

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

Form C-103  
Revised July 18, 2013

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>30-025-44955</b>
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 <b>PO BOX 2267 MIDLAND, TX 79702</b>		7. Lease Name or Unit Agreement Name <b>MAMBA 30 STATE COM</b>
4. Well Location Unit Letter <b>A</b> : <b>824'</b> feet from the <b>NORTH</b> line and <b>493'</b> feet from the <b>EAST</b> line Section <b>30</b> Township <b>24S</b> Range <b>33E</b> NMPM County <b>LEA</b>		8. Well Number <b>502H</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3551' GR</b>		9. OGRID Number <b>7377</b>
		10. Pool name or Wildcat <b>WC025 G07 S243225C; LWR BONE SPRING</b>

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: <b>TUBING</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.

12/19/2018 RAN 2 7/8" L-80 TBG AND GAS LIFT VALVES. SET TBG @ 11,311' *1e<sup>m</sup>*  
PUT WELL BACK ON PRODUCTION

Spud Date:

08/15/2018

Rig Release Date:

09/23/2018

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 02/13/2019

Type or print name Kay Maddox

E-mail address: kay\_maddox@eogresources.com

PHONE: 432-686-3658

For State Use Only

APPROVED BY:

*[Signature]*

TITLE Petroleum Engineer

DATE 02/20/19

Conditions of Approval (if any):