

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. 30-025-46441
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 325728
7. Lease Name or Unit Agreement Name ADDER 31 STATE
8. Well Number #705H
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 **P** : **686** feet from the **SOUTH** line and **941** feet from the **EAST** line
 Section **31** Township **24S** Range **33E** NMPM County **LEA**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3505 GL

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.

12/28/19 8-3/4" HOLE
 12/28/19 Intermediate Hole @ 11,825' MD, 11,778' TVD
 Casing shoe @ 11,808' MD
 Ran 7-5/8", 29.7#, HCP-110 BTC SC (0' - 1,101')
 Ran 7-5/8", 29.7#, ECP-110 MO-FXL (1,101' - 11,808')
 Stage 1: Lead Cement w/ 415 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/ 410 sx Class C (1.37 yld, 14.8 ppg) TOC @ surface
 01/03/20 6-3/4" hole
 01/03/20 Production Hole @ 17,387' MD, 12,428' TVD
 Casing shoe @ 17,373' MD, 12,428' TVD
 Ran 5-1/2", 20#, ICYP-110, TXP (0' - 11,544') (MJ @ 28' and 11,520')
 Ran 5-1/2", 20#, ECP-110, VAM SFC (11,544' - 17,373')
 Lead Cement w/ 575 sx Class H (1.19 yld, 14.5 ppg)
 Did not circ cement to surface, TOC @ 10,813' by Calc Waitin gon CBL RR 01/04/20 Completion to follow

Spud Date: **11/14/19** Rig Release Date: **01/04/20**

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 01/06/20

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 01/06/20
 Conditions of Approval (if any):