

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. 30-025-43009	<input checked="" type="checkbox"/>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	<input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Black Bear 36 State	<input checked="" type="checkbox"/>
8. Well Number 704H	<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 04 2016**

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

4. Well Location
 Unit Letter A : 254 feet from the North line and 675 feet from the East line
 Section 36 Township 25S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3325' 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.

- 4/19/16 TD at 17424' MD.
- 4/21/16 Ran 118 jts 5", 18#, ECP110 VAM TOP HT casing from 11751' to 17424'.
Ran 264 jts 5-1/2", 23#, HCP110 JFE Bear casing to 11749'.
Cement w/ 745 sx 50/50 POZ H, 14.4 ppg, 1.24 CFS yield. TOC TBD.
- 4/22/16 Released rig.

Spud Date: 3/29/16

Rig Release Date: 4/22/16

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 4/25/16

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

For State Use Only TITLE Petroleum Engineer DATE 05/31/16

APPROVED BY: [Signature] TITLE _____ DATE _____
 Conditions of Approval (if any): _____

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