

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. 3002545326
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 SPEEDY 16 STATE COM
8. Well Number 202H
9. OGRID Number 7377
10. Pool name or Wildcat RED TANK, BONE SPRING, EAST
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3577 GL

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 D : 326 feet from the NORTH line and 614 feet from the WEST line
 Section 16 Township 22S Range 33E NMPM County LEA

HOBBS
 JAN 09 2019
 RECEIVED

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 checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: DRILLING CSG -Revised <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.

11/27/18 Spud 17-1/2" Hole

11/28/18 Surface Casing @ 1,128'
 Run 13-3/8" 54.5# J-55 STC
 Lead Cement w/ 1,120 sx Class C (13.5 ppg, 1.76 yld), Tail w/150 sx Class C (14.8 ppg, 1.36 yld)
 Test casing to 1,500 psi for 30 min - Good Circ 673 sx cement to surface

12/15/18 1st Intermediate Casing @ 4,734' - 12-1/4" hole
 Run 9-5/8" 40# J-55 LTC (0' - 3,987')
 Run 9-5/8" 40# HCK-55 LTC (3,987' - 4,734')
 Lead Cement w/ 1,220 sx Class C (12.9 ppg, 1.37 yld), Tail w/ 275 sx Class H (14.8 ppg, 1.37 yld)
 Test casing to 2,120 psi for 30 min - Good Circ 555 sx cement to surface

12/20/18 Production Casing @ 14,286' MD, 9,417' TVD - 8-3/4" hole
 Run 5-1/2" 23# T-95, JFE Bear (0' - 9,696') (MJ @ 9,738')
 Run 5-1/2" 20# ICYP-110, TXP (9,696' - 14,286')
 Lead Cement w/ 530 sx Class H (10.8 ppg, 3.02 yld), Tail w/1,275 sx Class H (14.5 ppg, 1.25 yld)
 Test casing to 5,000 psi for 15 min - Good Did not circ cement to surface, TOC @ 3,140' by CBL Completion to follow

Spud Date:

11/28/18

Rig Release Date:

12/21/18

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

SIGNATURE _____ TITLE Regulatory Administrator DATE 01/09/19

Type or print name EMILY FOLLIS E-mail address: emily_follis@eogresources.com PHONE: 432-848-9163

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 01/09/19

Conditions of Approval (if any):