

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

REC'D NMOCD
 11/04/2020

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-45793
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name QUAIL 2 STATE COM
8. Well Number 707H
9. OGRID Number 7377
10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3217' GR

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
PO BOX 2267 MIDLAND, TX 79702

4. Well Location
 Unit Letter C : 300' feet from the NORTH line and 1629' feet from the WEST line
 Section 2 Township 26S Range 30E NMPM County EDDY

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.

PBTD 15,946' MD
 05/15/2019 Rig released
 05/30/2019 MIRU prep to frac -Test void to 5000 psi, seals & flanges to 8500 psi
 02/18/2020 Test 5 1/2" csg to 10,900 psi for 30 minutes
 03/08/2020 Begin perf & frac
 03/12/2020 Finish 15 stages perf & frac, 11,421-15,946' 900 3 1/8" shots 11,557,902 lbs proppant + 176,989 bbls load fluid
 06/12/2020 Drilled out plugs and clean out wellbore
 09/07/2020 Opened well to flowback
 09/07/2020 Date of First Production

tubing and gas lift valves will be run within 6 months after flow back is complete. Sundry will be submitted.

Spud Date: 05/02/2019 Rig Release Date: 05/15/2019

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 09/18/2020

Type or print name Kay Maddox E-mail address: kay_maddox@eogresources.com PHONE: 432-638-8475

For State Use Only

APPROVED BY: [Signature] TITLE Staff Manager DATE 12/9/2020
 Conditions of Approval (if any):