

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>30-015-34356</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>Mackenzie 13 Fee</b>
8. Well Number <b>3H</b>
9. OGRID Number <b>7377</b>
10. Pool name or Wildcat <b>Cottonwood Creek; Wolfcamp, West Gas</b>

**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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	2. Name of Operator <b>EOG Resources Inc.</b>
3. Address of Operator <b>P.O. Box 2267 Midland, Texas 79702</b>	4. Well Location Unit Letter <b>O</b> : <b>660</b> feet from the <b>South</b> line and <b>1980</b> feet from the <b>East</b> line Section <b>13</b> Township <b>16S</b> Range <b>24E</b> NMPM County <b>Eddy</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3581' 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 type="checkbox"/>
OTHER: <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.

11/21/05 TD @ 8472'

11/23/05 Ran 192 jts 4 1/2" 13.5 # & 11.6 #, HCP-110 casing w/ 10 sliding sleeves set at 8430'.

11/24/05 Cemented w/ 700 sx Interfill C, 11.9 ppg, 2.45 yield, 500 sx acid soluble, 15.0 ppg, 2.48 yield. CIRC 133 sx to surface. Released rig @ 12:00 AM.

12/09/05 MIRU completion rig. Begin prep hole for frac.

12/16/05 Frac sliding sleeves from 5019'-8030' w/ total of 240 bbls 15% NEFE acid, 27100 bbls fresh water, 40500 lbs 100 mesh sand, 161400 lbs 30/70 Brady Sand, 161800 lbs 20/40 Brady Sand.

12/18/05 Shut in.

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 12/22/05

Type or print name Stan Wagner

E-mail address:

Telephone No. 432 686 3689

**For State Use Only**

APPROVED BY FOR RECORDS ONLY TITLE \_\_\_\_\_ DATE JAN 18 2006

Conditions of Approval, if any:

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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"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
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12/20/05 Open well to test tank.

12/21/05 Continue flowing to test tank as well cleans up. Rig down & move out completion rig.

12/25/05 Turned well to sales.

RECEIVED

JAN 18 2006

OCU-ARTESIA

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SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 01/10/2006

Type or print name **Stan Wagner**

E-mail address:

Telephone No. **432 686 3689**

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APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JAN 18 2006

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