

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

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

WELL API NO. <b>30-015-34666</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>Frio B 8 Fee</b>
8. Well Number <b>1H</b>
9. OGRID Number <b>7377</b>
10. Pool name or Wildcat <b>Cottonwood Creek; Wolfcamp (Gas)</b>

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3507 GR**

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other _____
2. Name of Operator <b>EOG Resources Inc.</b>
3. Address of Operator <b>P.O. Box 2267 Midland, Texas 79702</b>
4. Well Location Unit Letter <b>I</b> : <b>1880</b> feet from the <b>South</b> line and <b>660</b> feet from the <b>East</b> line Section <b>8</b> Township <b>16S</b> Range <b>25E</b> NMPM County <b>Eddy</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3507 GR</b>
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: **completion** ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

9/07/06 MIRU. 5 1/2" casing step rate tested to 7050 psi for 30 min. Test good. Prep to perforate.  
9/08/06 Perforate from 8300' to 8305', 0.48", 30 holes.  
9/12/06 Frac w/ 48 bbls 15% HCL acid; 3827 bbls slick water; 47000 lbs 30/70 Brown sand;  
172500 lbs 20/40 White sand.  
Perforate from 6800' to 7366', 0.54", 16 holes.  
Frac w/ 46 bbls 15% HCL acid; 3521 bbls slick water; 47000 lbs 30/70 Brown sand;  
151210 lbs 20/40 White sand.  
Perforate from 5775' to 6275', 0.54", 16 holes.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 9/26/06  
E-mail address: \_\_\_\_\_

Type or print name **Stan Wagner**

Telephone No. **432 686 3689**

For State Use Only

FOR RECORDS ONLY

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval, if any:

OCT 03 2006