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

| NMOCD |
|-------|
| Hobbs |

FORM APPROVED

|   | OMB NO. 1004-0135      |
|---|------------------------|
|   | Expires: July 31, 2010 |
| _ |                        |

|       | Expires: July 31, 20 |     |  |  |  |
|-------|----------------------|-----|--|--|--|
| Lease | Serial               | No. |  |  |  |

| SUNDRY NOTICES AND REPORT Do not use this form for proposals to abandoned well. Use form 3160-3 (API | Lease Serial No.     NMNM02965A     If Indian, Allottee or Tribe Name |  |  |
|--|---|--|--|
| SUBMIT IN TRIPLICATE - Other instruc   | tions on reverse side.  | 7. If Unit or CA/Agreement, Name and/or No.              |  |
| . Type of Well Gas Well Other  | HOBBS OC  | 8. Well Name and No.<br>RATTLESNAKE 21 FED COM 701H      |  |
| Name of Operator Contact: EOG RESOURCES INCORPORATEDE-Mail: stan_wagne                               |   | 9. API Well No.<br>30-025-42827-00-X1                    |  |
| a. Address  MIDLAND, TX 79702  | 3b. Phone No. (include area code) Ph: 432-686-3689 RECEIVED           | 0. Field and Pool, or Exploratory<br>WC-025 G09 S263327G |  |
| Location of Well (Footage, Sec., T., R., M., or Survey Description)                                  |   | 11. County or Parish, and State                          |  |
| Sec 21 T268 R33E SESE 230FSL 900FEL  |   | LEA COUNTY, NM   |  |

| 1 | 12. CHECK APPROPRI | IATE BOX(ES) TO | INDICATE NATURE OF | NOTICE, REPORT, | OR OTHER DATA |
|---|--------------------|-----------------|--------------------|-----------------|---------------|
|   |                    |                 |                    |                 |               |

| TYPE OF SUBMISSION         |                        | TYPE C             | OF ACTION                   |                     |
|----------------------------|------------------------|--------------------|-----------------------------|---------------------|
| □ Notice of Intent         | ☐ Acidize              | ☐ Deepen           | ☐ Production (Start/Resume) | ☐ Water Shut-Off    |
|                            | ☐ Alter Casing         | ☐ Fracture Treat   | □ Reclamation               | ☐ Well Integrity    |
| Subsequent Report          | ☐ Casing Repair.       | ■ New Construction | ☐ Recomplete                | ☑ Other             |
| ☐ Final Abandonment Notice | ☐ Change Plans         | ☐ Plug and Abandon | □ Temporarily Abandon       | Drilling Operations |
|                            | ☐ Convert to Injection | ☐ Plug Back        | □ 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 recomplete 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 recompletion 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 site is ready for final inspection.)

1/11/16 Ran 240 jts 7-5/8", 29.7#, HCP110 LTC casing set at 10935'.

1/12/16 Cement lead w/ 900 sx D195 cement, 9.03 ppg, 2.86 CFS yield; middle w/ 350 sx TXI cement, 11.0 ppg, 2.71 CFS yield; tail w/ 275 sx Class H, 15.6 ppg, 1.21 CFS yield. Circulated 300 bbls cement to surface. WOC 21 hrs.

1/13/16 Tested casing to 2000 psi for 30 minutes. Test good. Resumed drilling 6-3/4" hole.

| 14. I hereby certify that th  | te foregoing is true and correct.  Electronic Submission #328492 verifie  For EOG RESOURCES INCOR  Committed to AFMSS for processing by DEBO | PORAT | TED, sent to the Hobbs                          |
|---|--|-------|---|
| Name (Printed/Typed)  | STAN WAGNER  | Title | REGULATORY ANALYST                              |
| Signature   | (Electronic Submission)  | Date  | 01/14/2016 EPTED FOR RECORD                     |
|   | THIS SPACE FOR FEDERA  | L OR  | STATE OFFICE USE                                |
| Approved By   |  | Title | JAN 2/0 2016 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. |  |       | OUREAU OF LAND MANAGEMENT CARLSBAD VIFLD OFFICE |

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.

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED