

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

HOBBS OGD
 JUN 20 2019
 RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR PROPOSALS.)		WELL API NO. 30-025-45528
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <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.
3. Address of Operator PO BOX 2267 MIDLAND, TX 79702		7. Lease Name or Unit Agreement Name GEM 36 STATE COM
4. Well Location Unit Letter <u>B</u> : <u>324'</u> feet from the <u>NORTH</u> line and <u>1703'</u> feet from the <u>EAST</u> line Section <u>36</u> Township <u>25S</u> Range <u>32E</u> NMPM County <u>LEA</u>		8. Well Number <u>202H</u> 9. OGRID Number <u>7377</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3426' GR</u>		10. Pool name or Wildcat JENNINGS; UPPER BONE SPRING SHALE

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"/>	P AND A <input 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: <u>Completion</u> <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.

04/10/2019 Rig released
 04/14/2019 MIRU prep to frac -Test void to 5000 psi, seals & flanges to 8500 psi
 05/23/2019 Begin perf & frac
 05/30/2019 Finish 15 stages perf & frac, 10,000 - 14,419' 1233 3 1/8" shots 11,616,167 lbs proppant + 221,338 bbls load fluid
 06/01/2019 Drilled out plugs and clean out wellbore
 06/04/2019 Opened well to flowback
 Date of First Production

Spud Date: 03/19/2019 Rig Release Date: 04/10/2019

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

SIGNATURE Kay Maddox TITLE Regulatory Analyst DATE 06/18/2019

Type or print name Kay Maddox E-mail address: kay_maddox@eogresources.com PHONE: 432-686-3658

APPROVED BY Karen Sharp TITLE Staff Mgr DATE 6-26-19
 Conditions of Approval (if any):