

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

Form C-103
Revised July 18, 2013

HOBBS OGD

MAR 19 2018

RECEIVED

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-44266
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 Gem 36 State Com
8. Well Number 708H
9. OGRID Number 7377
10. Pool name or Wildcat *WC-025 G-09 S253236A; Upper Wolfcamp

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 M : 220 feet from the South line and 1226 feet from the West line
Section 36 Township 25S Range 32E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3348' GR

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 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.

- 3/6/18 Resumed drilling 8-3/4" hole.
- 3/12/18 Ran 7-5/8", 29.7#, HCP-110 BTC SCC (0' - 957')
Ran 7-5/8", 29.7#, HCP- 110 FXL (957' - 11661')
Cement lead w/355sx class C, 11.5 ppg, 2.43 CFS yield;
tail w/165sx class H, 15.6 ppg, 1.23 CFS yield.
Tested casing to 2600 psi. Test good.
Did not circulate. ETOC 2072'.
- 3/13/18 Resumed drilling 6-3/4" hole.

Spud Date:

1/19/2018

Rig Release Date:

[Empty box for Rig Release Date]

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

SIGNATURE

Elizabeth Castillo

TITLE

Regulatory Tech

DATE

3/14/2018

Type or print name

Elizabeth Castillo

E-mail address:

PHONE:

432-686-3697

For State Use Only

APPROVED BY:

Loren Sharp

TITLE

Staff Mgr

DATE

3-19-18

Conditions of Approval