

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

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

WELL API NO. 30-015-32028
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-2597
7. Lease Name or Unit Agreement Name FLORA AKF STATE
8. Well Number 4
9. OGRID Number 25575
10. Pool name or Wildcat LOST TANK; DELAWARE

**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  
PO BOX 2267 MIDLAND, TX 79702

4. Well Location  
 Unit Letter M : 990 feet from the SOUTH line and 330 feet from the WEST line  
 Section 2 Township 22S Range 31E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3510' GR

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 checked="" 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: <input 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 diagrams.

- 9/21/2018 MIRU, RIH tag 5.5 csg CIBP @ 6845', pooh pmp 25 sxs CL C cmt 6875-6622'
- 9/22/2018 Tag TOC @ 6610', press tst 5.5 csg, did not test, slow leak, RIH perf @ 5386', set tbg @ 5406', sqz w/50 sxs CL C cmt, to 4901'
- 9/25/2018 Tag TOC @ 5119', press tst csg to 500 psi, held RIH perf @ 4304', pmp 50 sxs CL C cmt to Calc TOC @ 3828'
- 9/26/2018 RIH w/tbg, tag TOC @ 3912', set EOT @ 1000', pmp 50 sxs cmt, Calc TOC @ 495', Tag TOC @ 569'
- 9/27/2018 RIH perf @ 150', could not inject, POOH, set EOT @ 200', pmp to surface 20 sxs cmt verify TOC

**ENTERED**  
*[Signature]*

This well has been plugged and abandoned

NM OIL CONSERVATION  
 ARTESIA DISTRICT

OCT 09 2018

RECEIVED

Spud Date:

Rig Release Date:

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

SIGNATURE Kay Maddox TITLE Regulatory Analyst DATE 09/27/2018

Type or print name Kay Maddox E-mail address: kay\_maddox@eogresources.com PHONE: 432-686-3658

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff DATE 10-9-18

Conditions of Approval (if any):