

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
May 27, 2004

WELL API NO. <b>30-025-37639</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		7. Lease Name or Unit Agreement Name: <b>Cimarron 18 State</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Number <b>1</b>
2. Name of Operator <b>EOG Resources Inc.</b>		9. OGRID Number <b>7377</b>
3. Address of Operator <b>P.O. Box 2267 Midland, Texas 79702</b>		10. Pool name or Wildcat <b>Mescalero Escarpe; Bone Spring</b>
4. Well Location  Unit Letter <b>B</b> : <b>18</b> feet from the <b>470</b> line and <b>North</b> feet from the <b>1784</b> line  Section <b>East</b> Township <b>18S</b> Range <b>34E</b> NMPM County <b>Lea</b>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4080 GR</b>		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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 COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPERATIONS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <b>completion</b> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

6/07/06 MIRU completion rig.  
6/08/06 Tested 5 1/2" casing to 4000 psi for 30 min. Test good. Prepare to perforate.  
6/09/06 Perforate from 8828'-8830' (2 holes), 8842'-8852' (10 holes), 8858'-8862' (4 holes), 8874'-8894' (20 holes), 8900'-8904' (4 holes). Total 40 holes.  
6/10/06 Swab & flow to test tank.  
6/12/06 Turned to sales.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 6/13/06

Type or print name Stan Wagner

E-mail address:

Telephone No. 432 686 3689

For State Use Only

APPROVED BY [Signature] TITLE PETROLEUM ENGINEER DATE JUL 21 2006

Conditions of Approval, if any: