

Submit 1 Copy To Appropriate District Office

State of New Mexico

Form C-103

District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240

HOBBS OCF

Energy, Minerals and Natural Resources

Revised July 18, 2013

District II - (575) 748-1283  
811 S. First St., Artesia, NM 88200

SEP 10 2015

OIL CONSERVATION DIVISION

District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410

1220 South St. Francis Dr.

District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

RECEIVED

Santa Fe, NM 87505

WELL API NO. 30-025-42727
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Thor 21
8. Well Number 705H
9. OGRID Number 7377
10. Pool name or Wildcat *WC-025 G-09 S263327G; Upper Wolfcamp

**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 P : 735 feet from the South line and 236 feet from the East line  
Section 21 Township 26S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3259' GR

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.

9/5/15 Spud 14-3/4" hole.  
 9/6/15 Ran 23 jts 10-3/4", 40.5#, J55 STC casing set at 1019'.  
 Cement lead w/ 385 sx Class C, 13.5 ppg, 1.74 CFS yield;  
 tail w/ 175 sx Class C, 14.8 ppg, 1.33 CFS yield.  
 Circulated 106 sx cement to surface. WOC 14 hrs.  
 Tested casing to 1500 psi for 30 minutes. Test good.  
 Resumed drilling 9-7/8" hole.

Spud Date: 9/5/15

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 9/08/2015

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

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 09/14/15  
Conditions of Approval (if any):

SEP 15 2015

MB

dm