Form 3160-5 (June 2015)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 201

	Expires: January 3	
Lease	Serial No.	

SUNDRY Do not use the	NMNM122619						
abandoned we	II. Use form 3160-3 (AP	D) for such pi	oposals.		6. If Indian, Allottee o	r Tribe Name	
SUBMIT IN	TRIPLICATE - Other ins	tructions on p	page 2	Q <sub>D</sub>	7. If Unit or CA/Agree	ement, Name and/or No.	
SUBMIT IN TRIPLICATE - Other instructions on page 2  1. Type of Well  Soil Well Gas Well Other  Contact: STAR   HARREI   1 1019					8. Well Name and No. DAUNTLESS 7 FED 726H		
2. Name of Operator EOG RESOURCES INCORP	Contact:	ell@eogresource	s.mg/g	-	9. API Well No. 30-025-45595-0	0-X1	
3a. Address	<del></del>	2h Dhana Na	(include once com	VED	10. Field and Pool or I	Exploratory Area	
PO BOX 2267 MIDLAND, TX 79702		Ph: 432-848	FORECE.		RED HILLS		
4. Location of Well (Footage, Sec., 7	., R., M., or Survey Description		- · · · ·		11. County or Parish,	State	
Sec 7 T25S R33E SWSE 250FSL 1681FEL 32.138546 N Lat, 103.608269 W Lon					LEA COUNTY, NM		
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICAT	E NATURE O	F NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION			TYPE O	F ACTION			
Notice of Intent	☐ Acidize	□ Deep	en	☐ Producti	on (Start/Resume)	☐ Water Shut-Off	
_	☐ Alter Casing	☐ Hydr	aulic Fracturing	□ Reclama	ation	■ Well Integrity	
☐ Subsequent Report	☐ Casing Repair	□ New	Construction	□ Recomp	lete	Other Change to Original A	
☐ Final Abandonment Notice ☐ Change Plans		□ Plug and Abandon		□ Temporarily Abandon		PD	
13. Describe Proposed or Completed Op				☐ Water D	-		
If the proposal is to deepen direction. Attach the Bond under which the wo following completion of the involved testing has been completed. Final Al determined that the site is ready for f EOG respectfully requests an	rk will be performed or provide toperations. If the operation re- bandonment Notices must be fil inal inspection.  amendment to our appro-	the Bond No. on sults in a multiple led only after all n	file with BLM/BIA completion or reco equirements, include	Required sub empletion in a re- ling reclamation	esequent reports must be new interval, a Form 316 n, have been completed a	filed within 30 days 0-4 must be filed once	
The new well number should I	be changed to 726.						
Attached please find the follow	ving supporting documen	tation: Amendo	ed C-102 Plat.				
		Carls	bad Fie	id (A	fic p		
					#,# <u>,#,</u> **		
		<b>.</b>	CD F	L. C.			
14. I hereby certify that the foregoing is	s true and correct.				_		
Con	# Electronic Submission For EOG RESOU nmitted to AFMSS for proc	JRCES INCORP	'ORATED, sent'	to the Hobbs			
Name (Printed/Typed) STAR L H	Title SR REGULATORY SPECIALIST						
Signature (Electronic S	Submission)		Date 03/08/2	019			
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE US	SE .		
_Approved By_JEROMY PORTER	. – – – – –	ļ	TitlePETROLE	UM ENGINE	ER	Date 03/18/2019	
Conditions of approval, if any, are attache certify that the applicant holds legal or equ							
which would entitle the applicant to condi		,	Office Hobbs				

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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



District 1
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Sante Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

UL or lot no.

2 Dedicated Acres

640.00

Township

25-S

Section

Joint or Infill

6

State of New Mexico
Energy, Minerals & Natural Resources
Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Sante Fe, NM 87505

FORM C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

**LEA** 

East/West line

EAST

## WELL LOCATION AND ACREAGE DEDICATION PLAT

	<sup>1</sup> API Number <sup>2</sup> Pool Code				<sup>3</sup> Pool Name					
30-	025-455	95		98180		WC-025 G-09 S253309P; Upper Wolfcamp				
Property 0	1		Property Name DAUNTLESS 7 FED						<sup>6</sup> Well Number #726H	
	70GRID No.  80perator Name  EOG RESOURCES, INC.					1	Elevation 3484'			
					<sup>10</sup> Surface Loc	cation				
UL or lot no.	Section	Township	Range	Lot ldn	Feet from the	North/South line	Feet from the	East/West line	Count	
0	7	25-S	33-E	-	250'	SOUTH	1681'	EAST	LEA	

North/South line

NORTH

Feet from the

1980'

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by

Feet from the

100'

Lot Idn

Order No.

Range

33-E

Consolidation Code

