

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

CISF
OP

WELL API NO. 30-015-32353
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: Gordon 23 State Com
8. Well No. 1
9. Pool name or Wildcat Angell Ranch; Atoka-Morrow (Gas)

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	7. Lease Name or Unit Agreement Name: Gordon 23 State Com
2. Name of Operator EOG Resources Inc.	8. Well No. 1
3. Address of Operator P.O. Box 2267 Midland, Texas 79702	9. Pool name or Wildcat Angell Ranch; Atoka-Morrow (Gas)
4. Well Location Unit Letter <u>N</u> : <u>997</u> feet from the <u>South</u> line and <u>1445</u> feet from the <u>West</u> line Section <u>23</u> Township <u>19S</u> Range <u>27E</u> NMPM County <u>Eddy</u>	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3480	

11. 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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

* CORRECTED REPORT *

8/19/02 Spud 14 3/4" hole @ 7:30 am 8/19/02.
Run 9 jts. 11 3/4" 42# H-40 surfcae casing @ 404'. Cement with 240 sx Premium Plus.
Circ 30 sx to reserve pit. WOC 20 hrs. Test shoe to 500 psi.

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

SIGNATURE Stan Wagner TITLE Reg Analyst DATE 10/14/02

Type or print name Stan Wagner Telephone No. 915 686 3689

(This space for State use)

APPROVED BY TIM W. GUM TITLE DISTRICT II SUPERVISOR DATE OCT 15 2002

Conditions of approval, if any: