

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. 30-025-42500
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 501H
9. OGRID Number 7377
10. Pool name or Wildcat Red Hills; Lower Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3499' 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 Water Injection

2. Name of Operator
EOG Resources, Inc.

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

4. Well Location
 Unit Letter A : 555 feet from the North line and 1115 feet from the East line
 Section 36 Township 24S Range 33E NMPM County Lea

HOBBS OGD
 MAY 04 2015
 RECEIVED

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

4/28/15 Ran 115 jts 9-5/8", 40#, (25) HCL80 & (90) J55 LTC casing set at 5106'.
 Cement lead w/ 1000 sx Class C, 12.7 ppg, 2.24 CFS yield;
 tail w/ 300 sx Class C, 14.8 ppg, 1.33 CFS yield.
 Circulated 200 bbls cement to surface. WOC 8 hrs.
 4/29/15 Tested casing to 1500 psi for 30 minutes. Test good.
 Resumed drilling 8-3/4" hole.

Spud Date: 4/23/15 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 TITLE Regulatory Analyst DATE 04/30/2015
 Type or print name Stan Wagner E-mail address: PHONE: 432-686-3689

For State Use Only
 APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 04/26/15
 Conditions of Approval (if any):

MAY 26 2015 [Signature]