Form 3160-5 (June 2015)

UNITED STATES Carisbad Field Office FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

DEL ARTHUE TO THE BUILDING		
BUREAU OF LAND MANAGEMENT	OCD II.k.	_
DDV NOTICES AND DEDODES ON M	WULL MODDS	ì

SUNDRY NOTICES AND REPORTS ON WELLS IN THE UNITS					Lease Serial No. NMNM15684 If Indian, Allottee or Tribe Name			
SUBMIT IN 1	TRIPLICATE - Other inst	ructions on page	2		7. If Unit or CA/Agree	ement, Name a	ınd/or No.	
Type of Well Gas Well □ Oth	ner				8. Well Name and No. STONEWALL 28	FED COM 31	13H	
2. Name of Operator EOG RESOURCES INCORPO 3a. Address	Contact: ORATEDE-Mail: emily_follis	EMILY FOLLIS @eogresources.com	HOB	35 00	9. API Well No. 30-025-44874-0	0-X1		
3a. Address PO BOX 2267 MIDLAND, TX 79702		3b. Phone No. (inclu Ph: 432-636-360	ט אטע	# L L L L	WC025G09S24	3336I-UP V		
4. Location of Well (Footage, Sec., T Sec 28 T24S R34E NENE 200 32.195240 N Lat, 103.468613	OFNL 693FEL		RE	CEIVE	County or Parish,	State NM		
12. CHECK THE AF	PPROPRIATE BOX(ES)	TO INDICATE N	ATURE O	F NOTICE,	REPORT, OR OTH	IER DATA		
TYPE OF SUBMISSION			TYPE OF	ACTION				
☐ Notice of Intent	☐ Acidize	□ Deepen		☐ Producti	on (Start/Resume)	☐ Water	Shut-Off	
_	☐ Alter Casing	☐ Hydraulic	Fracturing	☐ Reclama	tion	□ Well In	itegrity	
Subsequent Report	Casing Repair	□ New Cons	ruction	□ Recomp	lete	Other	Operations	
☐ Final Abandonment Notice	□ Change Plans	☐ Plug and A	.bandon	☐ Tempora	rily Abandon	Diffilling	perations	
	Convert to Injection	ction Plug Back Water Disposal						
If the proposal is to deepen directions Attach the Bond under which the wor following completion of the involved testing has been completed. Final Attach the steen completed. Final Attach the site is ready for final Boldermined that the site is r	rk will be performed or provide operations. If the operation respondence must be file in all inspection. 20,365' MD, 10,318' TVI, RDT-BTX (MJ @ 168' and C (3.37 yld, 10.5 ppg),Transition - Good Did not circ of the operation of the control of the	the Bond No. on file wants in a multiple competed only after all required only after all required on the second of 9,560') (Airlock ail w/ 2,090 sx Class	ith BLM/BIA letion or reco ments, includ @ 9,669') as H (1.19)	Required sub impletion in a n ing reclamation	sequent reports must be ew interval, a Form 316 , have been completed a	filed within 3 0-4 must be fi	0 days iled once	
14. I hereby certify that the foregoing is	Electronic Submission #4	176664 verified by the	ne BLM Wel	Information	System			
Con	nmitted to AFMSS for proce	RCES INCORPORA essing by PRISCILL	A PEREZ or	o the mobbs 1 08/05/2019 (19PP2761SE)			
Name (Printed/Typed) EMILY FC	DLLIS	Title	SR REG	BULATORY	ADMINISTRATOR			
Signature (Electronic S	Submission)	Date	08/05/20	019				
	THIS SPACE FO	R FEDERAL OF	STATE	OFFICE US	SE			
Approved By		Title	Acce	pted for	Record	AUG	0 6 2019	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conductive to the applicant to conductive	uitable title to those rights in the	not warrant or subject lease Offic	Ca	nathon Sh arisbad Fleic	•			
Title 18 U.S.C. Section 1001 and Title 43 States any false fictitious or fraudulent s				willfully to ma	ke to any department or	agency of the	United	

(Instructions on page 2)
** BLM REVISED **