

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
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

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 1-10) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-46385
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"/>
2. Name of Operator EOG RESOURCES		6. State Oil & Gas Lease No. 313191
3. Address of Operator P O BOX 2267, MIDLAND TX 79702		7. Lease Name or Unit Agreement Name GEM 36 STATE COM
4. Well Location Unit Letter D : 728 feet from the NORTH line and 554 feet from the WEST line Section 36 Township 25S Range 32E NMPM County LEA CO		8. Well Number 105H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3390 GL		9. OGRID Number 7377
10. Pool name or Wildcat 97838 JENNINGS; UPPER BONE SPRING SHALE		

HOBBS OCD
DEC 30 2019
RECEIVED

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"/>	
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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.

10/23/19 20" Conductor @ 115'
 11/08/19 17-1/2" HOLE
 11/08/19 Surface Hole @ 895' MD, 894' TVD
 Casing shoe @ 877' MD
 Ran 13-3/8" 54.5# J-55 STC
 Lead Cement w/ 600 sx Class C (1.79 yld, 13.5 ppg), Trail w/ 135 sx Class C (1.35 yld, 14.8 ppg)
 Test casing to 1,500 psi for 30 min -good. Circ 298 sx cement to surface

11/18/19 12-1/4" hole
 11/18/19 1st Intermediate Hole @ 4,663' MD, 4,614' TVD
 Casing shoe @ 4,648' MD
 Ran 9-5/8" 40# J-55 LTC (0' - 3,915')
 Ran 9-5/8" 40# HCL-80 LTC (3,915' - 4,648')
 Lead Cement w/ 1,050 sx Class C (2.26 yld, 12.7 ppg), Trail w/ 305 sx Class C (1.39 yld, 14.8 ppg)
 Test casing to 2,500 psi for 30 min - Good Circ 323 sx cement to surface Resume Drilling 8-3/4" hole

Spud Date:

10/23/19

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 12/19/19

Type or print name Emily Follis

E-mail address: emily_follis@eogresources.com

PHONE: 432-848-9163

For State Use Only

APPROVED BY:

Emily Follis

TITLE

Petroleum Engineer

DATE

01/09/20

Conditions of Approval (if any):