Form 3160-5 (June 2015)

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

Carlsbad	Fiel	a Y	DARKAC 1004-0137 Expires: January 31, 2018

OCD Harrisgial No.

	is form for proposals to			A	6. If Indian, Allottee of	r Tribe Name	
				SOCE	7 If Unit or CA/Agree	ement, Name and/or No.	
	TRIPLICATE - Other inst	ructions on <sub>l</sub>	page 2 ΔUG. 9:	2010	7. If ollit of crorigion	ment, Name and Or No.	
1. Type of Well Gas Well Other					8. Well Name and No. NAUTILUS 16 FED COM 701H		
2. Name of Operator EOG RESOURCES INCORPO	Contact: ORATEDE-Mail: emily_follis	EMILY FOLLI @eogresource:	S RECE	IVED	9. API Well No. 30-025-44170-0	0-X1	
3a. Address PO BOX 2267 MIDLAND, TX 79702  3b. Phone No Ph: 432-63			(include area code) 3-3600	10. Field and Pool or Exploratory Area RED HILLS-WOLFCAMP, WEST (GA			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State		
Sec 16 T26S R34E SESE 280FSL 865FEL 32.036961 N Lat, 103.469086 W Lon					LEA COUNTY, NM:		
12. CHECK THE AF	PPROPRIATE BOX(ES)	TO INDICAT	TE NATURE O	F NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION							
Notice of Intent	☐ Acidize	☐ Deep	en	☐ Product	ion (Start/Resume)	☐ Water Shut-Off	
<del></del>	☐ Alter Casing	☐ Hydī	aulic Fracturing	Reclam	ation	■ Well Integrity	
☐ Subsequent Report	□ Casing Repair	□ New	Construction	☐ Recomplete		Other	
☐ Final Abandonment Notice	□ Change Plans	Plug	and Abandon	☐ Tempor	arily Abandon	Change to Original A PD	
	☐ Convert to Injection	Plug	Back				
following completion of the involved testing has been completed. Final Ab determined that the site is ready for final EOG Resources respectfully ENDING  APPROVED FOR ENDING  14. I hereby certify that the foregoing is	request a 2 year extension	d only after all r	equirements, includ	ing reclamatio	new interval, a Form 316 n, have been completed a	0-4 must be filed once nd the operator has	
Electronic Submission #456565 verified by the BLM Well Information System For EOG RESOURCES INCORPORATED, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 03/04/2019 (19PP1188SE)  Name (Printed/Typed) EMILY FOLLIS  Title SR REGULATORY ADMINISTRATOR						<del> </del>	
Signature (Electronic S	Submission)		Date 03/04/2	019			
	THIS SPACE FO	R FEDERA	L OR STATE	OFFICE U	SE	<del></del>	
10.000			7'4 5555			D-1- 07/05/00	
Approved By DYLAN RQSSMANGQ  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 Hobbs	UM ENGIN	EEK	Date 07/05/2019	

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

