Edgar Filing: EOG RESOURCES INC - Form 4

EOG RESO	URCES INC											
Form 4												
March 04, 20	014											
FORM	1 4								OMB AF	PROVAL		
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287		
Check th				0					Expires:	January 31,		
if no long subject to		IENT OI	F CHAN	GES IN	BENEF	ICIA	L OWN	ERSHIP OF	Estimated average			
	Section 16.				SECURITIES					burden hours per		
	Form 4 or							response 0.5				
Form 5 obligation	n o -						-	Act of 1934,				
may cont				•	•	· ·	•	1935 or Section	l			
<i>See</i> Instru 1(b).		30(h)	of the Ir	ivestment	Compar	іу Ас	t of 1940)				
(Print or Type I	Responses)											
1. Name and Address of Reporting Person * Donaldson Michael P2. Issuer Symbol				l				5. Relationship of Reporting Person(s) to Issuer				
EOG RI			RESOURCES INC [EOG]				(Check all applicable)					
(Last)	(First) (N	Middle)	3. Date o	f Earliest Tr	ansaction			,				
1111 BAGBY, SKY LOBBY 2 (Month/D 03/02/20				th/Day/Year) 2/2014				Director	Director 10% Owner XOfficer (give title Other (specify			
								below) below)				
								VP, General	Counsel & Co	rp Sec		
			4. If Ame	Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Ionth/Day/Year)				Applicable Line)					
HOUSTON	, TX 77002							_X_ Form filed by O Form filed by M Person				
(City)	(State)	(Zip)										
(eny)	(State)	(Z I p)	Tab	le I - Non-D	erivative	Secur	ities Acqu	iired, Disposed of,	or Beneficial	y Owned		
1.Title of	2. Transaction Date			3.	4. Securit			5. Amount of	6.	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	Execution any	i Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially	Ownership Form: Direct	Indirect Beneficial		
(11151110)		(Month/D	ay/Year)					Owned	(D) or Owners	Ownership		
								Following	Indirect (I)	(Instr. 4)		
						(A)		Reported Transaction(s)	(Instr. 4)			
					A	or	D. '	(Instr. 3 and 4)				
Common					Amount	(D)	Price \$					
Stock	03/02/2014			F <u>(1)</u>	446	D	ф 189.42	29,531.303	D			

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative	6. Date Exer Expiration D (Month/Day.	Date	Amou	le and ant of rlying ities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene
	Derivative				Securities	3			. 3 and 4)		Owne
	Security				Acquired (A) or						Follo Repo
					Disposed						Trans
					of (D) (Instr. 3,						(Instr
					(insu: 3, 4, and 5)						
									Amount		
						Date	Expiration	Title	or Number		
						Exercisable	Date	The	of		
				Code V	(A) (D)				Shares		
Benor	ting O	whore									

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Donaldson Michael P 1111 BAGBY, SKY LOBBY 2 HOUSTON, TX 77002			VP, General Counsel & Corp Sec					
Signatures								
Vicky Strom, attorney-in-fact for	Michael	P.						
Donaldson			03/04/2014					
**Signature of Reporting Po	erson		Date					

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).
- (1) Relates to the vesting of 1,591 restricted shares on March 2, 2014.

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.