Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I _ (575) 303-6161	Energy, Minerals and Natural Resou	rces Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	D	WELL API NO.
District II – (575) 748-1283 811 S. First St., Artesia NN 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION	ON 30-025-42733
District III - (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 3 2017 District IV – (505) 476-3460 FEB 20 3 2017	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	:n	VB-1917
87505		
	AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION OF THIS FORM FOR PROPOSALS	TO DRILL OR TO DEEPEN OR PLUG BACK TO ON FOR PERMIT" (FORM C-101) FOR SUCH	··· itemed 2 ··· it state com
PROPOSALS.)	_	8. Well Number
	Well Other	1H
2. Name of Operator		9. OGRID Number
EOG Y Resources, Inc.		025575
3. Address of Operator 104 South Fourth Street, Artesia, NM 8	8210	10. Pool name or Wildcat
	88210	Wildcat; Lower Bone Spring
4. Well Location		1 1000 C (C - 1 - W)
Unit Letter C : 200 Unit Letter N 330	feet from the North line an feet from the South line an	
Section 20		36E NMPM Lea County
11	Elevation (Show whether DR, RKB, RT,	GR, etc.)
	2,943' GR	
12 (1 1 4	'	N. C. D. A. O.I. D. A.
12. Check Appr	opriate Box to Indicate Nature of I	Notice, Report or Other Data
NOTICE OF INTER	NTION TO:	SUBSEQUENT REPORT OF:
		AL WORK
_		NCE DRILLING OPNS. P AND A
-		/CEMENT JOB
DOWNHOLE COMMINGLE		_
CLOSED-LOOP SYSTEM		
OTHER:	□ OTHER:	
		etails, and give pertinent dates, including estimated date
		ltiple Completions: Attach wellbore diagram of
proposed completion or recompl	etion.	
2/19/17 - Made 5' new hole. TD 180'. I	Hole size 9".	
Note: 30" culvert with locking lid install	ed on 10/26/15.	
Spud Date: 9/1/15	Rig Release Date:	
I hereby certify that the information abov	e is true and complete to the best of my k	nowledge and belief.
10 1.	++-	
SIGNATURE WA	TITLE Assistant Regulator	ory Lead DATE February 21, 2017
T (// /		DUONE SECTIONS
Type or print name Laura Watts	E-mail address: <u>laura_watts@</u>	eogresources.com PHONE:575-748-4272_
Type or print name Laura Watts For State Use Only	E-mail address: laura_watts@	eogresources.com PHONE:575-748-4272_
For State Use Only	E-mail address: laura_watts@	
For State Use Only APPROVED BY:	E-mail address: laura_watts@ Accepted for Record Only TITLE	DATE
For State Use Only	E-mail address: laura_watts@	DATE