1 11 1	New Mexico	Form C-103
Office Energy, Minerals a	and Natural Resources	June 19, 2008
1625 N. French Dr., Hobbs, NM 87240		WELL API NO.
District II 1301 W. Grand Ave, Artesia, NM 88240 1220 South St. Francis Dr.		30-025-39705
District III 1220 South St. Francis Dr.		5. Indicate Type of Lease
	e, NM 87505	STATE X FEE
		6. State Oil & Gas Lease No.
1220 S St. Francis Dr., Santa Fe, NMOBBSOCD 87505		
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		7. Lease Name or Unit Agreement Name:
PROPOSALS.)		Lomas Rojas 26 State Com
1. Type of Well: Oil Well Gas Well Other		8. Well Number 6
2. Name of Operator		9. OGRID Number 7377
EOG Resources, Inc. 3. Address of Operator		10. Pool name or Wildcat
P.O. Box 2267 Midland, TX 79702		Red Hills; Bone Spring
4. Well Location		
Unit Letter G : 2620 feet from the	North line and	1810 feet from the East line
Section 26 Township	25S Range 33E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3336' GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDO	N REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	COMMENCE DRILL	ING OPNS. T P AND A
	CASING/CEMENT	
PULL OR ALTER CASING MULTIPLE COMPL	LJ CASING/OLIVILINI (
DOWNHOLE COMMINGLE L.J		
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.		
4/11/10 Spud 14-3/4" hole.		
4/12/10 RIH w/ 16 jts 11-3/4", 42#, H40 STc casing set at 682'.		
Cemented w/ 475 sx Class C, 14.8 ppg, 1.35 yield.		
Circulated 112 sx to surface. WOC 18 hrs. Tested casing to 1500 psi for 30 minutes. Test good.		
Resumed drilling 11" hole.		
resuled diffing it into		
Spud Date: 4/11/10	Rig Release Date:	
Space Date:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE The Way	TITLE Regulato	DATE 4/13/10
Type or print name Stan Wagner E-mail address: PHONE 432-686-3689		
For State Use Only	TITLE PERMUSAN	APR 1 6 2010
APPROVED BY	TITLE TITLE	DATE
Conditions of Approval (if any):		