

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
DEC 19 2019
RECEIVED

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.)		WELL API NO. 30-025-46365
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"/> State Oil & Gas Lease No. 320644
2. Name of Operator EOG RESOURCES		7. Lease Name or Unit Agreement Name BANDIT 29 STATE COM
3. Address of Operator P O BOX 2267, MIDLAND TX 79702		8. Well Number #707H
4. Well Location Unit Letter D : 447 feet from the NORTH line and 976 feet from the WEST line Section 29 Township 24S Range 33E NMPM County LEA CO, NM		9. OGRID Number 7377
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3538' GL		10. Pool name or Wildcat <small>98092 WC-025 G-09 S243336I; UPPER WOLFCAMP</small>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL. <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> OTHER: DRILL CSG <input checked="" type="checkbox"/>	
---	--	--	--

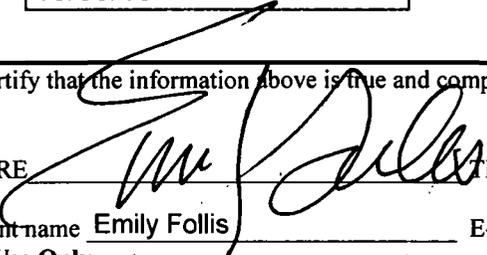
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12/08/19 6-3/4" hole

12/08/19 Production Hole @ 19,928' MD, 12,461' TVD
 Casing shoe @ 19,919' MD, 12,461' TVD
 Ran 5-1/2", 20#, ICYP-110, TXP (0' - 11,624') (MJ @ 11,548')
 Ran 5-1/2", 20#, ECP-110, VAM SFC (11,624' - 19,919')
 Lead Cement w/ 770 sx Class H (1.26 yld, 14.5 ppg)
 Did not circ cement to surface, TOC @ 10,847' by Calc Waiting on CBL RR Completion to follow

Spud Date: 10/09/19 Rig Release Date: 12/10/19

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 12/16/19

Type or print name Emily Follis E-mail address: emily_follis@eogresources.com PHONE: 432-848-9163

For State Use Only

APPROVED BY:  TITLE _____ DATE 12/23/19

Conditions of Approval (if any): _____