

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. 30-025-45636
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 NEPTUNE 10 STATE COM
8. Well Number 301H
9. OGRID Number 7377
10. Pool name or Wildcat [59900] TRIPLE X; BONE SPRING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3615 GL

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-104) 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 M 342 feet from the SOUTH line and 332 feet from the WEST line  
 Section 10 Township 24S Range 33E NMPM County IEA

HOBBS OCD  
 APR 22 2019  
 RECEIVED

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: DRILL CSG <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.

03/26/19 8-3/4" hole

1st Intermediate Casing @ 5,140'  
 Ran 9-5/8", 40# J-55 LTC (0' - 4,149')  
 Ran 9-5/8" 40# HCK-55 LTC (4,149' - 5,140')  
 Lead Cement w/ 1,380 sx Class C (1.94 yld, 12.7 ppg), Tail w/ 350 sx Class C (1.38 yld, 14.8 ppg)  
 Test casing to 2,500 psi for 30 min. Good Circ 541 sx cement to surface Resume Drilling

*J.P.M.*

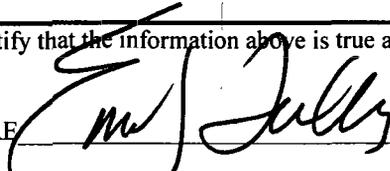
Spud Date:

03/22/19

Rig Release Date:

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

SIGNATURE



TITLE Sr. Regulatory Administrator

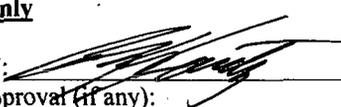
DATE 03/29/19

Type or print name Emily Pollis

E-mail address: emily\_follis@eogresources.com PHONE: 432-848-9163

**For State Use Only**

APPROVED BY:



TITLE

DATE

04/04/19

Conditions of Approval (if any):