Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-41745 5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Fra		STATE FEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			VB-1637
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUGHBS OCD PROPOSALS.)		Toucan BUY State	
1. Type of Well: Oil Well	Gas Well Other	, , a rok	8. Well Number 1H
2. Name of Operator EOG Resources, Inc	. /	SEP 1 6 2013	9. OGRID Number 7377
3. Address of Operator			10. Pool name or Wildcat
P.O. Box 2267 Midla	and, TX 79702	RECEIVED	San Simon; Bone Spring, Northeast
4. Well Location Unit Letter	200 feet from the North	line and	feet from the West line
Section 27		Range 35E	NMPM County Lea
	11. Elevation (Show whether D 3585' GR	R, RKB, RT, GR, etc.)	
And the second s	3303 GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR			
TEMPORARILY ABANDON	-	COMMENCE DRII	
PULL OR ALTER CASING DOWNHOLE COMMINGLE	_	CASING/CEMENT	TJOB 📙
CLOSED-LOOP SYSTEM			
OTHER:	nloted energtions (Clearly state al	OTHER: 5' new	
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.			
09/11/15 Made 5' new hole. TD 170'. Hole size 11".			
05/11/10 Made o new Hole. 15 170. Flore 5/20 11.			
	<u>.</u>		
Spud Date: 03/27/14	Rig Release I	Date:	
Spud Date. OO/21714			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Thereby certary that the information above is true and complete to the best of my knowledge and cone.			
SIGNATURE VOULE	arratt TITLE Re	gulatory Analyst	DATE 09/14/15
Type or print name Renee' Jar	ratt F-mail addre	.cc.	PHONE: 432-686-3684
Type or print name E-mail address: PHONE: 432 000 0004 For State Use Only			
	ed for Record Only		DATE
Conditions of Approval (if any): "		· · · · · · · · · · · · · · · · · · ·	