

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

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

Form C-103
Revised July 18, 2013

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL IN A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-40926
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator EOG Resources, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 2267 Midland, TX 79702		7. Lease Name or Unit Agreement Name Dragon 36 State
4. Well Location Unit Letter N : 220 feet from the South line and 1995 feet from the West line Section 36 Township 24S Range 33E NMPM County Lea		8. Well Number 4H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3479' GR		9. OGRID Number 7377
		10. Pool name or Wildcat Red Hills; Upper Bone Spring Shale

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.

1/14/15 Ran 121 jts 9-5/8", 40#, (28) HCK55 & (92) J55 LTC casing set at 5148'.

Cement lead w/ 1075 sx 65/35 POZ C, 12.7 ppg, 1.95 yield;
tail w/ 300 sx Prem Plus Class C, 14.8 ppg, 1.33 yield. Did not circulate.

1/15/15 Ran CBL / Temp Log to determine cement top. TOC estimated to be 1500'. Consult w/ NMOCD and received permission to do a bradenhead squeeze. WOC 24 hrs.

Tested casing to 1500 psi for 30 minutes. Test good.

Perform bradenhead squeeze w/ 600 sx Class C, 14.8 ppg, 1.35 yield. WOC 16 hrs.

1/16/15 Resumed drilling 8-3/4" hole.

Spud Date:

1/8/15

Rig Release Date:

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

SIGNATURE

Stan Wagner
Stan Wagner

TITLE

Regulatory Analyst

DATE

01/21/2015

Type or print name

E-mail address:

PHONE:

432-686-3689

For State Use Only

APPROVED BY:

[Signature]

TITLE

Petroleum Engineer

DATE

01/23/15

Conditions of Approval (if any):

JAN 26 2015

MB

AM