

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

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.)		WELL API NO. 30-025-43928
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator EOG Resources, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 2267 Midland, TX 79702		7. Lease Name or Unit Agreement Name Bridge State Unit
4. Well Location Unit Letter M 300 feet from the South line and 800 feet from the West line Section 20 Township 22S Range 35E NMPM County Lea		8. Well Number 301H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3585' GR		9. OGRID Number 7377
		10. Pool name or Wildcat Rock Lake; Bone Spring

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 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"/> Surface Commingle <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/> PC-1311 <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 Resources requests permission to surface pool commingle oil and gas from the same lease from the following wells:

Bridge State Unit 301H 30-025-43928 Rock Lake; Bone Spring (52766)
Bridge State Unit 701H 30-025-42859 Rock Lake; Wolfcamp (52767)

Recommend Signature

Detailed information is attached. Acreage stated in this application is only for State Lease VB-2037. Total Unit acreage is ~5000. The order will be amended to add additional acreage as necessary. EOG Resources requests that all future wells for this lease in these same pools may be added to the surface commingling approval by submitting a C-103 sundry notice.

Spud Date:

Rig Release Date:

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

SIGNATURE *Stan Wagner* TITLE **Regulatory Analyst** DATE **12/07/2017**
Type or print name **Stan Wagner** E-mail address: PHONE: **432-686-3689**
For State Use Only
APPROVED BY: *David R. Carter* TITLE **Division Director** DATE **12/11/17**
Conditions of Approval (if any):