

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

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 30-015-20680
1 Type of Well Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other P&A <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 LG-864
3 Address of Operator 104 South Fourth Street, Artesia, NM 88210		7 Lease Name or Unit Agreement Name Boyd X State M Well
4 Well Location Unit Letter <u>F</u> <u>2080</u> feet from the <u>North</u> line and <u>1780</u> feet from the <u>West</u> line Section <u>16</u> Township <u>19S</u> Range <u>25E</u> NMPM <u>Eddy</u> County		8 Well Number 1
11 Elevation (Show whether DR, RKB, RT, GR, etc) 3485'GR		9 OGRID Number 7377
10 Pool name or Wildcat Seismic Monitor, Yeso		

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

NOTICE OF INTENTION TO		SUBSEQUENT REPORT OF	
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 diagram of proposed completion or recompletion

7/13/19 - NU BOP Set a 5-1/2" CIBP at 3700'
 7/16/19 - Tagged CIBP Loaded and circulated with 85 bbls plugging mud Pressure tested to 500 psi for 10 min, held good Pumped 25 sx Class "C" cement on top of CIBP to 3447' calc TOC Pumped a 25 sx Class "C" cement plug from 2300'-2047' calc TOC Perforated at 1200' Attempted injection rate into perfs to 500 psi, no rate Pumped a 25 sx Class "C" cement plug from 1250'-997' calc TOC WOC to tag
 7/17/19 - Tagged TOC at 947' Pumped a 25 sx Class "C" cement plug from 780'-527' calc TOC Perforate at 440' Attempted injection rate into perfs to 500 psi, no rate Pumped a 50 sx Class "C" cement plug from 520' and circulated up to surface Topped off casing with cement
 7/30/19 - Cut off wellhead and installed dry hole marker Cut off anchors and cleaned location **WELL IS PLUGGED AND ABANDONED**

Spud Date

Rig Release Date

Approved for plugging of well bore only
 Liability under bond is retained pending receipt of C 103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms www.enrmd.state.nm.us/oed

RECEIVED

AUG 01 2019

DISTRICT II-ARTESIA O.C.D.

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

SIGNATURE Tina Huerta TITLE Regulatory Specialist DATE July 31, 2019

Type or print name Tina Huerta E-mail address tina.huerta@eogresources.com PHONE 575-748-4168

APPROVED BY [Signature] TITLE Staff Mgr DATE 8/6/19
 Conditions of Approval (if any)