Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103 Revised March 25, 1999	
District I 1625 N. French Dr., Hobbs, NM 87240	Energy, Minerals and Natural Resources		WELL API NO.	
District II 811 South First, Artesia, NM 87210	CONSERVATION DIVISION		30-025-36480 5. Indicate Type of Lease	
District III 2040 South Pacheco		STATE	FEE x	
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV		6. State Oil & Gas L		
2040 South Pacheco, Santa Fe, NM 87505			o. State Oil & Gas L	ease No.
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.)			7. Lease Name or Unit Agreement Name:	
1. Type of Well:			<u> </u>	
Oil Well Gas Well X	Other		8. Well No.	
2. Name of Operator			8. Well No.	
EOG Resources Inc. 3. Address of Operator			9. Pool name or Wildcat	
P.O. Box 2267 Midland, Texas 79702			Big Dog; Morrow (Gas)	
4. Well Location				
Unit Letter F:	1230 feet from the Nor	th line and	1054 feet from	the West line
Section 31	Township 15S	Range 35E	NMPM	County Lea
10. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	911	15 GR		 - -
	Appropriate Box to Indicate			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON L	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON			PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB	[x]	
OTHER:		OTHER:		
12. 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 recompilation.				
1/2/04 Spud well 1/1/ Ran 10 jts 11	704. 3/4", 42#, H-40 surface cas 0 sx Class C lead, 215 sx Cl	ing set @ 465'.		18 19 20 21 22
Cemented w/ 90	sx Class C lead, 215 sx Cl	ass C tail. CIRC	38 sx to surface!	, , <u>, , , , , , , , , , , , , , , , , </u>
- /- /	E (0)	it_ 20# T EE\ i-		(27 C)
1/0/04 Kan 103 Jes o	5/8", (16 jts 32# HCK-55, 9 500 sx 50:50 POZ C, followed) JCS 32# 0 33/ 1	The state of the s	piti is s
Calenced w/ 1.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 27 250 24 02025	[2]	990
1/9/04 Tested casing	to 2300 #. OK.		101112	257526272829 2576272829 26772829
			12.	50
			/%	, e c
			<u>``</u>	35827
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
ff.		n namilahaan 33		ATE 1/12/04
SIGNATURE C	TITI	E Regulatory Anal	<u>lyst</u> [)	ATE 1/12/04
Type or print name Stan Wagner	U		Telephon	ne No. 432 686 3689
(This space for State use)			e nictiee asaname	JAN 1 5 2004

APPROVED BY Conditions of approval, if any

JAN 1 5 2004