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| Sante Fe Main Office Phone: (505) 476-3441 General Information Phone: (505) 629-6116 Online Phone Directory https://www.emnrd.nm.gov/oecd/contact-us | State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505 | Form C-103 August 1, 2011 Permit 407714 WELL API NUMBER 30-025-54515 5. Indicate Type of Lease State 6. State Oil & Gas Lease No. |
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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.)

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| 1. Type of Well: Oil | 8. Well Number 505H |
| 2. Name of Operator EOG RESOURCES INC | 9. OGRID Number 7377 |
| 3. Address of Operator 5509 Champions Drive, Midland, TX 79706 | 10. Pool name or Wildcat |

4. Well Location
 Unit Letter M : 908 feet from the S line and feet 834 from the W line
 Section 14 Township 21S Range 33E NMPM _____ County Lea

11. Elevation (Show whether DR, KB, BT, GR, etc.)
 3814 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

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| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____ | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: <u>Spud</u> <input checked="" type="checkbox"/> |
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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.

1/2/2026 Spudded well.

1/2/2026 30" Conductor Hole @ 120'

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 .

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| SIGNATURE | <u>Electronically Signed</u> | TITLE | <u>Senior Regulatory Administrator</u> | DATE | <u>1/23/2026</u> |
| Type or print name | <u>Kristina Agee</u> | E-mail address | <u>Kristina_agee@eogresources.com</u> | Telephone No. | <u>432-686-6996</u> |

For State Use Only:

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|--------------|-------------------------|-------|-------------------------------|------|-----------------|
| APPROVED BY: | <u>Keith Dziokonski</u> | TITLE | <u>Petroleum Specialist A</u> | DATE | <u>2/2/2026</u> |
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