

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

2

WELL API NO. 30-015-46275
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 325165
7. Lease Name or Unit Agreement Name QUAIL 2 STATE COM
8. Well Number 706H
9. OGRID Number 7377
10. Pool name or Wildcat 98220 PURPLE SAGE; WOLFCAMP (GAS)

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 RESOURCES

3. Address of Operator
P O BOX 2267, MIDLAND TX 79702

4. Well Location
 Unit Letter C : 600 feet from the north line and 1629 feet from the WEST line
 Section 02 Township 26S Range 30E NMPM County EDDY CO, NM

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3213 GL

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> AMENDED 010/22/2020 OTHER: ALL DRILL CSG - REVISED <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.

11/28/19 6-3/4" hole
 11/28/19 Production Hole @ 15,763' MD, 11,133' TVD
 Casing shoe @ 15,740' MD, 11,126' TVD
 Ran 15,740' 5-1/2", 20#, EY HCP-110, RDT-BTX (Marker Joint @ 10,465' and 15,271')
 Lead Cement w/ 515 sx Class H (1.19 yld, 14.5 ppg)
 Did not circ cement to surface, TOC @ 7,696' by CBL RR Completion to follow

Amended page 2

Spud Date: 11/07/19

Rig Release Date: 11/29/19

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

SIGNATURE TITLE Sr. Regulatory Administrator DATE 01/22/2020

Type or print name Emily Follis E-mail address: emily_follis@eogresources.com PHONE: 432-848-9163

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

2/4/20 KS