

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

**HOBBS OGD**

**MAY 01 2019**

**RECEIVED**

## OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO. 30-025-45630
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 406H
9. OGRID Number 7377
10. Pool name or Wildcat 59900] TRIPLE X; BONE SPRING

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)</p>	
<p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p>	
<p>2. Name of Operator EOG RESOURCES</p>	
<p>3. Address of Operator P O BOX 2267, MIDLAND TX 79702</p>	
<p>4. Well Location Unit Letter <u>P</u> : <u>300</u> feet from the <u>SOUTH</u> line and <u>248</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></p>	
<p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3485 GL</p>	

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

#### NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
 DOWNHOLE COMMINGLE ☐  
 CLOSED-LOOP SYSTEM ☐  
 OTHER: ☐

#### SUBSEQUENT REPORT OF:

- REMEDIAL WORK ☐ ALTERING CASING ☐  
 COMMENCE DRILLING OPNS. ☒ P AND A ☐  
 CASING/CEMENT JOB ☒  
 OTHER: DRILL CSG ☒

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.

04/17/19 8-3/4 hole  
 04/17/19 Production Casing @ 15,060' MD, 10,594' TVD  
 Ran 5-1/2", 20#, ICYP110, Geoconn (MJ @ 9,945')  
 Lead Cement w/ 580 sx Class C (3.48 yld, 10.5 ppg), Tail w/ 1,245 sx Class H (1.19 yld, 14.45 ppg)  
 Test casing to 1,850 psi, Did not circ cement to surface, TOC @ 813' by Calc Waiting on CBL RR  
 Completion to follow

✓ P.M.

Spud Date:

04/05/19

Rig Release Date:

04/20/19

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 04/25/19

Type or print name Emily Follis

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

For State Use Only

APPROVED BY:

*Emily Follis*

TITLE

DATE

05/06/19

Conditions of Approval (if any):

✓