

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. 30-025-46454	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. 313188	
7. Lease Name or Unit Agreement Name OSPREY 10	
8. Well Number 304H	
9. OGRID Number 7377	
10. Pool name or Wildcat 97369 RED HILLS; BONE SPRING, EAST	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3334 GL	

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 O : 611 feet from the SOUTH line and 1344 feet from the EAST line
 Section 10 Township 25S Range 34E NMPM County LEA CO

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"/>	

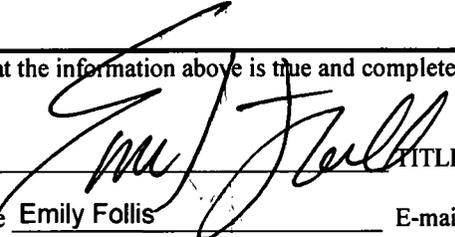
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

11/09/19 20" Conductor @ 115'
 12/02/19 17-1/2" hole
 12/02/19 Surface Hole @ 1,030' MD, 1,028' TVD
 Casing shoe @ 1,010' MD
 Ran 13-3/8" 54.5# J-55 STC
 Lead Cement w/ 750 sx Class C (1.76 yld, 13.5 ppg), Trail w/ 200 sx Class C(1.36 yld, 14.8 ppg)
 Test casing to 1,500 psi for 30 min -good Circ 415 sx cement to surface

12/04/19 12-1/4" hole
 12/04/19 1st Intermediate Hole @ 5,373' MD, 5,287' TVD
 Casing shoe @ 5,353' MD
 Ran 9-5/8", 40#, J-55 LTC (0' - 4,080')
 Ran 9-5/8", 40#, HCK-55 LTC (4,080' - 5,353')
 Lead Cement w/ 1,205 sx Class C (2.32 yld, 12.7 ppg), trail w/ 295 sx Class C (1.42 yld, 14.8 ppg)
 Test casing to 1,940 psi for 30 min - good. Circ 392 sx cement to surface Resume Drilling 8-3/4" hole

Spud Date: 11/09/19 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 12/20/19

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

APPROVED BY:  TITLE _____ DATE 12/31/19
 Conditions of Approval (if any): _____