

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. 30-025-42781
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

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 A Section 36 feet from the 220 North line and 260 feet from the East line
 Township 25S Range 32E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3432' GR

7. Lease Name or Unit Agreement Name Gem 36 State Com
8. Well Number 702H
9. OGRID Number 7377
10. Pool name or Wildcat *WC-025 G-09 S253236A; Upper Wolfcamp

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.

- 11/10/15 Ran 240 jts 7-5/8", 29.7 #, HCP 110 LTC casing set at 10653', DV tool at 4767'.
 1st stg: Cement lead w/ 266 sx Class C, 11.0 ppg, 4.72 CFS yield;
 tail w/ 227 sx Class H, 15.6 ppg, 1.18 yield. Did not circulate.
 2nd stg: Cement lead w/ 275 sx Class C, 12.7 ppg, 4.34 CFS yield;
 tail w/ 100 sx Class C, 14.8 ppg, 1.33 CFS yield.
- 11/11/15 Ran temperature log & found TOC to be at 3400'. Performed bradenhead squeeze.
 Pumped 575 sx 50/50 Buzzi C cement blend. Drilled out DV tool.
- 11/12/15 Drilled cement to top of float collar at 10605'. Tested casing to 1700 psi. Test failed.
 Retest to 2000 psi. Test failed. Make up packer assembly. Determined leak to be between 4484' & 4515'.

Spud Date: 11/2/15

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 11/16/2015
 Type or print name Stan Wagner E-mail address: _____ PHONE: 432-686-3689

For State Use Only
 APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 12/13/15
 Conditions of Approval (if any): _____

DEC 15 2015