

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.	30-025-45692
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 SAVAGE 2 STATE COM	
8. Well Number	505H
9. OGRID Number	7377
10. Pool name or Wildcat WC025 G07 S243225C; LWR 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 ☒ Gas Well ☐ Other ☐

2. Name of Operator  
EOG RESOURCES INC

3. Address of Operator  
PO BOX 2267 MIDLAND, TX 79702

4. Well Location  
Unit Letter B : 403 feet from the NORTH line and 3108 feet from the WEST line  
Section 02 Township 25S Range 32E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3529' 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 checked="" 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: <input 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.

04/08/2019 LOST HOLE @ 9866'  
05/13/2019 SET CEMENT RETAINER @ 3810'  
05/14/2019 PMP 300 SXS CL C CMT BELOW CMT REATINER, 500 PSI, STUNG OUT OF RETAINER, PMP 50 SXS CEMENT ON TOP OF RETAINER, CALC TOC @ 3650', PUH TO 1105', SPOT 50 SXS CL C CEMENT, CALC TOC @ 950'  
05/15/2019 PMP 50 SXS CL C CEMENT @ 100' CIRCULATED CEMENT TO SURFACE

TOP OFF AT SURFACE W/10 SXS CL C CEMENT - VERIFIED CEMENT

WELL IS PLUGGED AND ABANDONED

Spud Date:

03/27/2019

Rig Release Date:

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 07/09/2019

Type or print name Kay Maddox

E-mail address: kay\_maddox@eogresources.com PHONE: 432-686-3658

For State Use Only

APPROVED BY:

*Kerry Futer*

TITLE

*Compliance Officer A*

DATE

*7-16-19*

Conditions of Approval (if any):