

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**  
**RECEIVED**  
**OCT 23 2018**

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

WELL API NO. 3002545180
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <input checked="" type="checkbox"/>
7. Lease Name or Unit Agreement Name MAGNOLIA 15
8. Well Number 302Y
9. OGRID Number 7377
10. Pool name or Wildcat 7280 Bradley, Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3297' GL

SUNDRY NOTIFICATION 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

3. Address of Operator  
5509 CHAMPION DRIVE, MIDLAND, TEXAS 79703

4. Well Location  
 Unit Letter \_\_\_\_\_ : 344 feet from the SOUTH line and 842 feet from the WEST line  
 Section 15 Township 26S Range 33E NMPM County LEA COUNTY

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 type="checkbox"/>		OTHER: PROD CASING <input checked="" 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.

10/09/18 8-3/4 HOLE

Production Casing @ ~14,976' MD, 10,030' TVD  
 5-1/2", 20#, ICYP-110, TXP (MJ @ 9,439')  
 Lead Cement w/ 365 sx Class C (10.8 ppg, 2.69 yld), follow w/390 sx Class C (11.5 ppg, 2.16 yld), Tail w/1,450 sx Class H (14.8 ppg, 1.18 yield) Test casing to 5,000 psi for 10 min - Good Did not circ ument to surface, TOC @ 3,588' by Calc  
 RR10/11/18 Completion sundry to follow

Spud Date: 09/25/18

Rig Release Date: 10/11/18

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

SIGNATURE Emily Follis TITLE Sr. Regulatory Administrator DATE 10/15/18

Type or print name Emily Follis E-mail address: emily\_follis@eog.com PHONE: 432-848-9163

**For State Use Only**  
 APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 10/23/18

Conditions of Approval (if any):