

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

**NM OIL CONSERVATION**

Energy, Minerals and Natural Resources  
 ARTESIA DISTRICT  
 OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

**RECEIVED**

Form C-103  
 Revised July 18, 2013

WELL API NO. 30-015-42223
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-10167
7. Lease Name or Unit Agreement Name Boyd X State Com
8. Well Number 15H
9. OGRID Number 025575
10. Pool name or Wildcat N. Seven Rivers; Glorieta-Yeso
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,517' GR

**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  Gas Well  Other

2. Name of Operator  
EOG Resources, Inc.

3. Address of Operator  
104 South Fourth Street, Artesia, NM 88210

4. Well Location  
 Unit Letter E : 1935 feet from the North line and 15 feet from the West line  
 Unit Letter H : 2260 feet from the North line and 330 feet from the East line  
 Section 16 Township 19S Range 25E NMPM Eddy County

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>		OTHER: Spud & Surface casing <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/3/17 – Spud well with rathole service at 8:45 am. Set 100’ of 20” conductor and cemented to the surface.  
 3/9/17 – Resumed drilling with rotary tools at 6:00 am.  
 3/10/17 – TD 12-1/4” hole to 1,379’. Set 9-5/8” 36# J-55 casing at 1,379’. Cemented with 180 sacks Thixotropic (yld 1.60, wt 14.40). Lead with 350 sacks Class “C” (yld, 1.97 wt 12.90). Tailed in with 150 sacks Class “C” (yld 1.34, wt 14.80). Circulated 227 sacks to the surface.  
 3/11/17 – Cement fell 32’ received verbal permission from Ray Podany NMOCD to redi-mix to the surface. Tested casing to 1200 psi, good. WOC 26 hours 30 mins. Reduced hole to 8-3/4” and continued drilling.

Spud Date:  Rig Release Date:

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

SIGNATURE Laura Watts TITLE Assistant Regulatory Lead DATE March 14, 2017

Type or print name Laura Watts E-mail address: laura\_watts@eogresources.com PHONE: 575-748-4272  
**For State Use Only**

APPROVED BY: [Signature] TITLE Staff Manager DATE 3-16-17  
 Conditions of Approval (if any):