

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. 30-015-34487
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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

7. Lease Name or Unit Agreement Name:
Columbia 33 Fee

8. Well Number
1H

4. Well Location
 Unit Letter **I**; **1880** feet from the **South** line and **660** feet from the **East** line
 Section **33** Township **16S** Range **24E** NMPM County **Eddy**

9. OGRID Number
7377

10. Pool name or Wildcat
Eagle Creek; Wolfcamp (Gas)

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3714 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 _____

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:

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.

12/18/06

4. Estimated cement strength at time of casing test - 890 psi

5. Actual time in place prior to starting test - 15 hrs

12/19/06 Tested casing to 1500 psi for 30 min. Test good.

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 12/20/06

Type or print name Stan Wagner E-mail address: _____ Telephone No. 432 686 3689

For State Use Only FOR RECORDS ONLY

APPROVED BY _____ TITLE _____ DATE DEC 27 2006

Conditions of Approval, if any: