Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
1625 N. French Dr., Hobbs 1997	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO. 30-025-42154
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Artes NM 8#410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505	5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.
SUNDER 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.)		7. Lease Name or Unit Agreement Name Brown Bear 36 State
1. Type of Well: Oil Well Gas Well Other		8. Well Number 502H
2. Name of Operator EOG Resources, Inc.		9. OGRID Number 7377
3. Address of Operator P.O. Box 2267 Midland, TX 79702		10. Pool name or Wildcat WC-025 G-09 S253335K; Bone Spring
4. Well Location Unit Letter D 230	feet from the North line and 83	5 feet from the West line
Section 36	Township 25S Range 33E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3335' GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
TEMPORARILY ABANDON CHAPULL OR ALTER CASING MUIDOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:	REMEDIAL WOR COMMENCE DR CASING/CEMEN OTHER: Operations. (Clearly state all pertinent details, and EEE RULE 19.15.7.14 NMAC. For Multiple Cotion.	ILLING OPNS. P AND A T JOB d give pertinent dates, including estimated date
2/22/15 Ran 381 jts 5-1/2", 20#, HCP110 NSCC casing set at 15614'. Cemented lead w/ 325 sx LUCEM cement, 10.8 ppg, 3.02 CFS yield; middle w/ 300 sx 50/50 POZ H, 11.9 ppg, 2.41 CFS yield; tail w/ 1250 sx 25/75 POZ H, 14.4 ppg, 1.43 CFS yield. Pressured casing to 3050 psi to rupture cementing plug. Estimated TOC is 2900'. 2/23/15 Rig released.		
		HITTING / SCALES
Spud Date: 2/8/15	Rig Release Date: 2/23/15	- 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
I hereby certify that the information above is true and complete to the best of my knowledge and		
SIGNATURE Ham Wan	TITLE Regulatory Analys	t DATE 02/23/2015
Type or print name Stan Wagner	E-mail address:	PHONE: 432-686-3689
For State Use Only		
APPROVED BY: Conditions of Approval (is ny):	TITLE Petroleum Enginee	DATE 03/03/15