Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103		
District I	ctI		June 19, 2008 WELL API NO.		
1625 N. French Dr., Hobbs, NM 87240 District II	OII CONSERVATIO	30-025-39532			
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE X	FEE	
District IV. 1220 S. St. Francis Dr., Santa Fe, NM			6. State Oil & Gas	Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name:		
(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.)			Lomas Rojas 26 State Com		
1. Type of Well:			8. Well Number		
Oil Well 🕱 Gas Well 🗌 Other			2Н		
2. Name of Operator	Name of Operator			9. OGRID Number	
EOG Resources, Inc.			7377		
3. Address of Operator			10. Pool name or Wildcat  Red Hills; Bone Spring		
P.O. Box 2267 Midland, Tx 79702 Red Hills; Bone Spring 4. Well Location					
Unit Letter P:	330 feet from the Sou	ith line and	430 feet from	m the <b>East</b> line	
Section 26		Range 33E	NMPM	County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)  3334' GR					
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
			SEQUENT REI	PORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING					
TEMPORARILY ABANDON	N 🔲 CHANGE PLANS 😨 COMMENCE DRILLI			P AND A	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT J	ов 🗆		
DOWNHOLE COMMINGLE			-		
DOWNHOLE COMMINGLE L.					
OTHER:		OTHER:			
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.					
ECG Rescurces requests the approved APD for the Lomas Rojas 26 State Com No. 2H be canceled.					
Canceled API # 30-025-39532					
		API	# 30- O.	25-39532	
Spud Date:	Rig Relea	ase Date:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE Stan 2	TIT	LE Regulato	ory Analyst	DATE 3/1/2010	
Type or print name Stan Wagner E-mail address:PHONE 432-686-3689					
For State Use Only	PETROLEUM ENGINEER MAR 0 2 2010				
APPROVED BY TITLE DATE					
Conditions of Approval (if any):					