Submit 3 Copies To Appropriate District Office	State of New Mo			Form C-103	
District I	Energy, Minerals and Natu	irai Resources	WELL API NO.	June 19, 2008	
1625 N. French Dr., Hobbs, NM 87240 District II OIL CONSERVATION DIVISION		30-015-37206			
District III 1220 South St. Francis Dr.		5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV		STATE X	FEE 🗌		
1220 S St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas	Lease No.	
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			7. Lease Name or Unit Agreement Name:		
PROPOSALS.)  1. Type of Well:				Parkway 23 State Com	
Oil Well X Gas Well Other			8. Well Number 2H	:	
2. Name of Operator			9. OGRID Number		
EOG Resources, Inc.  3. Address of Operator			7377 10. Pool name or Wildcat		
P.O. Box 2267 Midland, TX 79702			Turkey Track; Bone Spring		
4. Well Location	<del>-</del> "		<del></del>		
Unit Letter D:	760 feet from the No.		200 feet from	the West line	
Section 23		Range 29E	NMPM	County <b>Eddy</b>	
	11. Elevation (Show whether 33:	DR, RKB, RT, GR, ei	tc.)	And the state of t	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO: SUB			SEQUENT REP	ORT OF:	
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK				ALTERING CASING	
MPORARILY ABANDON			ING OPNS. 🔲	P AND A	
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JC			юв 🗆		
DOWNHOLE COMMINGLE					
OTHER:		OTHER: comple	tion	x	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.					
5/19/11 RIH w/ rods and p 5/21/11 Turned to sales.	numping assembly.		REC JUN NMOC	EIVED 08 2011 D ARTESIA	
Spud Date: 3/10/11	Rig Relea	ase Date:	4/08/11		
I hereby certify that the information a	bove is true and complete to the	e best of my knowledg	ge and belief.		
SIGNATURE	TIT	LE Regulato	ory Analyst	DATE <u>05/26/11</u>	
Type or print name Stan Wagner E-mail address: PHONE 432-686-3689					
For State Use Only Field Supervisor					
APPROVED BY WIND TITLE D'AU-1)					
APPROVED BY Double Stone Field Supervisor  Conditions of Approval (if any):  Subsequent (re) Completion reports to include current well bore diggram					