

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  
**HOBBS OCD**  
 OIL CONSERVATION DIVISION  
 1220 S. St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

WELL API NO. 30-025-46337
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 321651
7. Lease Name or Unit Agreement Name SAVAGE 2 STATE COM
8. Well Number #708H
9. OGRID Number 7377
10. Pool name or Wildcat 98180 WC-025 G-09 S253309P; UPR WOLFCAMP

**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

2. Name of Operator  
EOG RESOURCES

3. Address of Operator  
P O BOX 2267, MIDLAND TX 79702

4. Well Location  
 Unit Letter **A** : **227** feet from the **NORTH** line and **1747** feet from the **EAST** line  
 Section **2** Township **25S** Range **32E** NMPM County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3535 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.

10/27/19 8-3/4" hole

10/27/19 Intermediate Hole @ 11,755' MD, 11,727' TVD  
 Casing shoe @ 11,725' MD  
 Ran 7-5/8", 29.7#, HCP-110 BTC SC (0' - 972')  
 Ran 7-5/8", 29.7#, ECP-110 MO-FXL (972' - 11,725')  
 Stage 1: Lead Cement w/ 390 sx Class H (1.22 yld, 15.6 ppg)  
 Test casing to 2,500 psi for 30 min - good. Did not circ cement to surface, TOC @ 8,420' by Calc  
 Stage 2: Bradenhead squeeze w/ 1,000 sx Class C (1.52 yld, 14.8 ppg) TOC @ 1,000' by Calc  
 Stage 3: Top out w/ 92 sx Class C (1.34 yld, 14.8 ppg) TOC @ surface Resume drilling 8-3/4" hole

Spud Date: 10/05/19

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 11/06/19

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):