

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

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

**HOBBS OGD**  
**MAR 19 2018**  
**RECEIVED**

WELL API NO. 30-025-44317
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 Ruby 2 State Com
8. Well Number 707H
9. OGRID Number 7377
10. Pool name or Wildcat Hardin Tank; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3292' 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 Monitor Well

2. Name of Operator  
EOG Resources, Inc.

3. Address of Operator  
P.O. Box 2267 Midland, TX 79702

4. Well Location  
 Unit Letter A : 329 feet from the North line and 1187 feet from the East line  
 Section 2 Township 26S Range 34E 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 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.

- 3/4/18 Resumed drilling 8-3/4" hole.
- 3/9/18 Ran 7-5/8", 29.7#, HCP-110, BTC SCC (0' - 1446')  
Ran 7-5/8", 29.7#, ICYP-110, MO-FXL (1446' - 11966')
- 3/10/18 Cement lead w/194 sx class C, 11.5 ppg, 4.26 CFS yield;  
tail w/155sx class H, 15.6 ppg, 1.23 CFS yield.  
Tested casing to 2500 psi for 30 minutes.  
ETOC at 4300'.
- 3/11/18 Resumed drilling 6-3/4" hole.

Spud Date: 2/17/2018

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 3/13/2018

Type or print name Elizabeth Castillo E-mail address: \_\_\_\_\_ PHONE: 432-686-3697

**For State Use Only**

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 3-19-18  
 Conditions of Approval (if any): \_\_\_\_\_