

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

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. 30-025-44624
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		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 Dragon 36 State
4. Well Location Unit Letter P 710 feet from the South line and 673 feet from the East line Section 36 Township 24S Range 33E NMPM County Lea		8. Well Number 301H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3486 GR		9. OGRID Number 7377
		10. Pool name or Wildcat RedHills, Lower Bone Spring

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 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 checked="" 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.

9/5/18 TD @ 15174' ✓
 9/6/18 Run 5-1/2", 20#, ICYP110, (0'-15174')
 Cement lead 280 sx Class H, 10.8 ppg, 3.4 yld ✓
 Middle 350 sx Class H, 11.5 ppg, 2.389 yld ✓
 Tail 1410 sx Class H, 14.5 ppg, 1.256 yld
 TOC 1207'
 Release rig ✓

Spud Date: **8/4/18** Rig Release Date: **9/6/18**

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

SIGNATURE Renee' Jarratt TITLE Regulatory Analyst DATE 09/12/18
 Type or print name Renee' Jarratt E-mail address: _____ PHONE: 432-686-3644

For State Use Only

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 9-18-18
 Conditions of Approval (if any): _____