Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR

OCD Artesia

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

lo. 434

BUREAU OF LAND MANAGEMENT	Expires. January 51, 201			
SUNDRY NOTICES AND REPORTS ON WELLS	5. Lease Serial No. NMNM054434			
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.	6. If Indian, Allottee or Tribe Name			

abandoned wei	i. Use lulili 3100-3 (AFI	o) for such pr	opusais.				
SUBMIT IN TRIPLICATE - Other instructions on page 2				7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well ☑ Oil Well ☐ Gas Well ☐ Other					8. Well Name and No. FEDERAL BQ 2		
Name of Operator Contact: ASHLEY BRAVO EOG Y RESOURCES INC E-Mail: ashley_bravo@eogresources.com				9. API Well No. 30-015-20470-00-S1			
3a. Address 104 S 4TH STREET ARTESIA, NM 88210	14 S 4TH STREET Ph: 575-748-4344				10. Field and Pool or Exploratory Area EAGLE CREEK		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State			
Sec 27 T17S R25E NWNW 990FNL 990FWL				EDDY COUNTY, NM			
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICAT	E NATURE OI	F NOTICE,	REPORT, OR OT	HER DATA	
TYPE OF SUBMISSION		TYPE OF ACTION					
□ Notice of Intent	☐ Acidize ☐ Deepen		Production (Start/Resume)		■ Water Shut-Off		
_	☐ Alter Casing	🗖 Hydra	ulic Fracturing	🛮 🛭 Reclam	ation	■ Well Integrity	
Subsequent Report	Casing Repair	□ New	Construction	☐ Recomplete		Other	
☐ Final Abandonment Notice	□ Change Plans	Plug	and Abandon	☐ Temporarily Abandon			
	☐ Convert to Injection	🗖 Plug	Back	☐ Water I	Disposal		
testing has been completed. Final Aldetermined that the site is ready for final Reclamation work has been compiler until BLM objectives has potential for successful revegence.	inal inspection. ompleted, seeding will be lave been met. A Final Atetation is established.	done spring/s pandonment N	ummer 2019. E btice will be sub	OG will con mitted whe	tinue to n the		
14. I hereby certify that the foregoing is		457007	, Als a DI 14 10 - I		0 1		
Con Name (Printed/Typed) ASHLEY	nmitted to AFMSS for proc	RESOURCES N	IC, sent to the C CILLA PEREZ or	arlsbad n 03/07/2019	n System DISTRI((19 PP1294SE) DNMENTAL ASST	CT II-ARTESIA O.C.E	
Name (17 meu/19peu) ASTILLT	·		THE SAILT	CLIVII	- NIVIENTAL ASST		
Signature (Electronic Submission) Date 03/07/2019							
	THIS SPACE FO	OR FEDERAL	OR STATE	OFFICE U	SE		
Approved By	a la lim	D	Title C	CT		4-11-19 Date	
Conditions of approval, it any, are attache certify that the applicant holds legal or equivalent to condi- which would entitle the applicant to condi-	uitable title to those rights in the		Office CF	, 			

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.