

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. 30-025-42568
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 Lomas Rojas 26 State Com <input checked="" type="checkbox"/>
8. Well Number 701H <input checked="" type="checkbox"/>
9. OGRID Number 7377 <input checked="" type="checkbox"/>
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. **MAY 05 2016**

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

4. Well Location
 Unit Letter A : 721 feet from the North line and 927 feet from the East line
 Section 26 Township 25S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3336' 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 type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" 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.

- 11/05/15 Prep well for completion. Perform pre-frac casing test in 2000 psi increments to a max pressure of 10000 psi.
- 03/31/16 MIRU for completion. Begin 23 stage completion and frac.
- 04/08/16 Finish perforating and frac.
Perforated from 12676' to 17072', 0.40", 1626 holes.
Frac w/ 1104 bbls acid, 9148620 lbs proppant, 213965 bbls load water.
- 04/09/16 RIH to drill out plugs and clean out well.
- 04/10/16 Finish drill and clean out. RIH and set 5-1/2" production packer at 10194'.
- 04/11/16 RIH w/ 2-7/8" production tubing and gas lift assembly. EOT at 10228'.
Flowback first production to sales.

Spud Date: 06/02/2015

Rig Release Date: 6/28/15

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 04/29/2016

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

For State Use Only
 APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 05/16/16

Conditions of Approval (if any):

[Handwritten initials]