

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

WELL API NO. 30-025-44620
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 Grendel 2 State Com
8. Well Number 301H
9. OGRID Number 7377
10. Pool name or Wildcat WC025G08S233520D; Lwr BS

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** : **352** feet from the **South** line and **782** feet from the **West** line
 Section **2** Township **24S** Range **35E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3454 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 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.

11/01/18 TD @ 17,445"
 11/01/18 Run 5-1/2" 20#, P-110 LTC (0'-10848")
 Run 5-1/2" 20#, P-110 Ultra (10848'-17445')
 11/02/18 Cmt lead 290 sx, 10.8 ppg, 3.384 yld
 Middle 250 sx, 11.5 ppg, 2.238 yld
 Tail 1655 sx, 14.5 ppg, 1.26 yld
 Test to 5000 psi/30 min-good
 ETOC @ 2885'
 Release Rig

Spud Date: **10/09/18** Rig Release Date: **11/2/18**

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 11/7/18

Type or print name Renee' Jarratt E-mail address: _____ PHONE: 432-686-3644

For State Use Only

APPROVED BY: *[Signature]* TITLE Petroleum Engineer DATE 11/17/18
 Conditions of Approval (if any): _____