

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

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

Form C-103
Revised July 18, 2013

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. 30-015-27332
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 M Resources Inc.		6. State Oil & Gas Lease No.
3. Address of Operator 105 South Fourth St, Artesia, NM 88210		7. Lease Name or Unit Agreement Name Continental State
4. Well Location Unit Letter N : 330 feet from the South line and 1980 feet from the West line Section 10 Township 19S Range 29E NMPM County Eddy		8. Well Number 12
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3362' GL		9. OGRID Number 15445
		10. Pool name or Wildcat Turkey Track 7 Rvrs Qn GB SA

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 checked="" 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"/>		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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/30/18—Notify OCD of move in.

4/02/18—Set 5½ CIBP @ 2134' dump bail 4 sxs on top, set another 5½ CIBP @ 1510' (OCD ok'd to combine plugs 3 & 4) circ well w/ MLF cap BP w/ 60 sxs CTOC @ 963' Tag @ 890'.

4/03/18—Perf @ 345' pressure up OCD ok'd to spot 40 sxs from 400' to surface verified RDMO.

RECEIVED

APR 24 2018

Spud Date:

Rig Release Date:

DISTRICT II-ARTESIA O.C.D.

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

SIGNATURE Chris Romero TITLE Agent DATE 4/09/18

Type or print name Chris Romero E-mail address: PHONE:

For State Use Only

APPROVED BY: Staff Mgr TITLE Staff Mgr DATE 4-25-18
Conditions of Approval (if any):