

12-5

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. 3002546370
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 31985
7. Lease Name or Unit Agreement Name DATE 14 STATE COM
8. Well Number 5081P
9. OGRID Number 7377
10. Pool name or Wildcat 5535 BERRY; BONE SPRING, NORTH

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 M : 809 feet from the SOUTH line and 959 feet from the WEST line
Section 14 Township 21S Range 33E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3812 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.

10/12/19 DV Tool w/ ECP @ 4,001'
10/12/19 1st Intermediate Casing @ 5,262' MD, 5,210' TVD
Casing shoe @ 5,247' MD
Ran 9-5/8", 40#, J-55 LTC (0' - 4,001')
Ran 9-5/8", 40#, HCK-55 LTC (4,001' - 5,247')
Stage 1: Lead Cement w/ 535 sx Class C (1.93 yld, 12.9 ppg), Trall w/ 190 sx Class C
Inflate ECP and open DV tool. TOC @ 4,001' by Calc
Stage 2: Lead Cement w/ 1,230 sx Class C (1.93 yld, 12.9 ppg), Trall w/ 280 sx Class C (1.33 yld, 14.8 ppg)
Circ 436 sx cement to surface
Test casing above and below DV tool to 1,500 psi for 30 min - Good Resume drilling 8-1/2" hole

12/03/19 8-1/2" hole
12/03/19 Production Hole @ 21,330' MD, 10,969' TVD
Casing Shoe @ 21,315' MD, 10,969' TVD
5-1/2", 20#, ICYP-110, TXP (MJ @ 10,223' & 20,846') (Alrlock @ 10,512')
Cemented w/ 2,670 sx of Class H + 0.35% HR-601 + 3% Microbond + 0.4% Halad-344 (1.26 yld, 14.5 ppg)
Test casing to 5,000 psi for 15 min, Did not circ cement to surface, TOC @ 7,178' by Calc RR Waiting on CBL Completion to follow

Spud Date: 10/04/19

Rig Release Date: 12/05/19

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 12/05/19

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 02/15/20
Conditions of Approval (if any):