Submit 3 Copies To Appropriate District	State of New Mexico			Form C-103
Office District I	Energy, Minerals and Natu	iral Resources	WELL API NO.	June 19, 2008
1625 N. French Dr., Hobbs, NM 8724 CONSEDVATION DIVISION			30-025-40585	
1301 W Grand Ave., Artesia, NM 88210			5. Indicate Type of Lease	
			STATE 🗷 FEE 🗌	
District IV 1220 S. St. Francis Dr., Santa Fe, NM			6. State Oil & C	Gas Lease No.
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)			7. Lease Name or Unit Agreement Name: Black Bear 36 State	
1. Type of Well:			8. Well Number	
Oil Well Gas Well Other Monitor			5 /	
2. Name of Operator			9. OGRID Number	
EOG Resources, Inc./			7377 /	
3. Address of Operator P.O. Box 2267 Midland, TX 79702			SWD; Delaware	
4. Well Location	73702	-		
Unit Letter H : 1	420 feet from the No.	cth line and	1320 feet f	from the East line
Cint Letter	icet nom me	into unu		ineime
Section 36		Range 33E	NMPM	County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3318' GR				
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
12. Cneck App	propriate Box to Indicate	nature of Notice,	Report, or Othe	er Data
NOTICE OF INTER	ITION TO	l our	OF OUTNIT D	CDODT OF
				EPORT OF:
PERFORM REMEDIAL WORK	PLUĞ AND ABANDON 🔲	REMEDIAL WORK		ALTÉRING CASING
TEMPORARILY ABANDON CHANGE PLANS			ING OPNȘ: 🛅	_`P AND A* / ;; 'E* E**
PULL OR ALTER CASING			ОВ 🗌	
DOWNHOLE COMMINGLE				
OTHER:		OTHER:		
13. Describe proposed or completed of starting any proposed work). So or recompletion.				
6/26/12 Spud 17-1/2" hole.				
6/27/12 Ran 28 jts 13-3/8", 61#, J55 BTC casing set at 1069'.				
Cemented lead w/ 500 sx Cla		eld; tail w/ 300 s	ex Class C, 14.	8 ppg, 1.335 yield.
Circulated 182 sx cement to surface. WOC 29 hrs. 6/28/12 Tested casing to 1500 psi for 30 minutes. Test good.				
Resumed drilling 12-1/4" hole.				
_				
Spud Date: 6/26/12	D' Date	Dut		
Spud Date: 6/26/12	Rig Relea	ise Date:		
I hereby certify that the information abo	ove is true and complete to the	best of my knowledg	e and belief.	
H 1				
SIGNATURE May W Ly	ŢIT	LE <u>Regulato</u>	ry Analyst	DATE6/29/2012
Type or print name <u>Stan Wagner</u>	E-m	ail address:		PHONE <u>432-686-3689</u>
For State Use Only		Betoatelia ea	AGNIKITAT P	llu a Pas
APPROVED BY TITLE			roavedr ————————————————————————————————————	DATEUL 0 5 2012
Conditions of Approval (itany):		•		,