

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

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.)		WELL API NO. 30-025-43928
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Monitor Well		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator EOG Resources, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 2267 Midland, TX 79702		7. Lease Name or Unit Agreement Name Bridge State Unit
4. Well Location Unit Letter M : 300 feet from the South line and 800 feet from the West line Section 20 Township 22S Range 35E NMPM County Lea		8. Well Number 301H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3585' GR		9. OGRID Number 7377
		10. Pool name or Wildcat Rock Lake; Bone Spring

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

NOTICE OF INTENTION TO: 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: Casing Change <input checked="" type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" 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.

9/03/17 Spud 17-1/2" hole.
 9/07/17 Ran 13-3/8", 54.5#, J55 STC casing set at 2026'.
 Cement lead w/ 1265 sx Class C, 13.5 ppg, 1.76 CFS yield;
 tail w/ 460 sx Class C, 14.8 ppg, 1.56 CFS yield.
 Circulated 200 bbls cement to surface. WOC 4 hrs.
 Released surface rig.
 9/13/17 Tested casing to 1500 psi for 30 minutes. Test good.
 Resumed drilling 12-1/4" hole.

Spud Date: 9/03/17 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 9/18/2017
 Type or print name Stan Wagner E-mail address: _____ PHONE: 432-686-3689

For State Use Only

APPROVED BY: *[Signature]* TITLE Petroleum Engineer DATE 09/25/17
 Conditions of Approval (if any): _____