

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. 30-025-37561
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 INC		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 2267 MIDLAND, TX 79702		7. Lease Name or Unit Agreement Name YARROW BHY STATE
4. Well Location Unit Letter A : 990 feet from the NORTH line and 990 feet from the EAST line Section 32 Township 23S Range 33E NMPM County EDDY		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3672' GR		9. OGRID Number 7377
		10. Pool name or Wildcat BRINNINSTOOL; DELAWARE

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.

EOG PLUGGED THIS WELL USING THE FOLLOWING PROCEDURE:

10/13/2020 MIRU
 10/15/2020 RIH, PERF @ 5200', SET PKR @ 4370', PMP 10 SXS CL C CMT, NO CIRC CONTACTED NMOCD
 10/16/2020 RIH TO 5250', SPOT 65 SXS CL C CMT
 10/17/2020 TAG TOC @ 4670', RIH TO 3500', PERF 3 SPF, TSTD CSG TO 500 PSI, GOOD, COULD NOT PMP INTO - CONTACTED NMOCD, RIH TO 3501', PMP 25 SXS CL C CMT, RIH TO 1318', PERF W/3SPF TSTD CSG TO 500 PSI, HELD, NOTIFIED NMOCD, PMP 25 SXS CL C CMT, RIH TO 1390', PMP 25 SXS CL C CMT
 10/20/2020 TAG TOC @ 1138', RIH TO 770' PERF 3SPF, PRESS UP TO 500 PSI, NOTIFIED NMOCD, RIH TO 821', PMP 85 SXS CL C CMT
 10/21/2020 TAG TOC @ 275', PMP 25 SXS CL C CMT TO SURFACE. VERIFIED CMT

WELL IS PLUGGED AND ABANDONED

11/16/2020 - PM NMOCD

Spud Date:

02/20/2006

Rig Release Date:

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

SIGNATURE Kay Maddox TITLE Regulatory Analyst DATE 10/29/2020

Type or print name Kay Maddox E-mail address: kay_maddox@eogresources.com PHONE: 432-686-3658

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 11/16/20

Conditions of Approval (if any)