

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87401
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
RECEIVED
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
MAY 19 2008
HOBBS OCD

Form C-103
May 27, 2004

WELL API NO. 30-025-30622	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name: East Corbin Delaware Unit	
8. Well Number 1	
9. OGRID Number 7377	
10. Pool name or Wildcat Corbin; Delaware, West	
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 type="checkbox"/> Other WIW	
2. Name of Operator EOG Resources Inc.	
3. Address of Operator P.O. Box 2267 Midland, Texas 79702	
4. Well Location Unit Letter M : 548 feet from the South line and 760 feet from the West line Section 16 Township 18S Range 33E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3851' GR	
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:	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 type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: Repair Casing Leak <input checked="" type="checkbox"/>	OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. **MIRU**
2. **POOH w/ 2 3/8" Injection tubing and packer.**
3. **Run tubing and packer to isolate leak. Leak suspected 700 - 800'.**
4. **Once leak isolated, run 5-1/2" RBP and squeeze tool in combination on 2-7/8" tubing workstring. Set RBP 250' below bottom of casing leak. Test RBP to 1000 psi.**
5. **Pick up and set squeeze tool at 250' above casing leak.**
6. **Squeeze w/ 75 sx Class C cement. WOC 24 hrs before drill out. Drill out and test to 1000 psi.**
7. **Return to Injection**

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 NMOC guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 5/13/08

Type or print name **Stan Wagner** E-mail address:

Telephone No. **432-686-3689**

For State Use Only

APPROVED BY Chris Williams **OC DISTRICT SUPERVISOR/GENERAL MANAGER** DATE MAY 21 2008

Conditions of Approval, if any: