

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 87605
 District IV - (505) 476-3000
 1220 S. St. Francis Dr., Santa Fe, NM 87505

RECEIVED

FEB 24 2020

EMNRD-OCDA ARTESIA

State of New Mexico
 Energy, Minerals and Natural Resources
 CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

WELL API NO.	30-015-26633
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	MEDANO VA STATE
8. Well Number	4
9. OGRID Number	7377
10. Pool name or Wildcat	LOST MEDANOS; DELAWARE
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3348' 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 L : 1980 feet from the SOUTH line and 330 feet from the WEST line
 Section 16 Township 23S Range 31E 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 checked="" 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: <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.

EOG plugged this well using the following procedure:

- 02/04/2020 MIRU, set CIBP @6833'
- 02/05/2020 RIH to 4600', ran CBL, TOC @ 1680'
- 02/08/2020 PUH to 1653', set pkr, pkr tst gmod, spot cmt plug @ 6829', w/40 sxs CL C cmt, WOC
- 02/11/2020 Tag TOC @ 6397', spot CL C cmt plug @ 4168', w/200 sxs CL C cmt, ETOC @ 2193', tag TOC @ 2193', spot 160 sxs CL C cmt plug @ 2193', ETOC 613'
- 02/18/2020 Tag TOC @ 688', PUH to 446', pmp 115 sxs CL C cmt circ to surface, verified cmt.

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt of subsequent Report of Well Plugged which may be found at OCD Web Page under Forms: www.emnrd.state.nm.us/oed.

WELL IS PLUGGED AND ABANDONED

Spud Date: Rig Release Date:

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

SIGNATURE Kay Maddox TITLE Senior Regulatory Specialist DATE 02/19/2020

Type or print name Kay Maddox E-mail address: kay_maddox@eogresources.com PHONE: 432-686-3658

For State Use Only

APPROVED BY: [Signature] TITLE Staff Mgr DATE 2/27/20

Conditions of Approval (if any):

[Handwritten mark]