

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
HOBBS
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
RECEIVED
 JUN 19 2017

Form C-103
 Revised July 18, 2013

WELL API NO. 30-025-41638
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VO-7378
7. Lease Name or Unit Agreement Name CARAVAN BVX STATE
8. Well Number 11 H
9. OGRID Number 7377
10. Pool name or Wildcat TRISTE DRAW; BONE SPRING, EAST
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3481' 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 **A** : **15** feet from the **North** line and **400** feet from the **EAST** line
 Section **33** Township **24S** Range **33E** NMPM County **LEA**

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.

01/04/2015 Tstd 5 1/2" csg to 3100 psi for 30 minutes-good

05/18/2017 MIRU prepare well and location to complete

05/22/2017 Perform pre-frac csg tst to 8500 psi - good

06/05/2017 Begin stage 1 of 20 stages perf & frac

06/15/2017 Perforated 11,252-15,691', 3 1/8", 1340 holes

06/17/2017 Frac w/11,518,910 lbs proppant, 279,665 bbls load fluid

06/20/2017 Drilled out plugs and clean out wellbore, RDMO

06/20/2017 Opened well to flowback

First Production

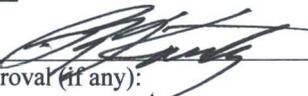
Spud Date: **11/14/2014** Rig Release Date: **01/06/2015**

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

SIGNATURE _____ TITLE **Regulatory Analyst** DATE **06/29/2017**

Type or print name **Kay Maddox** E-mail address: **kay_maddox@eogresources.com** PHONE: **432-686-3658**

For State Use Only

APPROVED BY:  TITLE **Petroleum Engineer** DATE **07/05/17**

Conditions of Approval (if any):