

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
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

WELL API NO. 30-025-38516
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 Cimarron 18 State
8. Well Number 3
9. OGRID Number 7377
10. Pool name or Wildcat Mescalero Escarpe; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4077' GR

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 G : 1650 feet from the North line and 1650 feet from the East line
 Section 18 Township 18S Range 34E NMPM County Lea

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INT PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	INT TO PA P&A NR <u>Pm-X</u> P&A R _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

- 9/07/16 MIRU to P&A. POOH w/ rods.
- 9/08/16 Finish POOH w/ rods and tubing.
- 9/09/16 RIH w/ 5-1/2" CIBP set at 8862'. Dump bail Class H cement.
- 9/12/16 RIH and tag TOC at 8815'. Circulate well w/ 140 bbls mud laden fluid. Pressure test casing to 500 psi. Spot 25 sx Class C cement from 6700' to 6402'. Spot 25 sx Class C cement plug at 4500'. WOC.
- 9/13/16 RIH to tag TOC. No tag. RIH and tag CIBP at 8813'. Consult w/ NMOCD - Mark Whitaker. RIH and set CIBP at 8730'. Dump bail cement on CIBP.
- 9/14/16 Pumped 25 sx Class C cement plug at 6700'. WOC.
- 9/15/16 RIH and tag TOC at 6510'. Pull up hole to 4498'. Spot 25 sx Class C cement plug. WOC 4 hrs. RIH and tag TOC at 4230'. Pull up hole to 3357'. Spot 60 sx Class C plug.

Spud Date: Rig Release Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.

I hereby certify that the information above is true and complete to the

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 9/27/2016

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

For State Use Only

APPROVED BY: Mark Whitaker TITLE P.E.S. DATE 10/11/2016

Conditions of Approval (if any):

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HOBBS OGD
OCT 11 2016
RECEIVED

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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 checked="" 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: <input type="checkbox"/>	

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9/16/16 RIH and tag TOC at ~~1600'~~^{±2750'}. POOH. RIH and perf at 1800'. Unable to establish rate.
 RIH to 1858'. Spot 25 sx Class C cement plug. WOC 4 hrs. RIH and tag TOC at 1600'.
 RIH and perf at 575'. Pump into perms. Pump 130 sx Class C cement plug.
 9/19/16 RIH and tag TOC at 480'. Spot 50 sx Class C cement to surface.
 Weld on P&A marker. Clean location. Well P&A.

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 9/27/2016
 Type or print name Stan Wagner E-mail address: _____ PHONE: 432-686-3689
For State Use Only

APPROVED BY: _____ TITLE _____ DATE 10/11/2016
 Conditions of Approval (if any): _____