	EOG RESOURCES
3. Address of Operator	P O BOX 2267, MIDLAND TX 79702
4. Well Location	Unit Letter <u>P</u> : <u>300</u> feet from the <u>SOUTH</u> line and <u>281</u> feet from the <u>EAST</u> line Section <u>34</u> Township <u>24S</u> Range <u>33E</u> NMPM County <u>LEA</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3485 HL

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.

04/20/19 8-3/4" hole  
04/20/19 1st Intermediate Casing @ 5,080'  
Ran 9-5/8", 36# J-55 LTC (0' - 3,773')  
Ran 9-5/8", 36# HCK-55 LTC (3,773' - 5,080')  
Lead Cemented w/ 1,095 sx Class C (2.32 yld, 12.7 ppg), follow w/280 sx Class C (1.42 yld, 14.8 ppg), Test casing to 1,800 psi, Circ (130 bbls)  
Tail w/ 315 sx cement to surface Resume Drilling 8-3/4" hole.

Spud Date:

04/04/19

Rig Release Date:

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

SIGNATURE

TITLE Sr. Regulatory Administrator

DATE 04/08/19

Type or print name Emily Follis

E-mail address: emily\_follis@eogresources.com PHONE: 432-848-9163

For State Use Only

Petroleum Engineer

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):

04/30/19