NMOCD Rec'd: 10/14/2020

Submit One Copy To Appropriate District Office	State of New Me				Form C-103	
District I	Energy, Minerals and Natural Resources			Revised November 3, 2011		
1625 N. French Dr., Hobbs, NM 88240 District II				WELL API NO. 30-015-27777		
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION			5. Indicate Type of Lease			
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE FEE		
District IV	Santa Fe, NM 87505			6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505						
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				NDDUP Unit		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				8. Well Number		
1. Type of Well: Oil Well Gas Well Other				86		
2. Name of Operator				9. OGRID Number		
EOG Resources, Inc.				7377		
3. Address of Operator 104 South Fourth Street, Artesia, NM 88210				10. Pool name or Wildcat Dagger Draw; Upper Penn		
4. Well Location				Dagger Draw, Opper Ferri		
	10 Coat Coass 41 a	C 41-	1	90 6.46	41	74
Unit Letter N : 810 feet from the South line and 1980 feet from the West line Section 20 Township 19S Range 25E NMPM Eddy County						
Section 20	Township 11. Elevation (Show wh		U		Eddy Cou	inty
	11. Elevation (Snow Wi	neiner DK, 3540'				
12. Check Appropriate Box to In	ndicate Nature of N			ata		
NOTICE OF INT	ENITION TO:		- L CLID			OF.
NOTICE OF INTE	ENTION TO: PLUG AND ABANDON		REMEDIAL WOR	SEQUENT F		OF: NG CASING □
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING					_	
· · · · · · · · · · · · · · · · · · ·	MULTIPLE COMPL	Ä	CASING/CEMENT			` Ш
		_		_		
OTHER:			□ Location is represented to the location is represen			
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.						
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the						
71 Steel market at least 4 in diame	ter and at reast 4 above	ve ground i	ever has been set m	concrete. It she	ws the	
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR						
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR						
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.						
☐ The location has been leveled as no	early as possible to ori	ainal arous	nd contour and has l	been cleared of s	all iunk track	flow lines and
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other production equipment. Buried power lines removed.						
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.						
☐ If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with						
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed						
from lease and well location. All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have						
		fortable ba	ses have been femo	ved. (Foured on	site concrete	bases do not nave
All other environmental concerns		s per OCD	rules. Buried liner	addressed.		
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-						
retrieved flow lines and pipelines. No, active pipeline(s) within EOG Resources gas system.						
If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well location, except for utility's distribution infrastructure. Trash removed.						
location, except for utility's distribution	i inirastructure. I rasn	removea.				
When all work has been completed, return this form to the appropriate District office to schedule an inspection.						
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SIGNATURE	<u> </u>	TITLE: _	Environmental Sup	pervisor	DATE	10/12/2020
TYPE OR PRINT NAME: Robert Asl	her	E-MAII ·	Robert_Asher@e	Ogresources com) PHONE	575-748-4217
For State Use Only	.ICI	L-WIAIL.	Asici@E	ogresources.com	I HONE.	<u>575-770-4217</u>
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APPROVED BY:	Olas	_TITLE	Staff Mo	anager	DATE_	10/23/2020
Conditions of Approval (if any):						