

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 87410
 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

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

WELL API NO. 30-025-40929
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: Dragon 36 State
8. Well Number 7H
9. OGRID Number 7377
10. Pool name or Wildcat Red Hills; Upper Bone Spring Shale

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 Gas Well Other

2. Name of Operator: EOG Resources, Inc. APR 18 2014

3. Address of Operator: P.O. Box 2267 Midland, TX 79702 RECEIVED

4. Well Location
 Unit Letter P : 220 feet from the South line and 715 feet from the East line
 Section 36 Township 24S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3479' GR

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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" 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.

4/12/14 TD @ 14269' MD.
 4/13/14 Ran 342 jts 5-1/2", 17#, HCP-110 LTC casing set at 14269'.
 4/14/14 Cemented lead w/ 300 sx 60:40:0 Class C, 10.8 ppg, 3.72 yield;
 middle 400 sx 50:50:6 Class H, 11.9 ppg, 2.34 yield;
 tail w/ 1350 sx 50:50:2 Class H, 14.2 ppg, 1.33 yield.
 Pressured casing to 4700 psi to rupture cementing disc. TOC will be determined at start of completion.
 Released rig.

Spud Date: 3/28/14 Rig Release Date: 4/14/14

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 4/15/14
 Type or print name Stan Wagner E-mail address: _____ PHONE 432-686-3689

For State Use Only
 APPROVED BY Mary Brown TITLE Dist. Supervisor DATE 4/21/2014
 Conditions of Approval (if any): _____
 APR 21 2014