

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
APR 12 2019

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|--|--|
| WELL API NO. | 30-025-45369 |
| 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 | 601H |
| 9. OGRID Number | 7377 |
| 10. Pool name or Wildcat | TRISTE DRAW, BONE SPRING, EAST |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | 3524' GR |

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 PROPOSALS.)

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|--|
| 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 INC |
| 3. Address of Operator PO BOX 2267 MIDLAND, TX 79702 |
| 4. Well Location Unit Letter C : 483' feet from the NORTH line and 1444' feet from the WEST line Section 28 Township 24S Range 33E NMPM County LEA |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3524' 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"/> | 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 type="checkbox"/> | P AND A <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | | | |
| CLOSED-LOOP SYSTEM <input type="checkbox"/> | | | |
| OTHER: <input type="checkbox"/> | | OTHER: Completion <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.

02/06/2019 Rig released
02/09/2019 MIRU prep to frac -Test void to 5000 psi, seals & flanges to 8500 psi
02/21/2019 Begin perf & frac
03/08/2019 Finish 33 stages perf & frac, 12,320 - 22,446' 1980 3 1/8" shots 25,404,040 lbs
proppant + 379,323 bbls load fluid
03/11/2019 Drilled out plugs and clean out wellbore
03/13/2019 Opened well to flowback
Date of First Production

Spud Date:

12/21/2018

Rig Release Date:

02/06/2019

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 04/10/2019

Type or print name Kay Maddox E-mail address: kay_maddox@eogresources.com PHONE: 432-686-3658

For State Use Only

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 4-30-19
Conditions of Approval (if any):