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	OURCES INC											
Form 4 July 01, 202	13											
										OMB APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check this box if no longer subject to Section 16.							Expires: Estimated av burden hour response					
(Print or Type	Responses)											
1. Name and THOMAS	Sy	8					5. Relationship of Reporting Person(s) to ssuer					
(Last)	(First) (Middle) 3.	Date of Earlie	est T	ransaction			(Check	all applicable)			
1111 BAGBY, SKY LOBBY 2			(Month/Day/Year) 06/28/2013					Director 10% Owner _X Officer (give title Other (specify below) Chief Operating Officer				
	Filed(Month/Day/Year) A				A	. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person						
HOUSTON, TX 77002 — Form filed by More than One Reporting Person									oorting			
(City)	(State)	(Zip)	Table I - N	on-	Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Dat any	Code(Instr. 3, 4 and 5)BeneficiallyFormYear)(Instr. 8)OwnedDirectFollowingor IncReported(I)				Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Stock	06/28/2013		А		10.588	А	\$ 131.68	504,838.781	D			
Common Stock	06/28/2013		А	V	101	А	\$ 105.128	504,939.781	D			
Common Stock								5,767	Ι	401(k) Plan		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Bate Expiration Title Amount Oate Date Expiration Oate Oate Code V (A) (D) V Shares Reporting Owner Name / Address Director 10% Owner Officer Other	1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction D (Month/Day/Yea	ar) Exe any	cution Date, if	Code	5. oriNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	Amo Unde Secur	tele and unt of rtlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
Reporting Owner Name / Address Relationships						Code V	(A) (D)	Exercisable	-	Title	or Number of		
Reporting Owner Name / Address	Repo	ting O	wners										
Director 10% Owner Officer Other	Reporting	g Owner Nam	e / Address			Relationsh	ips						
THOMAS GARY L	THOMAS	CAPVI	D	irector	10% Owner	Officer		0	ther				

Chief Operating Officer

1111 BAGBY, SKY LOBBY 2 HOUSTON, TX 77002

Signatures

Vicky Strom, Attorney-In-Fact for Gary L. Thomas	07/01/2013
** Signature of Reporting Person	Date

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.