

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  
**HOBBBS OGD**  
 CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
**RECEIVED**  
 APR 09 2017

Form C-103  
 Revised July 18, 2013

WELL API NO. 30-025-43455	
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 NEPTUNE 10 STATE COM	
8. Well Number 504H	
9. OGRID Number 7377	
10. Pool name or Wildcat TRIPLE X; BONE SPRNG, WEST	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3610' 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  
PO BOX 2267 MIDLAND, TX 79702

4. Well Location  
 Unit Letter N : 330 feet from the South line and 1480 feet from the West line  
 Section 10 Township 24S Range 33E NMPM County LEA

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

<p style="text-align: center;"><b>NOTICE OF INTENTION TO:</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>          TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>          PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>          DOWNHOLE COMMINGLE <input type="checkbox"/>          CLOSED-LOOP SYSTEM <input type="checkbox"/>          OTHER: <input type="checkbox"/></p>	<p style="text-align: center;"><b>SUBSEQUENT REPORT OF:</b></p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>          COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/>          CASING/CEMENT JOB <input type="checkbox"/>          OTHER: <u>Completion</u> <input checked="" type="checkbox"/></p>
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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.

01/24/2017	Prep well for completion. Press tst flanges, seals, void to 8500 psi
01/26/2017	RDMO.
02/26/2017	MIRU Perform pre-fac csg tst to 11,500 psi - good, begin 44 stage comp
03/07/2017	Finished - Perforated 11408-21060', 0.35", 2780 holes Frac w/ 25.86 mm lbs proppant, 447,626 bbbs load fluid
03/08/2017	RDMO
03/27/2017	MIRU Press tstd to 8500 psi -Drilled out plugs and clean out wellbore
04/01/2017	Opened well to flowback First Production

Spud Date: 11/25/2016      Rig Release Date: 12/31/2016

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kay Maddox      TITLE Regulatory Analyst      DATE 04/07/2017

Type or print name Kay Maddox      E-mail address: kay\_maddox@eogresources.com      PHONE: 432-686-3658

**For State Use Only**  
 APPROVED BY: [Signature]      TITLE Petroleum Engineer      DATE 04/28/17  
 Conditions of Approval (if any):