

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

RECEIVED
 HOBBBS OCD
 MAY 22 2019

WELL API NO. 30-025-45465
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 322918
7. Lease Name or Unit Agreement Name CARAVAN 28 STATE COM
8. Well Number 704H
9. OGRID Number 7377
10. Pool name or Wildcat [98092] WC-025 G-09 S2433361; UPPER WOLFCAMP

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO MOVE 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 **D** : **481** feet from the **NORTH** line and **394** feet from the **WEST** line
 Section **28** Township **24S** Range **33E** NMPM County **LEA**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3534 GL

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 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.

05/14/19 6-3/4" hole
 05/14/19 Production Casing @ 22,708' MD, 12,481' TVD
 Ran 5-1/2", 20#, HCP-110, RDT-BTX (MJ @ 11,802') (Airlock @ 11,545')
 Lead Cement w/ 1,040 sx Class H (1.2 yld, 14.5 ppg)
 Test casing to 5,800' for 10 min - OK. Did not circ cement to surface, TOC @ 8,210' by Calc RR Completion to follow

Spud Date: **04/14/19** Rig Release Date: **05/16/19**

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 05/21/19

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 05/29/19
 Conditions of Approval (if any): _____