Form C-103 Submit 3 Copies To Appropriate District State of New Mexico Office Energy, Minerals and Natural Resources May 27, 2004 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-015-33855 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III FEE X STATE \[\] 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 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 Rock Spur 26 Fee Com PROPOSALS.) 8. Well Number 1. Type of Well: Gas Well X Oil Well Other RECEIVED 2. Name of Operator 9. OGRID Number 7377 MAR 1 6 2005 EOG Resources Inc. 10. Pool name or Wildcat Malaga; Morrow (Gas) 3. Address of Operator GOD MITESIA P.O. Box 2267 Midland, Texas 79702 4. Well Location 990 feet from the 820 Unit Letter line and feet from the line Section Township 24S Range 28E **NMPM** County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2918 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 ____ Pit Liner Thickness: _ 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 PLUG AND ABANDON 🔲 REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. 🔽 PLUG AND **ABANDONMENT** PULL OR ALTER CASING **MULTIPLE** CASING TEST AND \mathbf{x} **CEMENT JOB** COMPLETION 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. 3/7/05 Spud @ 1700 hrs 3/9/05 Ran 15 Jts 13 3/8", 54.5 #, J-55 surface casing set @ 686'. Cemented w/ 450 sx POX C, 12.4 ppg, 2.17 cu.ft./sx lead slurry; 350 sx Class C, 14.8 ppg, 1.34 cu.ft./sx tail slurry. Did not circulate. WOC 7.5 hrs. Ran temp survey, TOC @ 320'. 3/10/05 Cement 300 sx through 1" pipe. WOC 2 hrs. Ran 1" pipe and tag TOC @ 150'. Cement 100 sx through 1" pipe. TOC @ 90'. WOC 2 hrs. Cement 100 sx through 1" pipe. Circulated 40 sx to surface. WOC 18 hrs. 3/11/05 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 belowgrade tank has been/will///e constructed or closed according to NMOCD guidelines _____, a general permit ______ or an (attached) alternative OCD-approved plan ______

E-mail address:

FOR RECORDS ONLY

TITLE Regulatory Analyst DATE 3/14/05

_____ TITLE _____ DATE ___

Telephone No. 432 686 3689

MAR 1 6 2005

Conditions of Approval, if any:

For State Use Only

APPROVED BY

SIGNATURE Show U

Type or print name Stan Wagner

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_ TITLE_

E-mail address:

Regulatory Analyst

______ TITLE ______ DATE _____

__ DATE _____ **3/14/05**

Telephone No. 432 686 3689

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Conditions of Approval, if any:

Type or print name Stan Wagner

_____ TITLE____

E-mail address:

TITLE Regulatory Analyst

Telephone No. 432 686 3689

_____ DATE ____

__ DATE _____ **3/14/05**