

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

Form C-103  
 May 27, 2004

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

WELL API NO. <b>30-025-37640</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

**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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. Lease Name or Unit Agreement Name: <b>Cimarron 18 State</b>
2. Name of Operator <b>EOG Resources Inc.</b>	8. Well Number <b>2</b>
3. Address of Operator <b>P.O. Box 2267 Midland, Texas 79702</b>	9. OGRID Number <b>7377</b>
4. Well Location Unit Letter <b>A</b> : <b>920</b> feet from the <b>North</b> line and <b>990</b> feet from the <b>East</b> line Section <b>18</b> Township <b>18S</b> Range <b>34E</b> NMPM County <b>Lea</b>	10. Pool name or Wildcat <b>Mescalero Escarpe; Bone Spring</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4078 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

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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

9/23/06 TD lateral @ 9094' MD.  
 9/24/06 Ran 5 1/2", 17#, N-80 casing set @ 9092'.  
 Cemented w/ 1000 sx 50:50 H, 11.9 ppg, 2.46 yield; 200 sx TXI Lightweight; 13.0 ppg, 1.50 yield.  
 Circulated 171 sx to surface.  
 9/25/06 Rig released.

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 9/27/06  
 Type or print name Stan Wagner E-mail address: \_\_\_\_\_ Telephone No. 432 686 3689

**For State Use Only**  
 APPROVED BY Chris Williams TITLE \_\_\_\_\_ DATE NOV 02 2006  
 Conditions of Approval, if any: \_\_\_\_\_  
 OGD DISTRICT SUPERVISOR/GENERAL MANAGER