| ceived by Opp Po Appropriate Bride:1 | 1 PM Sta | ate of New Mex | xico | | Form C-1 | ge 1 of 3 |
|--|----------------------------|--------------------|------------------------------|--------------------------|------------------------------|-----------|
| Office <u>District I</u> – (575) 393-6161 | Energy, Mi | nerals and Natur | al Resources | | Revised July 18, 2 | 013 |
| 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 | | | | WELL API | NO. 80-025-47971 | |
| 811 S. First St., Artesia, NM 88210 | | SERVATION | | | Гуре of Lease | |
| <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | | STAT | TE FEE | |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM | Santa Fe, NM 87505 | | | 6. State Oil | & Gas Lease No. | |
| 87505 | | | | NA | | |
| | TICES AND REPOR | | CODACK TO A | 7. Lease Na | me or Unit Agreement Nam | e |
| (DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPL | | | | Valaint 24 | Fed Com | |
| PROPOSALS.) | C W.11 | 1 | | 8. Well Nur | | |
| 1. Type of Well: Oil Well 2. Name of Operator | Gas Well Ot | her | | 9. OGRID Number | | |
| | sources, Inc. | | | 737 | | |
| 3. Address of Operator | | | | 10. Pool name or Wildcat | | |
| P.O. Box 2267, Midland, | TX 79702 | | | WC-025 | G-08 S253235G; Lwr B | S |
| 4. Well Location | · 2053 feet fro | Couth | | 2260 - | Foot | |
| Unit Letter J | reet in | om the South | | | | ne |
| Section 24 | Towns | | nge 32E RKB, RT, GR, etc. | | Lea County | |
| | 11. Elevation (Si | now whether DK, | KKD, K1, GK, eic. | ' I | | |
| | | | | | | |
| 12. Check | Appropriate Box | to Indicate Na | ature of Notice, | Report or O | ther Data | |
| NOTICE OF I | NTENTION TO | . | SHB | SECLIENT | REPORT OF: | |
| PERFORM REMEDIAL WORK | | | REMEDIAL WOR | | ☐ ALTERING CASING | |
| TEMPORARILY ABANDON | CHANGE PLAN | s \Box | COMMENCE DR | ILLING OPNS. | P AND A | |
| PULL OR ALTER CASING | | 1PL 🗆 | CASING/CEMEN | T JOB | | |
| DOWNHOLE COMMINGLE | = | | | | | |
| CLOSED-LOOP SYSTEM OTHER: | J | | OTHER: PL | _C-681 | | X |
| 13. Describe proposed or com | | | ertinent details, an | d give pertinen | t dates, including estimated | |
| of starting any proposed v | | 9.15.7.14 NMAC | . For Multiple Co | mpletions: Att | ach wellbore diagram of | |
| proposed completion or re | completion. | | | | | |
| Pursuant to Administr | rative Order DI | C 681 EOG | Pasources In | ر"EOG"۱ | respectfuly request | |
| to add this well author | | | | , | | |
| S2 of Section 24, Tov | | • . | | | - | د |
| subject well will be all | • | • | | • | ii production nom the | , |
| Subject Well Will be all | ocated dailing re | badings ironi | ilidividuai wei | i ilicicio. | | |
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| | | | | | | |
| | | | | | | |
| | | | | | | |
| Carrel Data | | Dia Dalassa Da | | | | |
| Spud Date: | | Rig Release Dat | .e: | | | |
| | | | | | | |
| I hereby certify that the information | n above is true and c | complete to the be | st of my knowledg | ge and belief. | | |
| | | • | | | | |
| SIGNATURE Lisa Trans | cher | TITLE Real | ulatory Specia | ılist | DATE 3/9/2021 | |
| SIGNATURE | | | | | | |
| Type or print name Lisa Trasc | cher | _ E-mail address: | lisa_trascher@eo | gresources.cor | m PHONE: 432-347-633 | 1 |
| For State Use Only | | | | | | |
| APPROVED BY: Dean | a Mollure | TITLE Petrole | eum Fnaineer | | DATE 03/09/2021 | |
| Conditions of Approval (if any): | | 111_D1 CHOK | Sam Enginoor | | _DAID_OOIOOIZOZI | |

1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 1000 Rio Brazos Road, Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170 1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505

FORM C-102 Revised August 1, 2011 Submit one copy to appropriate OCD - HOBBS **District Office** 11/05/2020 RECEIVED AMENDED REPORT

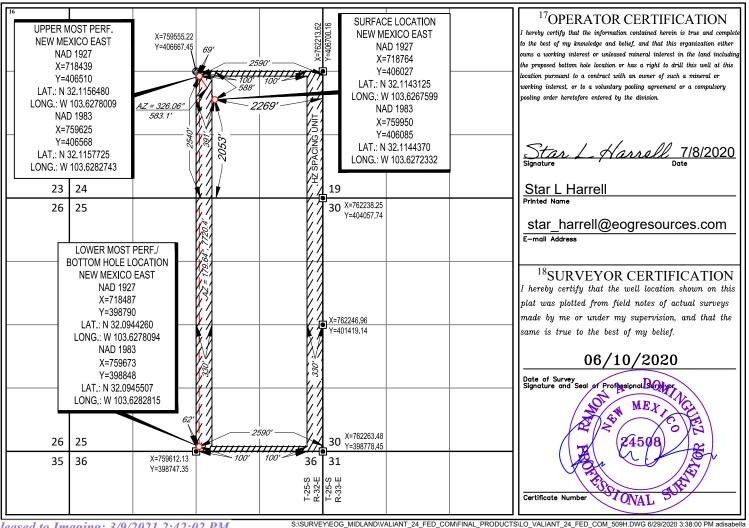
WELL LOCATION AND ACREAGE DEDICATION PLAT

| ¹ API Number ² Pool Code | | | ³ Pool Name | | |
|--|-------------------------|-----------------------------|--------------------------------------|--------------------------|--|
| 30-025- 47971 | | 97903 | WC-025 G-08 S253235G;LWR BONE SPRING | | |
| ⁴ Property Code | | ⁵ Pr | operty Name | ⁶ Well Number | |
| 325949 | VALIANT 24 FED COM 509H | | | | |
| ⁷ OGRID N₀. | | ⁸ O _I | perator Name | ⁹ Elevation | |
| 7377 | | EOG RES | SOURCES, INC. | 3459' | |

¹⁰Surface Location

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|-------------------|--|------------|-----------------|----------------------|---------------|------------------|---------------|----------------|--------|
| J | 24 | 25-S | 32-E | - | 2053' | SOUTH | 2269' | EAST | LEA |
| | 11Bottom Hole Location If Different From Surface | | | | | | | | |
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
| 0 | 25 | 25-S | 32-E | - | 100' | SOUTH | 2590' | EAST | LEA |
| 12Dedicated Acres | ¹³ Joint or I | nfill 14Co | nsolidation Cod | le ¹⁵ Ord | er No. | | | | |
| 480.00 | | | | | | | | | |

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720

811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 District III
1000 Rio Brazos Rd., Aztec, NM 87410

Phone:(505) 334-6178 Fax:(505) 334-6170 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. **Santa Fe, NM 87505**

CONDITIONS

Action 20251

CONDITIONS OF APPROVAL

| Operator: | | | OGRID: | Action Number: | Action Type: |
|-------------------|---------------|------------------|--------|----------------|--------------|
| EOG RESOURCES INC | P.O. Box 2267 | Midland, TX79702 | 7377 | 20251 | C-103Z |

| OCD Reviewer | Condition |
|--------------|---|
| dmcclure | Please review the content of the Administrative Order and approved request(s) to ensure you are familiar with the authorities granted and any conditions of approval. |