

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

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-015-45324
2. Name of Operator EOG Resources, Inc.		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator P.O. Box 2267 Midland, TX 79702		6. State Oil & Gas Lease No.
4. Well Location Unit Letter M : 221 feet from the South line and 732 feet from the West line Section 1 Township 26S Range 28E NMPM County Eddy		7. Lease Name or Unit Agreement Name Golden Graham 1 State Com
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2940 GR		8. Well Number 721H 9. OGRID Number 7377 10. Pool name or Wildcat

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> OTHER: <input 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.

11/17/18 Run 9-5/8", 40#, J55, LTC (0'-2555')
 Cmt Lead 505 sx, Class C, 12.7 ppg, 2.32 yld
 Tail 240 sx, Class C, 14.8 ppg, 1.42 yld
 Test to 1500 psi/30 min - good
 Circ 123 sx to surface
 Resume drilling 8-3/4" hole

RECEIVED

NOV 27 2018

DISTRICT II-ARTESIA O.C.D.

Spud Date:

11/15/18

Rig Release Date:

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

SIGNATURE Renee Garratt TITLE Regulatory Analyst DATE 11/20/18
 Type or print name Renee Garratt E-mail address: _____ PHONE: 432-686-3644
For State Use Only

APPROVED BY: [Signature] TITLE Staff Mgr. DATE 12-3-18
 Conditions of Approval (if any): _____