

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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

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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.

5. Lease Serial No.

NM 2346 (SHL); NM11400 (BHL)

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well

Oil Well  Gas Well  Other

FEB 28 2008

2. Name of Operator

EOG Resources Inc.

OCD-ARTESIA

8. Well Name and No.

Crusoe BKO Fed Com 2H

3a. Address

P.O. Box 2267 Midland, Texas 79702

3b. Phone No (include area code)

432 686 3689

9. API Well No.

30-015-35824

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1880' FNL & 660' FEL, U/L H  
Sec 24, T16S, R24E

10. Field and Pool, or Exploratory Area

Cottonwood Creek; WC, West

11. County or Parish, State

Eddy NM

CONFIDENTIAL

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

TYPE OF SUBMISSION

- Notice of Intent  
 Subsequent Report  
 Final Abandonment Notice

TYPE OF ACTION

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off                     |
| <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity                     |
| <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 recompleate 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 recompleation 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.)

1/02/08 TD at 8348" MD.

1/03/08 Cemented w/ 630 sx 50/50 POZ C, 11.8 ppg, 2.29 yield; 745 sx 50/50 POZ C, 14.2 ppg, 1.30 yield. Circulated 98 sx to surface. Set @ 8323'.

1/04/08 Released rig.

1/08/08 Tested casing to 1300 psi for 30 minutes. Test good.

Perforated 7620' - 8245', 0.42", 32 holes.

Frac w/ 142 bbls 15% HCL, 615 bbls XL gel, 80642 lbs 100 mesh sand, 73704 lbs 30/70 sand, 29495 lbs 20/40 sand, 6246 bbls load water.

Perforated 6780' - 7410', 0.42", 32 holes.

1/09/08 Frac w/ 142 bbls 15% HCL, 616 bbls XL gel, 78940 lbs 100 mesh sand, 75336 lbs 30/70 sand, 31340 lbs 20/40 sand, 6269 bbls load water.

Perforated 5940' - 6570', 0.42", 32 holes.

Frac w/ 142 bbls 15% HCL, 658 bbls XL gel, 86400 lbs 100 mesh sand, 78340 lbs 30/70 sand, 33504 lbs 20/40 sand, 6261 bbls load water.

Perforated 5100' - 5730', 0.42", 32 holes.

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Stan Wagner

Title

Regulatory Analyst

Signature

*Stan Wagner*

Date

1/14/08

ACCEPTED FOR RECORD

FEB 23 2008

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

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

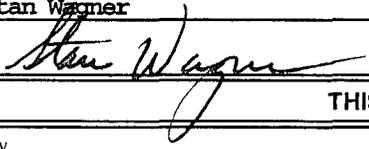
1 Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No <b>NM 2346 (SHL); NM11400 (BHL)</b>
2 Name of Operator <b>EOG Resources Inc.</b>		6. If Indian, Allottee or Tribe Name
3a Address <b>P.O. Box 2267 Midland, 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>1880' FNL &amp; 660' FEL, U/L H Sec 24, T16S, R24E</b>		8. Well Name and No. <b>Crusoe BKO Fed Com 2H</b>
		9. API Well No. <b>30-015-35824</b>
		10. Field and Pool, or Exploratory Area <b>Cottonwood Creek; WC, West</b>
		11. County or Parish, State <b>Eddy NM</b>

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1/09/08 Frac w/ 155 bbls 15% HCL, 743 bbls XL gel, 91145 lbs 100 mesh sand, 80279 lbs 30/70 sand, 34176 lbs 20/40 sand, 6590 bbls load water.  
Flow back.  
1/11/08 Turned to sales.

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) <b>Stan Wagner</b>	Title <b>Regulatory Analyst</b>
Signature 	Date <b>1/14/08</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	