

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

NOT RECORDED  
 RECEIVED  
 DEC 18 2018

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-44972
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 <b>EOG RESOURCES INC</b>		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 2267 MIDLAND, TX 79702		7. Lease Name or Unit Agreement Name <b>SAVAGE 2 STATE COM</b>
4. Well Location Unit Letter <u>D</u> : <u>616'</u> feet from the <u>NORTH</u> line and <u>408'</u> feet from the <u>WEST</u> line Section <u>2</u> Township <u>25S</u> Range <u>32E</u> NMPM County <u>LEA</u>		8. Well Number <b>201H</b> 9. OGRID Number <b>7377</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3513' GR</b>		10. Pool name or Wildcat WC025 G07 S243225C; LOWER BONE SPRING

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <b>Completion</b> <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.

09/25/2018 Rig released  
 10/06/2018 MIRU prep to frac -Test void to 5000 psi, seals & flanges to 8500 psi  
 11/07/2018 Begin perf & frac  
 11/14/2018 Finish 18 stages perf & frac, 9,560- 14,184' 960 3 1/8" shots 12,252,879 lbs  
                   proppant + 196,451 bbls load fluid  
 11/17/2018 Drilled out plugs and clean out wellbore  
 11/19/2018 Opened well to flowback  
                   Date of First Production

Spud Date: 09/01/2018      Rig Release Date: 09/25/2018

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

SIGNATURE Kay Maddox TITLE Regulatory Analyst DATE 12/17/2018

Type or print name Kay Maddox E-mail address: kay\_maddox@eogresources.com PHONE: 432-686-3658

**For State Use Only**

APPROVED BY Karen Graup TITLE Staff Mgr DATE 12-19-18  
 Conditions of Approval (if any):