

Submit a 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

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.)		WELL API NO. 30-025-48388
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator EOG RESOURCES INC		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 2267 MIDLAND, TX 79702		7. Lease Name or Unit Agreement Name HEARTTHROB 17 STATE COM
4. Well Location Unit Letter <u>B</u> : <u>680'</u> feet from the <u>NORTH</u> line and <u>1322'</u> feet from the <u>EAST</u> line Section <u>17</u> Township <u>24S</u> Range <u>33E</u> NMPM County <u>LEA</u>		8. Well Number 103H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3593' GR		9. OGRID Number 7377
		10. Pool name or Wildcat TRIPLE X; BONE SPRING WEST

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <u>Completion</u> <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.

10/12/2021 RAN L-80 2 7/8" TBG AND GAS LIFT VALVES, SET TBG @ 9,247' PUT WELL BACK ON PRODUCTION

Spud Date:

1/27/2021

Rig Release Date:

3/13/2021

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

SIGNATURE Kristina Agee TITLE Sr. Regulatory Administrator DATE 11/4/2021

Type or print name Kristina Agee E-mail address: kristina_agee@eogresources.com PHONE: 432-686-6996

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

District I

1625 N. French Dr., Hobbs, NM 88240
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Santa Fe, NM 87505

CONDITIONS

Action 60345

CONDITIONS

Operator: EOG RESOURCES INC P.O. Box 2267 Midland, TX 79702	OGRID: 7377
	Action Number: 60345
	Action Type: [C-103] Sub. Drilling (C-103N)

CONDITIONS

Created By	Condition	Condition Date
plmartinez	None	12/3/2021