

Submit 1 Copy To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87401
District IV
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

HOBBS OCD
MAR 10 2014
RECEIVED

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-30622
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: East Corbin Delaware Unit
8. Well Number 1
9. OGRID Number 7377
10. Pool name or Wildcat Corbin; Delaware, West
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3851' GR

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>WIW</u>
2. Name of Operator EOG Resources Inc.
3. Address of Operator P.O. Box 2267 Midland, Texas 79702
4. Well Location Unit Letter <u>M</u> : <u>548</u> feet from the <u>South</u> line and <u>760</u> feet from the <u>West</u> line Section <u>16</u> Township <u>18S</u> Range <u>33E</u> NMPM County <u>Lea</u>

12. 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 COMPL <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <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.

02/20/14 - MIRU to repair tubing leak. Unseat packer & POOH w/20 stands of tubing & packer.
02/21/14 - Tested tubing & replaced 4 jts, ran back in hole w/tubing & packer set @ 5159'.
02/23/14 - Performed MIT test to 520 psi for 30 min. Tested good
Returned to injection.

*PK @ 5127'
as per field rep.
Recorded on Chart.*

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 Renee Jarratt TITLE Regulatory Analyst DATE 03/06/14

Type or print name Renee Jarratt E-mail address: _____ PHONE 432-686-3684

For State Use Only
APPROVED BY Mary Brown TITLE Compliance Officer DATE 3/12/2014

Conditions of Approval (if any)

R-10390

MAR 13 2014

