

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. <b>30-025-42971</b>
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 <b>Lomas Rojas 26 State Com</b>
8. Well Number <b>704H</b>
9. OGRID Number <b>7377</b>
10. Pool name or Wildcat *WC-025 G-09 S253336D; 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  **HOBBS OCD**

2. Name of Operator  
**EOG Resources, Inc.** ✓

3. Address of Operator  
**P.O. Box 2267 Midland, TX 79702**

4. Well Location  
 Unit Letter **B** : **721** feet from the **North** line and **2015** feet from the **East** line  
 Section **26** Township **25S** Range **33E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3345'**

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.

**4-3/4 Hole**  
 1/29/16 TD at 17355' MD.  
 1/30/16 Ran 391 jts 5-1/2", 23#, HCP110 JFE Bear casing set at 17345'.  
 1/31/16 Cement w/ **651 sx** 50/50 **POZ H** cement, 14.4 ppg, 1.23 CFS yield. Estimated TOC is 8184'.  
 2/01/16 Rig released.

Spud Date:  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 02/01/2016  
 Type or print name Stan Wagner E-mail address: \_\_\_\_\_ PHONE: 432-686-3689  
**For State Use Only**

APPROVED BY: *[Signature]* TITLE Petroleum Engineer DATE 03/30/16  
 Conditions of Approval (if any): \_\_\_\_\_

APR 14 2016 *CK*