

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-025-35986
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other 915 686 3689		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator EOG Resources Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 2267 Midland, Texas 79702		7. Lease Name or Unit Agreement Name: John's Hopper 30
4. Well Location Unit Letter L : 1980 feet from the South line and 880 feet from the West line Section 30 Township 15S Range 35E NMPM County Lea		8. Well No. 2
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4026 GR		9. Pool name or Wildcat Edson; Morrow, North (Gas)

11. 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 checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 recompletion.

10/14/02 Ran 24 jts. 8 5/8", 22# HCK 55 & 85 jts. 32# J55 casing set at 4875'.
Cemented w/ 1425 sx Interfill w/ 1/4 # FLOCELE. Tailed w/ 250 sx C + 2% CACL2.
Circulated 20 sx. WOC 19 hrs. Tested casing to 1000 psi for 30 min. Tested OK.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 10/17/2002

Type or print name Stan Wagner Telephone No. 915 686 3689

(This space for State use)

ORIGINAL SIGNED BY
GARY W. WINK

OC FIELD REPRESENTATIVE / STAFF MANAGER DATE

APPROVED BY

Conditions of approval, if any: