

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0137  
Expires March 31, 2007

**SUNDRY NOTICES AND REPORTS ON WELLS**

*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

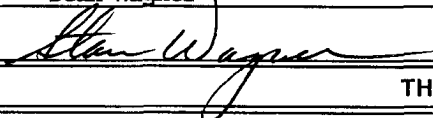
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. <b>NM 028990 (a)</b>
2. Name of Operator <b>EOG Resources Inc.</b>		6. If Indian, Allottee or Tribe Name
3a. Address <b>P.O. Box 2267 Midland, Texas 79702</b>	3b. Phone No. (include area code) <b>432 686 3689</b>	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>347' FSL &amp; 845' FEL U/L P Sec 13, T18S, R30E</b>		8. Well Name and No. <b>Loco 13 Federal 1</b>
		9. API Well No. <b>30-015-33561</b>
		10. Field and Pool, or Exploratory Area <b>Shugart; Bone Spring, North</b>
		11. County or Parish, State <b>Eddy NM</b>

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize <input type="checkbox"/> Deepen <input type="checkbox"/> Production (Start/Resume) <input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing <input type="checkbox"/> Fracture Treat <input type="checkbox"/> Reclamation <input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair <input type="checkbox"/> New Construction <input type="checkbox"/> Recomplete <input checked="" type="checkbox"/> Other <u>Completion</u>
	<input type="checkbox"/> Change Plans <input type="checkbox"/> Plug and Abandon <input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Convert to Injection <input type="checkbox"/> Plug Back <input type="checkbox"/> Water Disposal

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomple in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

- 9/17/04 ID @ 8910'
- 9/20/04 Ran 202 jts 5 1/2", 17 #, J-55 production casing set @ 8910'.  
Cemented w/ 720 sx Litecrete lead, 400 sx POZ C tail.
- 10/2/04 MIRU. Perforate 8662' - 8708', 1 SPF, 120 degree phasing
- 10/7/04 Frac w/ 2000 gal 15% HCL acid, 25000 gal Viking pad, 24000 # 20/40 Lite Prop, 46400 # 30/50 White Sand, 135800 # 20/40 White Sand.
- 10/8/04 Flowing back.
- 11/16/04 MIRU. Perforate 8182'-8229', 12 holes.
- 11/17/04 TIH w/ 266 jts 2 7/8" tubing, set RBP @ 8411', packer @ 8380'.  
Acidized perfs w/ 1500 gal 15% NEFE HCL.
- 11/19/04 Acid frac perfs 8182' - 8229' w/ 12000 gal 15% gel & X-L Acid + 45 tons CO2. Shut well in.
- 11/20/04 POOH w/ tubing, packer, & RBP.
- 11/21/04 RIH w/ 2 7/8" tubing set @ 8748'.
- 11/22/04 Run pump and rods. Leave well pumping @ 5:00 P.M.

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) <b>Stan Wagner</b>	Title <b>Regulatory Analyst</b>
	Date <b>12/07/04</b>

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

**PERCY**

**DIRECTIONAL REPORT**

WELLNAME: LOCO 13 FEDERAL #1  
 FIELD: BONE SPRING  
 AFE NO.: 102973

WELL ID NO.: 042522  
 API NO.: 3001533561

SURVEY TYPE: TSS-0 MD: ANGLE: 0.00 AZIMUTH: 0.00 TVD:  
 N/S: E/W: VS: TARGET:

MEASURED DEPTH	INCLINATION ANGLE	AZIMUTH ANGLE	TVD	+NORTH -SOUTH	+EAST -WEST	VERTICAL SECTION	DOGLEG SEVERITY
522	0.50	45.00	522	1.61	1.61	1.61	0.10
1,065	1.00	45.00	1,065	6.64	6.64	6.64	0.09
1,580	1.75	45.00	1,580	15.38	15.38	15.38	0.15
2,020	2.00	45.00	2,020	25.56	25.56	25.56	0.06
2,440	1.00	45.00	2,439	33.33	33.33	33.33	0.24
2,800	1.00	45.00	2,799	37.77	37.77	37.77	0.00
3,260	0.25	45.00	3,259	41.32	41.32	41.32	0.16
3,770	0.75	45.00	3,769	44.47	44.47	44.47	0.10
4,250	0.75	45.00	4,249	48.91	48.91	48.91	0.00
4,740	0.75	45.00	4,739	53.44	53.44	53.44	0.00
5,235	1.25	45.00	5,234	59.55	59.55	59.55	0.10
5,715	1.50	45.00	5,714	67.70	67.70	67.70	0.05
6,190	1.75	45.00	6,189	77.22	77.22	77.22	0.05
6,320	1.75	45.00	6,319	80.03	80.03	80.03	0.00
6,795	1.25	45.00	6,794	88.82	88.82	88.82	0.11
7,280	1.00	45.00	7,278	95.56	95.56	95.56	0.05
7,720	0.75	45.00	7,718	100.31	100.31	100.31	0.06
8,210	1.00	45.00	8,208	105.60	105.60	105.60	0.05
8,770	1.50	45.00	8,768	114.24	114.24	114.24	0.09
8,870	2.00	45.00	8,868	116.40	116.40	116.40	0.50