Form C-103 State of New Mexico Submit 3 Copies To Appropri Energy, Minerals and Natural Resources May 27, 2004 Office District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-30949 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 X FEE \square Santa Fe, NM 87505 1000 Rio Brazos Rd., Aztec, NM 87410 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 East Corbin Delaware Unit DIFFERENT RESERVOIR, USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well X Gas Well Other 9. OGRID Number 2. Name of Operator EOG Resources Inc. 7377 10. Pool name or Wildcat 3. Address of Operator P.O. Box 2267 Midland, Texas 79702 West Corbin Delaware 4. Well Location 660 South line and feet from the Unit Letter feet from the line **NMPM** County Section 16 Township **18**S Range 33E Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3865 GR or Closure Pit or Relow-grade Tank Application Pit type _____ Depth to Groundwater Distance from nearest fresh water well ____ ____ Distance from nearest surface water Below-Grade Tank: Volume__ _bbls; Construction Material . Pit Liner Thickness: __ 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **TEMPORARILY ABANDON** ABANDONMENT CASING TEST AND **PULL OR ALTER CASING MULTIPLE** COMPLETION **CEMENT JOB** OTHER: OTHER: TA Well 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. 07/19/2005 This Approval of Temporary Set CIBP @ 5025' + 35' cmt on top. Abandonment Expires . 07/20/2005 Test 5-1/2" casing to 500# for 30 minutes, test OK. Witnessed by Johnny Robinson 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/yill be constructed or closed according to NMOCD guidelines ____, a general permit ____or an (attached) alternative OCD approved plan [Regulatory Analyst 07/20/2005 E-mail address: renee lawrence@eogresourcecs.com Type or print name Renee! Lawrence Telephone No. 432-686-3684

TITLE

For State Use Only

Conditions of Approval, if any

APPROVED BY

OC FIELD REPRESENTATIVE II/STAFF MANAGER

AUG 1 5 2005

DATE

