

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

Form C-103  
 Revised July 18, 2013

RECEIVED  
 OCT 25 2018  
 DISTRICT II-ARTESIA O.C.D.

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|---|
| WELL API NO.<br>30-015-26670  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |

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| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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   | 7. Lease Name or Unit Agreement Name<br>Clifford ADD       |
| 2. Name of Operator<br>EOG Y Resources, Inc.  | 8. Well Number<br>2  |
| 3. Address of Operator<br>104 South Fourth Street, Artesia, NM 88210  | 9. OGRID Number<br>025575                                  |
| 4. Well Location<br>Unit Letter <u>I</u> : <u>1980</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>East</u> line<br>Section <u>35</u> Township <u>19S</u> Range <u>24E</u> NMPM Eddy County | 10. Pool name or Wildcat<br>Dagger Draw; Upper Penn, North |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3652'GR   |  |

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

|  |   |
|--|---|
| <b>NOTICE OF INTENTION TO:</b><br>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/><br>DOWNHOLE COMMINGLE <input type="checkbox"/><br>CLOSED-LOOP SYSTEM <input type="checkbox"/><br>OTHER: <input type="checkbox"/> | <b>SUBSEQUENT REPORT OF:</b><br>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/><br>CASING/CEMENT JOB <input type="checkbox"/><br>OTHER: Plugback and add Cisco perms <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.

8/29/18 - NU BOP. Released packer. Set a 7" CIBP at 7265'. Loaded casing with 45 bbls. Tested to 2000 psi, good. Bled well down. Perforated Cisco 7212'-7230' (37). Set packer and 2-7/8" tubing at 7222'. Loaded casing with 3 bbls. Tested casing and packer to 2000 psi, good.  
 8/31/18 - Pumped 63 bbls 2% KCL, non-ionic surfactant and Biocide.

ENTERED  
*[Signature]*

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 *Tina Huerta* TITLE Regulatory Specialist DATE October 24, 2018

Type or print name Tina Huerta E-mail address: tina\_huerta@eogresources.com PHONE: 575-748-4168

**For State Use Only**

APPROVED BY: *[Signature]* TITLE State Engineer DATE 10-30-18  
 Conditions of Approval (if any):