UNITED STATES DEPARTMENT OF THE INTERIOR APPROVED BUREAU OF LAND MANAGEMENT APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 S. Lease Serial No.

SUNDRY	NOTICES AND REPO	RTS ON W		Hobb	NMNM122622	
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 page 85 1. Type of Well Oil Well Gas Well Other					6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on page 8					7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well Oil Well Gas Well Other Contact: EMILY FOLLIS EOG RESOURCES INCORPORATEDE-Mail: emily_follis@eogresources.com 3a. Address 3b. Phone No. (include area code)					8. Well Name and No. DOGWOOD 23 FED COM 707H	
2. Name of Operator Contact: EMILY FOLLIS					9. API Well No.	
EOG RESOURCES INCORPORATEDE-Mail: emily_follis@eogresources.com					30-025-44098-00-X1	
3a. Address	3b. Phone No. (include area code) Ph: 432.636.3600		10. Field and Pool or Exploratory Area RED HILLS-WOLFCAMP, WEST (GAS 11. County or Parish, State			
MIDLAND, TX 79702						
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					1	
Sec 23 T26S R33E SESW 19 32.022228 N Lat, 103.544052				LEA COUNTY, NM		
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE,	REPORT, OR OTH	ER DATA
TYPE OF SUBMISSION	TYPE OF ACTION					
□ Notice of Intent	☐ Acidize	☐ Dee	□ Deepen		ion (Start/Resume)	■ Water Shut-Off
-	☐ Alter Casing	☐ Hydraulic Fracturii		☐ Reclamation		■ Well Integrity
Subsequent Report	□ Casing Repair	Repair		☐ Recomplete		Other
☐ Final Abandonment Notice	☐ Change Plans	Plug	□ Plug and Abandon		arily Abandon	Drilling Operations
	Convert to Injection	Plug	☐ Plug Back		Pisposal	
Production Casing @ 22,620' Ran: 5-1/2", 23#, ICYP-110, T Ran: 5-1/2", 23#, ECP-110, V Cement w/1,045 sx Class H, surface, TOC @ 10,790' by C	am SFC (11,580' - 22,620 Fest casing to 5,000 psi fo)') or 15 min -GC	OD. Did not circ	cement to		
	Electronic Submission # For EOG RESOU nmitted to AFMSS for proc	JRCES INCOR	PORATED, sent t SCILLA PEREZ or	to the Hobbs n 09/27/2018	(18PP1975SE)	
Name(Printed/Typed) EMILY FOLLIS			Title SR REGULATORY ADMINISTRATOR			
Signature (Electronic	Date 09/26/2018					
	THIS SPACE FO					
Approved By		AC(EPIED FO	R RECO	RD	Date
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to conduct the conduction of th		on [T 0 3 2	2018	/s/ Jonat	hon Shepard	
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a statements or representations as	to any matter w	ithin its jurisdiction.			agency of the United
(Instructions on page 2) ** BLM REV	ISED ** BLM REVISEI	D ** BLM R	CARLNRAD FIELD	REVISE	** BLM REVISE	· ///