Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

NMOCD Hobbs

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

5. Lease Serial No. NMNM02965A

Do not use thi	6. If Indian, Allottee	or Tribe Name			
abandoned we					
SUBMIT IN TRIPLICATE - Other instructions on page 2				eement, Name and/or No.	
1. Type of Well MAY 0 0			8. Well Name and No. BARLOW 34 FEL		
Oil Well ☐ Gas Well ☐ Oth 2. Name of Operator					
EOG RESOURCES, INC.	E-Mail: stan_wagner@	eogresources.com RE	30-025-44181		
3a. Address ATTN: STAN WAGNER P.O. MIDLAND, TX 79702	Field and Pool or SANDERS TAN	30-025-44181 D Field and Pool or Exploratory Area SANDERS TANK; UPPER WC			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			11. County or Parish,	11. County or Parish, State	
Sec 34 T26S R33E Mer NMP	LEA COUNTY,	NM			
12. CHECK THE AF	PPROPRIATE BOX(ES) TO	INDICATE NATURE OF	F NOTICE, REPORT, OR OTI	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION				
□ Notice of Intent	☐ Acidize	□ Deepen	☐ Production (Start/Resume)	■ Water Shut-Off	
	☐ Alter Casing	☐ Hydraulic Fracturing	☐ Reclamation	■ Well Integrity	
Subsequent Report ■ Subsequent Report ■ ■ Subsequent Report ■	☐ Casing Repair	■ New Construction	☐ Recomplete	☑ Other Drilling Operations	
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon	☐ Temporarily Abandon	Diffing Operations	
	☐ Convert to Injection	☐ Plug Back	☐ Water Disposal	`	
following completion of the involved	poperations. If the operation results and onment Notices must be filed or inal inspection. E Bear (0'-11239') M SFC (11239'-17036')	in a multiple completion or reco	Required subsequent reports must be mpletion in a new interval, a Form 316 ing reclamation, have been completed a	60-4 must be filed once	
14. I hereby certify that the foregoing is	Electronic Submission #4121	25 verified by the BLM Well DURCES, INC., sent to the	Information System		
	Committed to AFMSS for prod				
Name (Printed/Typed) STAN WA	GNER	Title REGUL	ATORY SPECIALIST	X / / /	
Signature (Electronic S	Submission)	Date 04/18/20	018		
	THIS SPACE FOR I	FEDERAL OR STATE (OFFICE WSETED FOR R	ECOKIA	
			TOOL!!!		
Approved By	Title		Dete		
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu		Al al a difference of the second of the seco			
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s			willfully in Hake to Ony Idepartment of CARLSBAD FITTO OF		
(Instructions on page 2) ** OPERAT	OR-SUBMITTED ** OPER	RATOR-SUBMITTED **	OPERATOR-SUBMITTED	**	