

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***Carlsbad Field Office**  
**L & E Hobbs**5. Lease Serial No.  
NMNM108500

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
NMNM104037X8. Well Name and No.  
RED HILLS NORTH UNIT 706H9. API Well No.  
30-025-3281410. Field and Pool or Exploratory Area  
RED HILLS11. County or Parish, State  
LEA COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator  
EOG RESOURCES INCContact: KAY MADDOX  
E-Mail: Kay\_Maddox@EOGRESOURCES.COM3a. Address  
PO BOX 2267  
MIDLAND, TX 797023b. Phone No. (include area code)  
Ph: 432-686-3658

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 7 T25S R34E NESE 1830FSL 660FEL

**HOBBS OCD**  
**JUL 24 2017**

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> 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 recompleat 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

EOG Resources performed a 24 hr injection test, 6/4/2017  
24 hr injection volume 26 bbls  
Average injection pressure of 3225 psi

06/12/2017 BLM approved TA Procedure  
06/23/2017 RIH pmp 60 sxs cmt @ 11713  
06/24/2017 Tag TOC @ 11,464  
06/25/2017 Ran MIT test - passed, copy attached.

EOG requests TA approval. This well will either be returned to injection or plugged in one year. NOI will be submitted by 6/12/2018

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #380305 verified by the BLM Well Information System  
For EOG RESOURCES INC, sent to the Hobbs  
Committed to AFMSS for processing by DEBORAH MCKINNEY on 06/30/2017 ()

Name (Printed/Typed) KAY MADDOX

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 06/29/2017

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE****ACCEPTED FOR RECORD**

Approved By

*Mustafa Hogue*

Title

**PETROLEUM ENGINEER**

Date 7-18-2017

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.

Office

**CEP**  
**BUREAU OF LAND MANAGEMENT**  
**CARLSBAD FIELD 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.

(Instructions on page 2)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\****Ke*

**Additional data for EC transaction #380305 that would not fit on the form**

**32. Additional remarks, continued**

Justification of TA Status: It is believed that the injection wells in the Red Hills North Unit are no longer enhancing oil production from the producers. If the WIW's are TA'd and the production is monitored in the producing wells, it can be determined if this is true. If it is, the injection wells will be plugged.

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <b>EOG</b>	API Number <b>#30-025-32814</b>
Property Name <b>Red Hills North Unit 206 Well</b>	Well No. <b>206</b>

2 Surface Location

UL - Lot <b>UNIT</b>	Section <b>7</b>	Township	Range	Feet from <b>1830'</b>	NE/SE Line <b>FSL</b>	Feet from <b>660'</b>	E/W Line <b>FEL</b>	County <b>LEA</b>
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Well Status

TA'D WELL. <input checked="" type="radio"/> YES <input type="radio"/> NO	SHUT-IN <input checked="" type="radio"/> YES <input type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ <input type="radio"/> SWD	PRODUCER <input type="radio"/> OIL <input type="radio"/> GAS	DATE <b>6-23-17</b>
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OBSERVED DATA

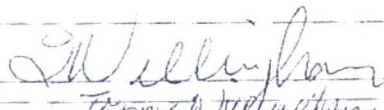
	(A) Surface	(B) Intern(1)	(C) Intern(2)	(D) Prod Csg	(E) Tubing
Pressure	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>NA</b>
Flow Characteristics					
Puff	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	CO2 <input type="checkbox"/>
Steady Flow	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	WTR <input type="checkbox"/>
Surges	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	GAS <input type="checkbox"/>
Down to nothing	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Type of Fluid
Gas or Oil	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Injected by
Water	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Water Used If applicable

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

**ALL Pressure were Opsi on well.**

**Plug set @ 11464'-11716'**

**Csg Test good!**

Signature: 	OIL CONSERVATION DIVISION
Printed name: <b>Terry Williams</b>	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date:	Phone: <b>325-245-6592</b>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

Isolated  
PUMP  
START 510 PSI

RED HILLS NORTH UNIT  
#706 WIN

UNIT-1 SEC. 7-T255 R34E

1830' FSL + 660' FEL

LEA COUNTY NEW MEXICO

API- #30-025-32814

LSE- #NM19695-

Permit #R-11389-A

FINISH 505 PSI

Willoughby EOG