| Submit 3 Copies To Appropriate District Office State of New Me Office HOF Formy Minerals and Nature | |
|--|---|
| Office District 1 1625 N. French Dr., Hobbs, NM 87240 | WELL API NO. |
| District II 1301 W. Grand Ave., Artesia, NM 88210 OCT QUL CONSERVATION District III | N DIVISION 30-025-32915 |
| | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM RECEIVED Santa Fe, NM 87 | |
| 1220 S. St. Francis Dr., Santa Fe. NM 87505 | 6. State Oil & Gas Lease No. |
| SUNDRY NOTICES AND REPORTS ON WEL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN O DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-10) | DR PLUG BACK TO A 1) FOR SUCH |
| PROPOSALS.) 1. Type of Well: | East Corbin Delaware Unit |
| Oil Well Gas Well Other Injection Well | 8. Well Number |
| 2. Name of Operator EOG Resources, Inc. | 9. OGRID Number 7377 |
| 3. Address of Operator | 10. Pool name or Wildcat |
| P.O. Box 2267 Midland, TX 79702 | Corbin: Delaware, West |
| 4. Well Location | |
| Unit Letter H: 1340 feet from the Nor | th line and 990 feet from the East line |
| Section 21 Township 18S | Range 33E NMPM County Lea |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data | |
| NOTICE OF INTENTION TO: | SUBSEQUENT DEDORT OF |
| <u></u> | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK X PLUG AND ABANDON | REMEDIAL WORK ALTERING CASING |
| TEMPORARILY ABANDON | COMMENCE DRILLING OPNS. P AND A |
| PULL OR ALTER CASING | |
| DOWNHOLE COMMINGLE | |
| | V |
| OTHER: | OTHER: Repaired tubing leak. |
| 13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. | |
| 9/23/13 MIRU to repair tubing leak. Unset packer and POOH w/ 2-3/8" IPC injection tubing and | |
| nickel plated packer. 9/24/13 Tested tubing and replaced 2 joints. Redressed packer. Ran back in hole w/ 2-3/8" IPC | |
| injection tubing and nickel plated packer. Packer set at 5113'. Circulate packer fluid. | |
| 9/26/13 Ran MIT test to 500 psi for 30 minutes. Test good. Witnessed by OCD. Returned to injection. | |
| * FEDERAL WELL* | |
| | |
| Spud Date: Rig Release | Ge Date: |
| I hereby certify that the information above is true and complete to the | best of my knowledge and belief. |
| SIGNATURE Stan Way TITI | E Regulatory Analyst DATE 9/30/13 |
| Type or print name <u>Stan Wagner</u> E-ma | ail address:PHONE 432-686-3689 |
| For State Use Only | |
| APPROVED BY DATE DET MAL DATE DATE DATE DATE DATE DATE DATE DATE | |
| Conditions of Approval (if any): | OCT 07 2013 |
| | |

