Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERPOSE SHOPE STATES ON THE INTERPOSE STATES

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

SUNDRY NOTICES AND REPORTS ON (1965) Hobbs

abandoned wel	is form for proposals to dri II. Use form 3160-3 (APD) i	for such proposals.		f Indian, Allottee or Tr	ibe Name		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals. SUBMIT IN TRIPLICATE - Other instructions on page 38 1. Type of Well Oil Well □ Gas Well □ Other 2. Name of Operator Contact: KRISTINA AGEE EOG RESOURCES INCORPORATEDE-Mail: kristina_agee@eogresources.com 3a. Address 3b. Phone No. (include area code)				7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well Gas Well Oth	AUG 2	NED 8. W	8. Well Name and No. PEACHTREE 24 FED COM 704H				
Name of Operator EOG RESOURCES INCORPO	ISTINA AGEE Deogresources.com	9. A	9. API Well No. 30-025-44834-00-S1				
3a. Address PO BOX 2267 MIDLAND, TX 79702 3b. Phone Ph: 432-		b. Phone No. (include area code) h: 432-686-6996	F	10. Field and Pool or Exploratory Area RED HILLS-BONE SPRING, NORTH RED TANK			
4. Location of Well (Footage, Sec., T.		11.	11. County or Parish, State				
Sec 24 T26S R33E SWSE 19 32.022185 N Lat, 103.523244		LEA COUNTY, NM					
12. CHECK THE AF	PPROPRIATE BOX(ES) TO	INDICATE NATURE O	F NOTICE, REP	ORT, OR OTHER	R DATA		
TYPE OF SUBMISSION TYPE OF ACTION							
☐ Notice of Intent	☐ Acidize	□ Deepen	☐ Production (S	Start/Resume)	Water Shut-	Off	
_	☐ Alter Casing	☐ Hydraulic Fracturing	□ Reclamation		■ Well Integrity		
Subsequent Report	□ Casing Repair	■ New Construction	☐ Recomplete		Other Workover Operations		
☐ Final Abandonment Notice	□ Change Plans	□ Plug and Abandon	□ Temporarily	Abandon \	Workover Ope	rations	
	Convert to Injection	□ Plug Back	■ Water Disposal		•		
7/20/2019 RAN L-80 2 7/8" TE	BG AND GAS LIFT VALVES,	, SET TBG @ 12,117' PUT	WELL BACK OI	N PRODUCTION.			
14. I hereby certify that the foregoing is	Electronic Submission #474	ES INCORPORATED, sent t	o the Hobbs				
Name (Printed/Typed) KRISTINA	Title SR. REC	Title SR. REGULATORY ADMINISTRATOR					
Signature (Electronic S		Date 07/22/20					
	THIS SPACE FOR	FEDERAL OR STATE (JFFICE USE				
Approved By		pted for R		JUL 3 (2019		
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu	warrant or oject lease Office	nathon Sheparisbad Field Off					
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s			willfully to make to	any department or age	ncy of the United	1	

(Instructions on page 2)
** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

