

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. 30-025-42735
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 Tour Bus 23 State Com
8. Well Number 502H
9. OGRID Number 7377
10. Pool name or Wildcat WC-025 G-06 S223421L; Bone Spring

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator EOG Resources, Inc.
3. Address of Operator P.O. Box 2267 Midland, TX 79702
4. Well Location Unit Letter D : 250 feet from the North line and 330 feet from the West line Section 23 Township 22S Range 34E NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3490' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 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.

9/07/15 TD at 15083' MD.  
9/08/15 Ran 342 jts 5-1/2", 20#, HCP110 CDC casing set at 15083'.  
Cement lead w/ 650 sx Class C, 11.0 ppg, 3.62 CFS yield;  
tail w/ 1150 sx Class H, 14.4 ppg, 1.38 CFS yield. Calculated TOC is 1000'.  
9/10/15 Released rig.

Spud Date:

8/26/15

Rig Release Date:

9/10/15

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 9/10/2015  
Type or print name Stan Wagner E-mail address:  PHONE: 432-686-3689  
**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 09/17/15  
Conditions of Approval (if any):

SEP 21 2015

[Signature]