

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.<br>30-015-45663  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>War Dog State   |
| 8. Well Number<br>1H  |
| 9. OGRID Number<br>7377   |
| 10. Pool name or Wildcat<br>Wildcat; Abo  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3428' GR                                      |

|   |  |
|---|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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<br>EOG Resources, Inc.  |  |
| 3. Address of Operator<br>104 South Fourth Street, Artesia, NM 88210  |  |
| 4. Well Location<br>Unit Letter <u>M</u> : <u>990</u> feet from the <u>South</u> line and <u>500</u> feet from the <u>West</u> line<br>Section <u>35</u> Township <u>16S</u> Range <u>27E</u> NMPM <u>Eddy</u> County |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3428' GR  |  |

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: Completion Operations <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.

5/7/19 – 6/11/19 - Set a CIBP at 11,788'. Perforated 6493'-11,784'. Acidized with a total of 95,603g 20% HCL and frac with a total of 5,048,780 lbs sand and 118,585 bbls load water. Ran CBL and tested casing to 3500 psi, held good.

RECEIVED

JUN 17 2019

DISTRICT II-ARTESIA O.C.D.

Spud Date: 3/14/19

Rig Release Date: 4/29/19

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

SIGNATURE Tina Huerta TITLE Regulatory Specialist DATE June 13, 2019

Type or print name Tina Huerta E-mail address: tina\_huerta@eogresources.com PHONE: 575-748-4168  
For State Use Only

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 6-24-19  
Conditions of Approval (if any):