

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

WELL API NO. <b>30-015-27016</b>	
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 <b>PAULINE ALB STATE</b>	
8. Well Number <b>1</b>	
9. OGRID Number <b>7377</b>	
10. Pool name or Wildcat <b>SAND DUNES, DELAWARE, WEST</b>	
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"/> 2. Name of Operator <b>EOG RESOURCES INC</b> 3. Address of Operator <b>PO BOX 2267 MIDLAND, TX 79702</b> 4. Well Location Unit Letter <b>I</b> ; <b>1980</b> feet from the <b>SOUTH</b> line and <b>660</b> feet from the <b>EAST</b> line Section <b>32</b> Township <b>23S</b> Range <b>31E</b> NMPM County <b>EDDY</b> 11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3370' GR</b>	

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

<b>NOTICE OF INTENTION TO:</b> 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 type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <b>PLUGGED</b> <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

02/08/2019 MIRU  
 02/13/2019 LAY DWN RODS  
 02/14/2019 TRIP OH W/2 7/8" TBG, RDMO  
 03/13/2019 MIRU  
 03/15/2019 SET CIBP @ 6420', SPOT 25 SXS CMT  
 03/16/2019 TAG TOC 6192', CALLED NMOC, CHGD PROCEDURE, PMP 150 SXS CL C CMT @ 4100', PMP 160 SXS CL C CMT @ 2584'  
 03/20/2019 TAG TOC @ 987', PERF CSG @ 900', PMP 160 SXS CL C CMT, WOC, TAG TOC @ 467', PMP 55 SXS CL C CMT TO SURFACE. VERIFIED CMT

NM OIL CONSERVATION  
 ARTESIA DISTRICT

MAR 29 2019

WELL IS PLUGGED AND ABANDONED

Spud Date:

11/30/1992

Rig Release Date:

RECEIVED

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 03/26/2019

Type or print name Kay Maddox

E-mail address: kay\_maddox@eogresources.com PHONE: 432-686-3658

For State Use Only

APPROVED BY:

*Staff*

TITLE Staff

DATE 4/2/19

Conditions of Approval (if any):