Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office March 4, 2004 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-36596 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE 😠 FEE 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 Straw Hat 6 State PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well Gas Well X Other 2. Name of Operator 9. OGRID Number 7377 EOG Resources Inc. 10. Pool name or Wildcat 3. Address of Operator P.O. Box 2267 Midland, Texas 79702 Hat Mesa; Morrow (Gas) 4. Well Location 3819 feet from the South Unit Letter line and feet from the line Section Township 21S Range **NMPM** County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3777' GR Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached) Pit location: UL _____ Sect ____ Twp ____ Rng ____ Pit type ____ Depth to Groundwater ____ Distance from nearest fresh water well _ Distance from nearest surface water _____ Below-grade Tank Location UL _____ Sect ____ Twp ____ Rng _____; — line and _____ feet from the ____ ____line 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 COMPLETION **CEMENT JOB** OTHER: OTHER: Completion \mathbf{x} 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. 8/14/04 RIH w/ chemical cutter to CIBP @ 13791'. Cut 2 7/8" tubing @ 13789'. Pick up on tools to POOH. Tools are stuck. Work tools, tools remain stuck. POOH w/ wireline leaving fish. Open well to test unit. 8/17/04 Turned well to sales.

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 be constructed or closed according to NMOCD guidelines _____, a general permit ____or an (attached) alternative OCD-approved plan _____ SIGNATURE_ Regulatory Analyst _ TITLE__ __ DATE ______**8/24/04** E-mail address: Telephone No. 432 686 3689

Type or print name Stan Wagner

(This space for State use)

PETROLEUM ENGINEER TITLE

FEB 2 4 2005

_ DATE _

Conditions of approval, if any:

APPROVED BY