

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

**HOBBS OGD**

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

FEB 13 2017

**RECEIVED**

WELL API NO. 30-025-42460
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB-2066
7. Lease Name or Unit Agreement Name Nectarine BSQ State Com
8. Well Number 2H
9. OGRID Number 025575
10. Pool name or Wildcat Berry; Bone Spring, North
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,784' GR

**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.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
EOG Y Resources, Inc.

3. Address of Operator  
104 South Fourth Street, Artesia, NM 88210

4. Well Location  
 Unit Letter L : 2440 feet from the South line and 760 feet from the West line  
 Unit Letter D : 330 feet from the North line and 760 feet from the West line  
 Section 24 Township 21S Range 33E NMPM Lea County  
 Section 13 Township 21S Range 33E NMPM Lea County

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>5' new hole</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.

2/8/17 - Made 5' new hole. TD 65'. Hole size 20".

Note: 30" culvert with locking lid installed on 7/19/16.

Spud Date: 6/30/16 Rig Release Date:  

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

SIGNATURE Laura Watts TITLE Assistant Regulatory Lead DATE February 10, 2017  
 Type or print name Laura Watts E-mail address: laura\_watts@eogresources.com PHONE: 575-748-4272  
**For State Use Only**

APPROVED BY: MSB/ocd TITLE   DATE 2/14/2017  
 Conditions of Approval (if any):