Form 3160-5 (June 2015)

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

OCD Artesia

FORM APPROVED OMB NO. 1004-0137

7. If Unit or CA/Agreement, Name and/or No.

OMD	INO.	100	<del>1</del> -U	IJ
Expires:	Janu	ıary	31,	20
ease Serial No.				

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.	

6. If Indian, Allottee or Tribe Name

NMNM26864

SUBMIT IN TRIPLICATE - Other instructions on page 2		/. If Unit or CA/Agr	/. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well			8. Well Name and No. RODEN GD FED 6		
☑ Oil Well ☐ Gas Well ☐ Other					
2. Name of Operator Contact: ASHLEY BRAVO EOG Y RESOURCES INC E-Mail: ashley_bravo@eogresources.com			9. API Well No. 30-015-26337-00-S1		
3a. Address 104 S 4TH STREET ARTESIA, NM 88210		Phone No. (include area code) 575-748-4344	10. Field and Pool of N DAGGER D	r Exploratory Area RAW	
4. Location of Well (Footage, Sec., T.	., R., M., or Survey Description)		11. County or Parish	, State	
Sec 35 T19S R24E SENE 198	BOFNL 660FEL		EDDY COUNT	ΓY, NM	
12. CHECK THE AF	PPROPRIATE BOX(ES) TO I	NDICATE NATURE OI	F NOTICE, REPORT, OR OT	THER DATA	
TYPE OF SUBMISSION		TYPE OF	ACTION		
	☐ Acidize	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off	
☐ Notice of Intent	☐ Alter Casing	☐ Hydraulic Fracturing	■ Reclamation	☐ Well Integrity	
Subsequent Report Subsequent Re	☐ Casing Repair	☐ New Construction	Recomplete	Other	
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon	☐ Temporarily Abandon	_	
_	☐ Convert to Injection	☐ Plug Back	☐ Water Disposal	•	
potential for successful revege	nave been met. A Final Abando etation is established. G Accep	and for record NMOC	AP	R 2 5 2019	
14. I hereby certify that the foregoing is	true and correct.				
	Electronic Submission #46063 For EOG Y RESO	URCES NC, sent to the C	arlsbad		
	nmitted to AFMSS for processing	· ·	,		
Name (Printed/Typed) ASHLEY	BRAVO	Title SAFET	/ & ENVIRONMENTAL ASST		
Signature (Electronic S		Date 04/08/20			
Accepted for Reco	, _ & THIS SPACE FOR F	EDERAL OR STATE (	OFFICE USE		
Approved By	mm G. Com	Title	KT	4-8-19 Date	
Conditions of approval, if any are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the applicant the	itable title to those rights in the subje	arrant or ct lease Office	0	·	
Title 18 U.S.C Section 1001 and Title 43 States any false, fictitious or fraudulent s			willfully to make to any department	or agency of the United	
(Instructions on page 2)	<u></u> *	-			