Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
District 1 - (575) 393-6161	Energy, Minerals and Natu	ral Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-025-41742
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE
District IV - (505) 476-3460	Santa Fe, NM 87	/505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			VB-1632
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACKS TO DEEPEN DEEP			7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPI	POSALS TO DRILL OR TO DEEPEN OR PLO LICATION FOR PERMIT" (FORM C-101) FO	UGBACKSTO ALV DRISUCTI	Junction BVJ State
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other	AUG 8 1 2013	8. Well Number 1H
2. Name of Operator EOG Resources, Inc	D	,	9. OGRID Number 7377
3. Address of Operator		RECEIVED	10. Pool name or Wildcat
P.O. Box 2267 Midla	and, TX 79702		Vacuum; Bone Spring, South
4. Well Location	250 South	. , 66	60 c.c East
Unit Letter36	:feet from the	line and ange 35E	feet from theline NMPM County Lea
Section 30	11. Elevation (Show whether DR		
	3830' GR	, MXD, K1, GK, etc.)	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB P AND A CASING/CEMENT JOB CASING/CEMENT JOB P AND A DOWNHOLE COMMINGLE OTHER: 5' New Hole DOWNHOLE PROPOSED OF CASING CEMENT JOB DOWNHOLE Starting any 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. 08/27/15 - Made 5' new hole. TD 145'. Hole size 11"			
		<u> </u>	
Spud Date: 03/27/14	Rig Release Da	ate:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE TITLE Regulatory Analyst			DATE_08/28/15
SIGNATURE (
Type or print name Renee' Jarratt E-mail address:			PHONE: 432-686-3684
For State Use Only			
			DATE
APPROVED BY: Accompany for Tenant OFLY Conditions of Approval (if any):			DAIL
Accepted for Record Only			CED A AAA