

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Operator

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

SCANNED

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*HOBBS  
AUG 15 2017  
RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. THOR 21 FED COM 708H
2. Name of Operator EOG RESOURCES, INC. <input checked="" type="checkbox"/> Contact: STAN WAGNER E-Mail: stan_wagner@eogresources.com		9. API Well No. 30-025-43091
3a. Address ATTN: STAN WAGNER P.O. BOX 2267 MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-686-3689	10. Field and Pool or Exploratory Area WC-025 S263327G UPPER WC
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 21 T26S R33E Mer NMP SWSE 370FSL 1669FEL <input checked="" type="checkbox"/>		11. County or Parish, State LEA COUNTY, NM

## 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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.

4/18/17 Spud 14-3/4" hole.  
4/19/17 Ran 10-3/4", 40.5#, J55 STC casing set at 1013'.  
Cement lead w/ 550 sx Class C, 13.5 ppg, 1.76 CFS yield;  
tail w/ 250 sx Class C, 14.8 ppg, 1.36 CFS yield.  
Circulated 81 bbls cement to surface.  
Released surface rig.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #374578 verified by the BLM Well Information System For EOG RESOURCES, INC., sent to the Hobbs Committed to AFMSS for processing by DEBORAH MCKINNEY on 05/04/2017 (I)	
Name (Printed/Typed) STAN WAGNER	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 05/02/2017
THIS SPACE FOR FEDERAL OR STATE OFFICE USE JUN 30 2017	
Approved By _____	Title _____
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 _____
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 \*\*