

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. 30-025-43820
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 Ares 4 State
8. Well Number 704H
9. OGRID Number 7377
10. Pool name or Wildcat WC-025 G-09 S243310P; Upper WC
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3586' 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 P : 969 feet from the South line and 1180 feet from the East line  
 Section 4 Township 24S Range 33E NMPM County Lea

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

- 1/18/18 Spud 17-1/2" hole.
- 1/19/18 Ran 13-3/8", 54.5#, J55 STC (0'-1383')  
 Cement lead w/ 960 sx Class C, 13.8 ppg, 1.76 CFS yield;  
 tail w/ 270 sx Class C, 14.8 ppg, 1.36 CFS yield.  
 Circulated 146 bbls cement to surface. Tested casing to 1500 psi for 30 minutes. Test good.
- 1/21/18 Resumed drilling 12-1/4" hole.

Spud Date: 1/18/18

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 01/22/2018

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

**For State Use Only**  
 APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 2-2-18  
 Conditions of Approval (if any): \_\_\_\_\_