

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S St Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

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



WELL API NO. <b>30-015-35884</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

**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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	7. Lease Name or Unit Agreement Name: <b>Yellowstone 23 State Com</b>
2. Name of Operator <b>EOG Resources Inc.</b>	8. Well Number <b>2H</b>
3. Address of Operator <b>P.O. Box 2267 Midland, Texas 79702</b>	9. OGRID Number <b>7377</b>
4. Well Location Unit Letter <b>I</b> : <b>1880</b> feet from the <b>South</b> line and <b>660</b> feet from the <b>East</b> line Section <b>23</b> Township <b>18S</b> Range <b>21E</b> NMPM County <b>Eddy</b>	10. Pool name or Wildcat <b>Four Mile Draw; Wolfcamp</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4131 GR</b>	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil 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 <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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/21/08 TD at 7600' MD.  
1/22/08 Ran 4 1/2", 11.60 #, P-110 casing set at 7571'.  
Cemented w/ 630 sx 50/50 POZ C, 11.5 ppg, 2.29 yield; 745 sx 50/50 POZ C, 14.2 ppg, 1.30 yield.  
Circulated 202 sx to surface.  
1/23/08 Released rig.  
1/28/08 MRU for completion.  
Tested casing to 2800 psi for 30 min. Test good. Shut in for pressure survey.  
2/01/08 RIH and pull pressure gauges.

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 or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 2/7/08

Type or print name Stan Wagner E-mail address:

Telephone No. 432-686-3689

For State Use Only

APPROVED BY FOR RECORDS ONLY TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval, if any: