

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>30-015-34800</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>Seine C 6 Fee</b>
8. Well Number <b>2H</b>
9. OGRID Number <b>7377</b>
10. Pool name or Wildcat Cottonwood <b>Creek; WC, West (Gas)</b>

Pit or Below-grade Tank Application ☐ or Closure ☐  
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 \_\_\_\_\_

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 Inc.**

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

4. Well Location  
Unit Letter **I** : **2440** feet from the **South** line and **215** feet from the **East** line  
Section **6** Township **16S** Range **25E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3518 GR**

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
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"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <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.

8/06/06 TD lateral @ 8825' MD  
8/07/06 Ran 191 jts 5 1/2", 17 #, N-80 casing set @ 8808'  
8/08/06 Cemented w/ 550 sx 50:50 POZ C, 11.9 ppg, 2.23 yield; 525 sx TXI lightweight, 13.0 ppg, 2.77 yield. Circulated 114 sx to surface. Released rig.  
8/11/06 MIRU completion rig. Begin preparation to perforate.  
8/15/06 Tested casing to 6000 psi for 30 min. Test good.  
Perforate from 8033' to 8675', 39 holes. Shut well in, prep for frac.

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 8/30/06  
Type or print name **Stan Wagner** E-mail address: \_\_\_\_\_ Telephone No. **432 686 3689**

For State Use Only

APPROVED BY FOR RECORDS ONLY TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
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9. OGRID Number <b>7377</b>
10. Pool name or Wildcat <b>Cottonwood Creek; WC, West (Gas)</b>

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3518 GR**

Pit or Below-grade Tank Application ☐ or Closure ☐

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 \_\_\_\_\_

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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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <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.

8/22/06 Frac w/ 5117 bbls slick water, 193500 lbs 30/70 Brown sand, 273200 lbs 20/40 White sand.  
Perforate from 6650' to 7300', 0.54", 36 holes.

8/23/06 Frac w/ 8709 bbls slick water, 169500 lbs 30/70 Brown sand, 285500 lbs 20/40 White sand.  
Perforate from 5050' to 6000', 0.54", 36 holes.

8/24/06 Flow back to clean up.

8/26/06 RIH to drill out frac plugs & clean out.

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SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 8/30/06  
E-mail address: \_\_\_\_\_

Type or print name **Stan Wagner**

Telephone No. **432 686 3689**

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3. Address of Operator <b>P.O. Box 2267 Midland, Texas 79702</b>	
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11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3518 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 _____	

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8/29/06 Flow back to tanks.  
8/30/06 RIH w/ 2 3/8" production tubing set @ 4804'.  
8/31/06 Turned to sales.

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SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 9/12/06  
Type or print name Stan Wagner E-mail address: \_\_\_\_\_ Telephone No. 432 686 3689

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