

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  
**HOBBBS**  
**RECEIVED**  
**JAN 28 2019**  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

WELL API NO. **3001544274**

5. Indicate Type of Lease  
 STATE  FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
**CONVOY 28 STATE COM**

8. Well Number 705H

9. OGRID Number 7377

10. Pool name or Wildcat  
 [98092] WC-025 G-09 S243336I; UPPER WC

**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**

3. Address of Operator  
**P O BOX 2267, MIDLAND TX 79702**

4. Well Location  
 Unit Letter **B** : **572** feet from the **NORTH** line and **2322** feet from the **EAST** line  
 Section **28** Township **24S** Range **33E** NMPM County **LEA**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3520 GL**

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 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: <b>DRILL CSG</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.

01/09/19 8-3/4" HOLE

2nd Intermediate Casing @ 11,844'  
 Run 7-5/8", 29.7#, HCP-110, BTC SC (0' - 1,074')  
 Run 7-5/8", 29.7#, HCP-110, FXL (1,074' - 11,844')  
 Lead Cement w/ 280 sx Class C (3.62 yld, 9.0 ppg), followed w/165 sx Class C (2.55 yld, 11.0 ppg),  
 Tail w/180 sx Class C (1.11 yld, 14.2 ppg)  
 Test casing to 2,600 psi for 30 min - Good. Circ 109 sx cement to surface. Resume drilling

Spud Date:

01/10/18

Rig Release Date:

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 01/22/19

Type or print name Emily Follis

E-mail address: emily\_follis@eogresources.com

PHONE: 432-848-9163

**For State Use Only**

APPROVED BY:

*[Signature]*

TITLE

DATE

02/08/19

Conditions of Approval (if any):

✓