

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

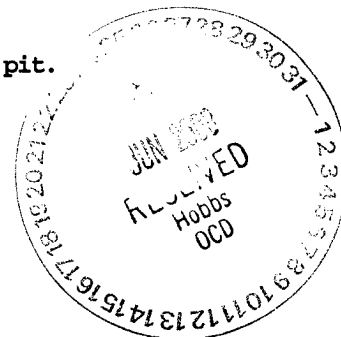
Form C-103
Revised March 25, 1999

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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	WELL API NO. <u>30-025-36089</u>
2. Name of Operator <u>EOG Resources Inc.</u>	5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator <u>P.O. Box 2267 Midland, Texas 79702</u>	6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>D</u> : <u>783</u> feet from the <u>North</u> line and <u>964</u> feet from the <u>West</u> line Section <u>15</u> Township <u>16S</u> Range <u>36E</u> NMPM County <u>Lea</u>	7. Lease Name or Unit Agreement Name: <u>Purple Humpy 15</u>
8. Well No. <u>1</u>	9. Pool name or Wildcat <u>Diamond; Strawn</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3897 GR</u>	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> OTHER: <input type="checkbox"/>

12. 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 recompilation.

6/21/03 Spud 6/20/03
6/22/03 Ran 41 jts. 11 3/4", 42#, H-40 surface casing set @ 1885'.
Cemented w/ 505 sx Class C, Tailed w/ 240 sx Class C. CIRC 326 sx to pit.
6/23/03 Tested casing to 1160 psi. Tested OK.



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

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 6/24/03

Type or print name Stan Wagner Telephone No. 915 686 3689

(This space for State use)

APPROVED BY Gary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER
Conditions of approval, if any

DATE JUN 25 2003