	Appropriate District	State of New Mexico			Form C-103		
Office  District I – (575) 393-6161		Energy, Minerals and Natural Resources			Revised July 18, 2013 WELL API NO.		
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		OIL CONSERVATION DIVISION			30-025-424		
611 5. 1 list St., Altesia, 1414 66210			South St. Francis Dr.		5. Indicate T		
1000 Rio Brazos Pd. Aztec NM 87410			nta Fe, NM 87505		6. State Oil 8	E FEE Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505					VB-1862	Sub Bouse 1101	
SUNDRY NOTICES AND REPORTS ON WELLS 7.					7. Lease Nam	ne or Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT PROPOSALS.)			TO DEEPEN OR PLUG BACK TO A  T" (FORM C-101) FOR SUCH		Driver BVE State /		
1. Type of Wel	Gas Well  Other				8. Well Number 2H /		
2. Name of Operator EOG Resources, Inc.			SEP 2 8 2015 9.			9. OGRID Number 7377	
3. Address of C					10. Pool nam		
<u></u>	ox 2267 Midlar	nd, TX 79702		RECEIVED	Bell Lake; E	Bone Spring, North	
4. Well Location Unit Location		2090 feet from th	<sub>e</sub> North	line and	O feet	from the West line	
Section	4 4	Township 2		nge 33E	NMPM	County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3668' 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 WORK ALTERING CASING							
TEMPORARILY ABANDON							
DOWNHOLE COMMINGLE							
CLOSED-LOOF	SYSTEM			OTHER: 5' new	hole		
OTHER:	e proposed or comp	eted operations. (Clear	rly state all p			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.							
09/22/2015 - Made 5' new hole. TD @ 45'. Hole size 20".							
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6 1D (	04/20/45	D.	D.L	4		·	
Spud Date:	04/30/15	KIĘ	g Release Da	ne:			
I hereby certify t	hat the information	above is true and comp	lete to the be	est of my knowledg	ge and belief.		
SIGNATURE Levil Janatt			Regulatory Analyst			DATE 9/23/15	
Type or print name Renee' Jarratt			E-mail address:			PHONE: 432-686-3684	
For State Use O	nlv						
Accepted for Record Only APPROVED BY:						DATE	
Conditions of Ar							