| Submit 3 Copies To Appropriate District Office | State of New Mexico Energy, Minerals and Natural Resources | | Form C-103 May 27, 2004 | | | |
|--|--|------------------------------|------------------------------|--|--|--|
| District I | Energy, Willierans und Parta | an resources | WELL API NO. | | | |
| 1625 N. French Dr., Hobbs, NM 87240 District II | OIL CONSERVATION | N DIVICION | 30-015-33597 | | | |
| 1301 W. Grand Ave., Artesia, NM 88210 | 1220 South St. Fra | | 5. Indicate Type of Lease | | | |
| District III 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe, NM 8 | | STATE 😠 FEE 🗆 | | | |
| District IV | • | 7505 | 6. State Oil & Gas Lease No. | | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | o. State Of | Tec Gas Lease 110. | | |
| SUNDRY NOTIC | ES AND REPORTS ON WEL | LS | 7. Lease N | ame or Unit Agreement Name: | | |
| (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.) | | | Nile 22 State Com | | | |
| 1. Type of Well: | | RECEIVED | 8. Well Nu | mber | | |
| Oil Well Gas Well 🗶 | Other | JAN 1 8 2005 | | 1 | | |
| 2. Name of Operator | | | 9. OGRID 1 | Number | | |
| EOG Resources Inc. | | JULIANTESIA | | 7377 | | |
| 3. Address of Operator | | | 1 | ame or Wildcat | | |
| P.O. Box 2267 Midland, Tex | <u>as 79702</u> | | Wildcat; | Wolfcamp | | |
| 4. Well Location | | | | | | |
| Unit Letter N : | feet from the No. | rth line and | 1880 | feet from the West line | | |
| Section 00 | Tanachia and | Damas 047 | MIMIDIM | Country | | |
| Section 22 | | Range 24E | NMPM | County Eddy | | |
| the grantle court approach in | 11. Elevation (Show whether | DR, KKB, KI, GK, et 53 GR | c.) | The Control of the Co | | |
| Pit or Below-grade Tank Application | * | ,,, ,,, | ***** | 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 | | |
| Pit type Depth to Groundwater | | h water well Die | tanca from naa | rest surface water | | |
| Pit Liner Thickness: mil | Below-Grade Tank: Volume. | | | ; | | |
| Fit Liner Tinckness: init | Delow-Grade Talik. Volume. | bbis, Construction | on Material | | | |
| | | | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data | | | | | | |
| NOTICE OF INTENTION TO: | | | SEQUENT REPORT OF: | | | |
| PERFORM REMEDIAL WORK | | REMEDIAL WORK | | ☐ ALTERING CASING ☐ | | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLI | NG OPNS. | x PLUG AND | | |
| PULL OR ALTER CASING | MULTIPLE | CASING TEST AND | 1 | ABANDONMENT | | |
| FULL OR ALTER CASING | COMPLETION | CEMENT JOB | 1 | الما | | |
| | | | | | | |
| OTHER: | | OTHER: | | | | |
| 13. Describe proposed or completed | l operations. (Clearly state all pe | rtinent details, and give | e pertinent da | ates, including estimated date | | |
| of starting any proposed work). | | | | | | |
| or recompletion. | | | | | | |
| 1/0/05 0 | | | | | | |
| 1/2/05 Spud well @ 7:00 a | | - act @ 3071 | | | | |
| | , 40 #, H-40 surface casin ows: Option 2 Rule 107G | g sec w Jo/. | | | | |
| 1. Slurry 1, 120 sx Premium Plus w/ 2% CACL, 25lb/sx FLOCELE, 3% Light, 11.4 #/gal, 2.91 cu.ft./sx, | | | | | | |
| 349.2 cu. ft. | | | | | | |
| Slurry 2, 205 sx Premium Plus w/ 2% CACL, 14.8 #/gal, 1.34 cu.ft./sx, 274.7 cu. ft. | | | | | | |
| 2. Approximate temperature of cement when mixed - 75 deg F | | | | | | |
| 3. Estimated minimum form | mation temperature in zone | of interest - 77. | 87 deg F | | | |
| 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 permitor an (attached) alternative OCD-approved plan | | | | | | |
| SIGNATURE Stan W | rit TIT | LE Regulato: | ry Analyst | DATE 1/13/05 | | |
| The second of th | E-r | nail address: | | m. 1 | | |
| Type or print name Stan Wagner | | | | Telephone No. 432 686 3689 | | |

FOR RECORDS ONLY TITLE_

__ DATE _

APPROVED BY_____Conditions of Approval, if any:

For State Use Only

| Submit 3 Copies To Appropriate District Office | State of New Mo Energy, Minerals and Natu | | Form C-103 | | | | | |
|--|---|---------------------------------------|---|-------------------------------|--|--|--|--|
| District I 1625 N. French Dr., Hobbs, NM 87240 | Energy, Millerals and Natu | iai Resources | WELL API NO. | May 27, 2004 | | | | |
| District II | OIL CONSERVATIO | N DIVISION | 30-015-33597 | | | | | |
| 1301 W. Grand Ave., Artesia, NM 88210 District III | 301 W. Grand Ave., Artesia, NM 88210 | | | 5. Indicate Type of Lease | | | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | | | STATE 🗴 FEE 🗌 | | | | |
| District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 | <u>V</u> | | | 6. State Oil & Gas Lease No. | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS I (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | 7. Lease Name or Unit Agreement Name: Nile 22 State Com | | | | | |
| DIFFERENT RESERVOIR. USE "APPLIC | ATION FOR PERMIT" (FORM C-10 |)1) FOR SUCH | NITE 22 State C | Au. | | | | |
| PROPOSALS.) 1. Type of Well: | | | 8. Well Number | | | | | |
| Oil Well Gas Well 🗷 | Other | RECEIVED | 1 | | | | | |
| 2. Name of Operator | | JAN 18 2005 | 9. OGRID Number | | | | | |
| EOG Resources Inc. | | DUD-HIT EQIA | 737 | | | | | |
| 3. Address of Operator | | | 10. Pool name or Wildcat | | | | | |
| P.O. Box 2267 Midland, Tex | as 79702 | · · · · · · · · · · · · · · · · · · · | Wildcat: Wolfcam | ID | | | | |
| 4. Well Location | | | | | | | | |
| Unit Letter :: | 660 feet from the No. | rth line and | 1880 feet from | the West line | | | | |
| Section 22 | Township 17S | Range 24E | NMPM | County Eddy | | | | |
| | 11. Elevation (Show whether | | c.) | and the state of the state of | | | | |
| 3753 GR | | | | | | | | |
| Pit or Below-grade Tank Application | | | | | | | | |
| Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water | | | | | | | | |
| Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; 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 REMEDIAL WORK ALTERING CASING | | | | | | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON [] | REMEDIAL WORK | | ALTERING CASING | | | | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLI | NG OPNS. 🔀 | PLUG AND ABANDONMENT | | | | |
| PULL OR ALTER CASING | MULTIPLE COMPLETION | CASING TEST AND CEMENT JOB | x | | | | | |
| OTHER: | | OTHER: | | Г | | | | |
| 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. | | | | | | | | |
| 4. Estimated cement strength at time of casing test - 580 psi 5. Actual time cement in place prior to starting test - 8.25 hrs. | | | | | | | | |
| Circulated 90 sx to reserve pit. Tested casing to 1000 psi for 30 min. Test good. | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Therefore and Control of the Control | | 1 | 11 2 6 - | | | | | |
| I hereby certify that the information al grade tank has been/will be constructed or c | Dove is true and complete to the speed according to NMOCD guideling | best of my knowledge | and belief. I further c | ertify that any pit or below- | | | | |
| SIGNATURE Stan W | TIT | | _ | DATE 1/13/05 | | | | |

E-mail address:

TITLE.

Telephone No. 432 686 3689

_DATE **JAN 1 9 2005**

APPROVED BY_____Conditions of Approval, if any:

For State Use Only

Type or print name Stan Wagner

FOR RECORDS ONLY