Submit 3 Copies To Appropriate District State of New Mexico Office Energy, Minerals and Natural Resources	Form C-103 June 19, 2008
1625 N. French Dr., Hobbs, NM 87240 District.II 1301 W. Grand Ave. Artesia NM 88210 OIL CONSERVATION DIVISION	WELL API NO. <u>30-015-39723</u> 5. Indicate Type of Lease
District III1220 South St. Francis Dr.1000 Rio Brazos Rd , Aztec, NM 87410Santa Fe, NM 87505	STATE <b>x</b> FEE
District IV	6. State Oil & Gas Lease No.
1220 S. 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	7. Lease Name or Unit Agreement Name:
PROPOSALS.) 1. Type of Well:	Elk Wallow 11 State 8. Well Number
Oil Well 🕱 Gas Well 🗌 Other	8. Well Number 8H
2. Name of Operator	9. OGRID Number
EOG Resources, Inc.	7377
3. Address of Operator P.O. Box 2267 Midland, TX 79702	10. Pool name or Wildcat Corral Draw; Bone Spring
4. Well Location	Corrar braw; Bone Spring
Unit Letter <u>B</u> : 170 feet from the North line and 2640 feet from the East line	
Section 11 Township 25S Range 29E	NMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, e.	tc.)
3056' GR	
12. Check Appropriate Box to Indicate Nature of Notice,	Report, or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	IOB X
OTHER: OTHER:	
<ol> <li>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.</li> </ol>	
4/7/12 TD @ 12189' MD.	
4/8/12 Ran 276 jts 5-1/2", 17#, HCP110 LTC casing set at 12180'.	
4/9/12 Cemented lead w/ 200 sx 50:40:0 Class C, 10.8 ppg, 3.67 yiel	
11.8 ppg, 2.37 yield; tail w/ 1250 sx $50:50:2$ Class H, 14.2 provide to be determined.	ppg, 1.28 yield.
Released rig.	RECEIVED
[]	APR <b>11</b> 2012
Spud Date:   3/25/12   Rig Release Date:	4/9/12 NMOCD ARTESIA
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE than Way TITLE Regulatory Analyst DATE 4/9/2012	
Type or print name <u>Stan Wagner</u> E-mail address:	PHONE <u>432-686-3689</u>
For State Use Only / / / /	
For State Use Only	st 4/11/2012.
APPROVED BY Conditions of Approval (if any):	<b>5</b> DATE <b>7</b> /1/2012