

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

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

WELL API NO. <b>30-015-34422</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		7. Lease Name or Unit Agreement Name: <b>Nile 22 State Com</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	<b>RECEIVED</b>	8. Well Number <b>2H</b>
2. Name of Operator <b>EOG Resources Inc.</b>	<b>FEB 16 2006</b> <b>OCD-ARTESIA</b>	9. OGRID Number <b>7377</b>
3. Address of Operator <b>P.O. Box 2267 Midland, Texas 79702</b>		10. Pool name or Wildcat <b>Collins Ranch; Wolfcamp (Gas)</b>
4. Well Location Unit Letter <b>M</b> : <b>960</b> feet from the <b>South</b> line and <b>760</b> feet from the <b>West</b> line Section <b>22</b> Township <b>17S</b> Range <b>24E</b> NMPM County <b>Eddy</b>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3765 GR</b>		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b> 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 COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <b>completion</b> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12/28/05 **MIRU.**

12/30/05 **Perforate 7612'-8002', 0.48", 48 holes. Acidized w/ 1500 gals 15% HCL acid.**

12/31/05 **RDMO. Waiting on frac.**

01/17/06 **Frac w/ 6040 bbls fresh water, 20665 # 100 mesh, 48340 # 40/70 Ottawa, 26160 # 20/40 Brady w/ 10 Quality CO2. Perforate 6700'-7320', 0.48", 48 holes.**

**Frac w/ 5289 bbls fresh water, 16460 # 100 mesh, 45790 # 40/70 Ottawa, 18520 # 20/40 Brady w/ 10 Quality CO2. Perforate 5450'-6350', 0.48", 56 holes.**

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE *Stan Wagner* TITLE **Regulatory Analyst** DATE **01/20/06**

Type or print name **Stan Wagner**

E-mail address:

Telephone No. **432 686 3689**

**For State Use Only**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval, if any:

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(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

RECEIVED

FEB 16 2006

OCD-ARTESIA

2. Name of Operator  
**BOG Resources Inc.**

3. Address of Operator  
**P.O. Box 2267 Midland, Texas 79702**

4. Well Location

Unit Letter **M** : **960** feet from the **South** line and **760** feet from the **West** line

Section **22** Township **17S** Range **24E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3765 GR**

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐

OTHER: **completion** ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

01/17/06 Frac w/ 6998 bbls fresh water, 29440 # 100 mesh, 70745 # 40/70 Ottawa, 40500 # 20/40 Brady w/ 10 Quality CO2. Shut in. Prep to drill out frac plugs.  
01/19/06 RIH & drill out frac plugs.  
01/24/06 RIH w/ 2 3/8" production tubing set @ 4460'. Open to tank. Prep to swab.  
01/25/06 Swab, 6 runs. Begin flowing to tank.  
Turned to sales @ 6:00 PM.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 01/31/06

E-mail address:

Type or print name **Stan Wagner**

Telephone No. **432 686 3689**

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