

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 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. 30-025-42160	✓
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 Jolly Roger 16 State	✓
8. Well Number 504H	✓
9. OGRID Number 7377	
10. Pool name or Wildcat Red Hills; Bone Spring, North	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3557' 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  Gas Well  Other

2. Name of Operator  
EOG Resources, Inc.

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

4. Well Location  
 Unit Letter D : 150 feet from the North line and 986 feet from the West line  
 Section 16 Township 24S Range 34E NMPM County Lea

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 JAN 14 2015  
 RECEIVED

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 checked="" 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.

11/28/14 Spud 17-1/2" hole.  
 11/29/14 Ran 28 jts 13-3/8", 54.5#, J55 STC casing set at 1270'.  
 Cemented lead w/ 515 sx Class C, 13.5 ppg, 1.76 yield; tail w/ 275 sx Class C, 14.8 ppg, 1.37 yield.  
 Circulated 223 sx cement to surface.  
 11/30/14 Skid rig to well #503H to spud and set surface casing.  
 01/06/15 Skid rig from Jolly Roger 16 State #503H.  
 01/07/15 Tested casing to 1500 psi for 30 minutes. Test good. Resumed drilling 12-1/4" hole.  
 01/09/15 Ran 128 jts 9-5/8", 40#, (97) J55 & (31) HCK55 LTC casing set at 5195'.  
 Cement lead w/ 700 sx Class C, 12.7 ppg, 2.23 yield; tail w/ 450 sx Class C, 14.8 ppg, 1.32 yield.  
 Circulate 151 sx cement to surface. WOC 11.5 hrs.  
 01/10/15 Test casing to 1500 psi for 30 minutes. Test good. Resumed drilling 8-3/4" hole.

Spud Date: 11/28/14 Rig Release Date: \_\_\_\_\_

E-PERMITTING  
 P&A NR \_\_\_\_\_ P&A R \_\_\_\_\_  
 INT to P&A \_\_\_\_\_  
 CSNG Pm CHG Loc \_\_\_\_\_  
 TA \_\_\_\_\_

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 01/2/2015

Type or print name Stan Wagner E-mail address: \_\_\_\_\_ PHONE: 432-686-3689

**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 01/22/15

Conditions of Approval (if any): \_\_\_\_\_

JAN 26 2015 [Signature]