

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

HOBBS OCD

DEC 19 2019

RECEIVED

WELL API NO. 30-025-46451
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 313188
7. Lease Name or Unit Agreement Name OSPREY 10
8. Well Number #302H
9. OGRID Number 7377
10. Pool name or Wildcat 97369 RED HILLS; 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-100) FOR SUCH PROPOSALS.)	
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	
3. Address of Operator P O BOX 2267, MIDLAND TX 79702	
4. Well Location Unit Letter <u>N</u> : <u>200</u> feet from the <u>SOUTH</u> line and <u>1700</u> feet from the <u>WEST</u> line Section <u>10</u> Township <u>25S</u> Range <u>34E</u> NMPM County <u>LEA CO</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3335' 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.

11/16/19 20" Conductor @ 115
11/26/19 17-1/2" HOLE
11/26/19 Surface Hole @ 1,025' MD, 1,025' TVD
Casing shoe @ 1,010' MD
Ran 13-3/8" 54.5# J-55 STC
Lead Cement w/ 555 sx Class C (1.79 yld, 13.5 ppg), Trail w/230 sx Class C (1.35 yld, 14.8 ppg)
Test casing to 1,500 psi for 30 min - Good. Circ 271 sx cement to surface resume drilling 12-1/4" hole

12/12/19 12-1/4" hole
12/12/19 1st Intermediate Hole @ 5,750' MD, 5,706' TVD
Casing shoe @ 5,329' MD
Ran 9-5/8", 40#, J-55 LTC (0' - 3,986')
Ran 9-5/8", 40#, HCK-55 LTC (3,986' - 5,329')
Lead Cement w/ 1,090 sx Class C (2.26 yld, 12.7 ppg), Trail w/ 335 sx Class C (1.39 yld, 14.8 ppg)
Test casing to 2,100 psi for 30 min - Good. Circ 186 sx cement to surface Resume drilling 8-3/4" hole

Spud Date:

11/16/19

Rig Release Date:

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

SIGNATURE Emily Folles TITLE Sr. Regulatory Administrator DATE 12/16/19

Type or print name Emily Folles E-mail address: emily_folles@eogresources.com PHONE: 432-848-9163
For State Use Only

APPROVED BY: [Signature] TITLE DATE 12/29/19
Conditions of Approval (if any):