

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

Form C-103
 Revised July 18, 2013

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

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|---|
| WELL API NO. 30-015-31607 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. V-3850 |
| 7. Lease Name or Unit Agreement Name Lucy ALC State |
| 8. Well Number 001 |
| 9. OGRID Number 25575 |
| 10. Pool name or Wildcat Lost Tank Delaware, West |

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 Y Resources Inc.

3. Address of Operator
105 South Fourth St, Artesia, NM 88210

4. Well Location
 Unit Letter **P**: **330** feet from the **South** line and **330** feet from the **East** line
 Section **34** Township **21S** Range **31E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3505' GR

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.

5/22/18—Notify OCD of move in.

5/23/18—Set 5½ CIBP @ 6804' circ well w/ MLF cap BP w/ 65 sxs CTOC @ 6240' (ok'd by OCD to combine plugs 2&3) Tag @ 6130'.

5/24/18—Perf @ 4290' pressure up OCD ok'd to spot 350 sxs @ 4340' CTOC @ 800' Tag @ 1150'. OCD required to pump 35 sxs from 1150'-800' Tag @ 790'.

5/25/18—Perf @ 100' pressure up OCD ok'd to pump 25 sxs from 150' to surface verified RDMO.

RECEIVED

JUN 08 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 TITLE Agent DATE 6/6/18

Type or print name Chris Romero E-mail address: _____ PHONE: _____
 For State Use Only

APPROVED BY: TITLE STAFF MGR DATE 6-8-18
 Conditions of Appro (if any): _____