

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

**HOBBS OCD**

NOV 07 2019

WELL API NO. 30-025-46304
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 326115
7. Lease Name or Unit Agreement Name BANDIT 32 STATE COM
8. Well Number 708H
9. OGRID Number 7377
10. Pool name or Wildcat 98092 WC-025 G-09 S243336I; UPPER WOLFCAMP

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO CHANGE THE CHARACTER OF A WELL IN 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 **F** : **2339** feet from the **NORTH** line and **1382** feet from the **WEST** line  
 Section **32** Township **24S** Range **33E** NMPM County **LEA CO**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3506 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: 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.

10/08/19 20" Conductor @ 115'  
 10/14/19 Surface Hole @ 1,374' MD, 1,374' TVD  
 Casing shoe @ 1,359' MD  
 9-5/8" 40# J-55 LTC  
 Cement w/ 580 sx Class C (1.33yld, 14.8 ppg), followed by 105 sx Class C

10/20/19 8-3/4" HOLE  
 10/20/19 Intermediate Hole @ 11,894' MD, 11,781' TVD  
 Casing shoe @ 11,879' MD  
 Ran 7-5/8", 29.7#, HCP-110 BTC SC (0' - 989')  
 Ran 7-5/8", 29.7#, ICYP-110 MO-FXL (989' - 11,879')  
 Stage 1: Lead Cement w/ 395 sx Class H (1.20' yld, 15.6 ppg)  
 Test casing to 2,500 psi for 30 min - Good Did not circ cement to surface, TOC @ 7,300' by Calc  
 Stage 2: Bradenhead squeeze w/ 1,000 sx Class C (1.50 yld, 14.8 ppg)  
 Stage 3: Top out w/ 82 sx Class C (1.37 yld, 14.8 ppg) TOC @ surface

Spud Date: 10/08/19  
10/15/19

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 11/05/19

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 Petroleum Engineer DATE 11/13/19

Conditions of Approval (if any):