State of New Mexico 73 70 Energy, Minerals and Natural Resources Form C-103 Submit 3 Copies To Appropriate District Office May 27, 2004 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-015-34681 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis 129. District III Santa Fe, 800 875050 STATE | FEE 😠 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 6. State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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 Congo A 10 Fee PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well Gas Well **x** Other 1H 9. OGRID Number 2. Name of Operator EOG Resources Inc. 7377 10. Pool name or Wildcat 3. Address of Operator P.O. Box 2267 Midland, Texas 79702 Cottonwood Creek; Wolfcamp (Gas) 4. Well Location 960 660 North Unit Letter feet from the line and feet from the line Township **16**S Range 25E **NMPM** County 10 Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3462 GR Pit or Below-grade Tank Application ☐ or Closure ☐ Pit type _____ Depth to Groundwater ____ ___ Distance from nearest fresh water well ______ Distance from nearest surface water ___ Below-Grade Tank: Volume_ Pit Liner Thickness: . _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 PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. X PLUG AND **ABANDONMENT** \mathbf{x} PULL OR ALTER CASING **MULTIPLE** CASING TEST AND COMPLETION **CEMENT JOB** OTHER: OTHER: 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. 4. Estimated cement strength at time of casing test - 810 psi 5. Actual time cement in place prior to starting test - 14 hrs Circulated 200 sx to surface. Tested casing to 1500 psi for 30 min. Test good. 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 at closed according to NMOCD guidelines _____, a general permit _____or an (attached) alternative OCD-approved plan _____ anun TITLE Regulatory Analyst **SIGNATURE** ____ DATE ___ E-mail address: Type or print name Stan Wagner Telephone No. 432 686 3689 FOR RECORDS ONLY SEP 1 8 2006 For State Use Only APPROVED BY_ TITLE___ __DATE __

Conditions of Approval, if any: