Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

| SUNDRY NOTICES AND REPORTS ON WELLSHOP Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals. | | | NMNM10897 6. If Indian, Allotte | NMNM108977 6. If Indian, Allottee or Tribe Name | |
|--|--|--|---|--|--|
| | ons on page 2 | 7 2015 7. If Unit or CA/A | greement, Name and/or No. | | |
| Type of Well | RECE | 8. Well Name and I | | | |
| ☑ Oil Well ☐ Gas Well ☐ Ott | -CE | DELLA 29 FEE | 701H | | |
| Name of Operator EOG RESOURCES, INC. | WAGNER gresources.com | 9. API Well No. 30-025-4305 | 3 | | |
| 3a. Address P.O. BOX 2267 MIDLAND, TX 79702 | Phone No. (include area co 432-686-3689 | | Field and Pool or Exploratory Area WILDCAT WOLFCAMP OIL | | |
| 4. Location of Well (Footage, Sec., 7 | | 11. County or Paris | sh, State | | |
| Sec 29 T20S R34E SESE 250 | | LEA COUNT | LEA COUNTY, NM | | |
| 12. CHECK THE AI | PPROPRIATE BOX(ES) TO IN | NDICATE NATURE | OF NOTICE, REPORT, OR O | THER DATA | |
| TYPE OF SUBMISSION | | TYPE | OF ACTION | | |
| Notice of Intent | ☐ Acidize | ☐ Deepen | ☐ Production (Start/Resume) | ☐ Water Shut-Off | |
| _ | ☐ Alter Casing | ☐ Hydraulic Fracturin | g Reclamation | ☐ Well Integrity | |
| ☐ Subsequent Report | ☐ Casing Repair | ■ New Construction | ☐ Recomplete | ⊘ Other | |
| ☐ Final Abandonment Notice | ☐ Change Plans | ☐ Plug and Abandon | ☐ Temporarily Abandon | Change to Original A PD | |
| | ☐ Convert to Injection | ☐ Plug Back | ■ Water Disposal | | |
| determined that the site is ready for fi EOG Resources requests a ch attached plat. | pandonment Notices must be filed only inal inspection. The name to the interim reclamation interim reclamation to be on the | n for this well site as r | eflected on the | d and the operator has | |
| No Surface | rner, we would like to reclaim th | e West and South sid | | - 1027-EA | |
| 14. I hereby certify that the foregoing is | Electronic Submission #369994 | verified by the BLM V RCES, INC., sent to the | | | |
| Name (Printed/Typed) STAN WA | Title REGI | JLATORY ANALYST | | | |
| Signature (Electronic S | Data 02/45 | /2047 | | | |
| Signature (Electronic S | THIS SPACE FOR FE | Date 03/15 | | | |
| m | | day. | HELD MANAGER | Co Apr Zor7 | |
| Approved By | Title | | Date | | |
| Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduction. | | SBAD FIELD OFFICE | | | |
| Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s | | | | or agency of the United | |

EXHIBIT 2C RECLAMATION AND FACILITY DIAGRAM - PRODUCTION FACILITIES DIAGRAM

