

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

**HOBBS OGD** State of New Mexico  
Energy, Minerals and Natural Resources  
**FEB 07 2019**  
**RECEIVED**  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

WELL API NO. <b>30-025-41691</b>	
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 <b>PAPAYA BVP STATE</b>	
8. Well Number <b>2H</b>	
9. OGRID Number <b>7377</b>	
10. Pool name or Wildcat <b>RED HILLS; LOWER BONE SPRING</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3720' GR</b>	

**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 ☐ **SPUDDER WELL**

2. Name of Operator **EOG RESOURCES INC**

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

4. Well Location  
Unit Letter **M** : **200** feet from the **SOUTH** line and **880** feet from the **WEST** line  
Section **10** Township **21S** Range **34E** NMPM County **LEA**

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 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.

02/01/2019 MIRU, PMP 385 SXS CL C CMT TO SURFACE, WOC, VERIFIED CMT

WELL IS PLUGGED AND ABANDONED

Spud Date:

**03/28/2014**

Rig Release Date:

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 **02/05/2019**

Type or print name **Kay Maddox**

E-mail address: **kay\_maddox@eogresources.com** PHONE: **432-686-3658**

**For State Use Only**

APPROVED BY:

*Kerry Fortner*

TITLE

*Compliance Officer A*

DATE

**2-7-19**

Conditions of Approval (if any):