

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

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.)		WELL API NO. 30-025-46304
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator EOG RESOURCES		6. State Oil & Gas Lease No. 320644
3. Address of Operator P O BOX 2267, MIDLAND TX 79702		7. Lease Name or Unit Agreement Name BANDIT 29 STATE COM
4. Well Location Unit Letter <u>D</u> : <u>374</u> feet from the <u>NORTH</u> line and <u>554</u> feet from the <u>WEST</u> line Section <u>29</u> Township <u>24S</u> Range <u>33E</u> NMPM County <u>LEA CO, NM</u>		8. Well Number 708H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3538 GL		9. OGRID Number 7377
10. Pool name or Wildcat 98092 WC-025 G-09 S243336I; UPPER WOLFCAMP		

OCD - HOBBS  
 09/12/2019  
 RECEIVED

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

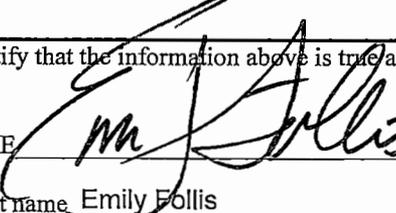
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>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

EOG respectfully requests an amendment to our approved APD for this well to reflect the following changes:  
 Well name change from Bandit 29 State Com #708H to Bandit 32 State Com #708H  
 SHL change to T-24-S R-33-E Sec. 32 2339 FNL 1382 FWL  
 BHL change to T-24-S R-33-E Sec. 29 100' FNL 330' FWL

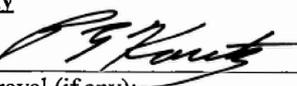
Spud Date:  Rig Release Date:

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

SIGNATURE  TITLE Sr. Regulatory Administrator DATE 09/13/19

Type or print name Emily Follis E-mail address: emily\_follis@eogresources.com PHONE: 432-848-9163

**For State Use Only**

APPROVED BY:  TITLE Petroleum Engineer DATE 09/13/2019

Conditions of Approval (if any): \_\_\_\_\_