

Form 3160-5
(August 1999)
(1 original, 5 copies)

N.M. Oil Co.
811 S. 1st Street
Artesia, NM 88210-2834

FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
EOG Resources, Inc.

3b. Phone No. (include area code)
(915)686-3714

3a. Address
P.O. Box 2267, Midland, TX 79702

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FWL & 760' FSL (Unit M)
Sec 13, T26S, R30E

5 Lease Serial No.
NM94610

6 If Indian, Allottee or Tribe Name

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

8 Well Name and No.
El Paso "13" Federal #1

9 API Well No.
30-015-31352

10 Field and Pool, or Exploratory
Ross Draw (Wolfcamp)

11 County or Parish, State
Eddy, NM

INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

☐ Acidize
☐ Alter Casing
☐ Casing Repair
☐ Change Plans
☐ Convert to Injection

☐ Deepen
☐ Fracture Treat
☐ New Construction
☐ Plug and Abandon
☐ Plug Back

☐ Production (Start/Resume)
☐ Reclamation
☐ Recomplete
☐ Temporarily Abandon
☐ Water Disposal

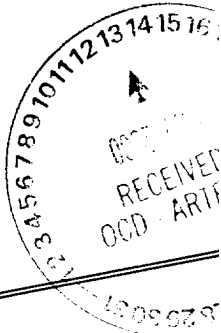
☐ Water Shut-Off
☐ Well Integrity
☒ Other
5-1/2" csg

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompletable horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zone. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletable in a new interval, a Form 3160-4 shall be filed on testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

10/31/00 Ran 274 jts 5-1/2" csg, 17#, P110, LT&C to 12,183'. Cemented as follows: 1st slurry, 950 sx Premium, 3% Econolite, 5#/sx salt, .2% HR7, weight 11.5#/gal, 2.9 cu ft/sx, 490 bbls. 2nd slurry, 250 sx Premium, 50/50 POZ, 2% CCL, 5% Halad 322, .2% HR7, weight 14.2#/gal, 1.25 cu ft/sx, 58 bbls. TOC 3515'.

ACCEPTED FOR RECORD

NOV 8 2000



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)
Mike Francis

Signature

FEDERAL OR STATE OFFICE USE

Approved by
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 thereon.

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 States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Title
Date

Title
Office
Date

0157

N.M. Oil Con Division
811 S. 1st Street
Artesia, NM 88210-2834

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SUBMIT IN TRIPLICATE - Other instructions on reverse side

FORM APPROVED

OMB NO. 1004-0135

Expires: November 30, 2000

5	Lease Serial No. NM94610
6	If Indian, Allottee or Tribe Name
7	If Unit or CA/Agreement, Name and/or No.
8	Well Name and No. El Paso "13" Federal #1
9	API Well No. 30-015-31352
10	Field and Pool, or Exploratory Ross Draw (Wolfcamp)
11	County or Parish, State Eddy, NM

1. Type of well
☐ Oil Well ☒ Gas Well ☐ Other

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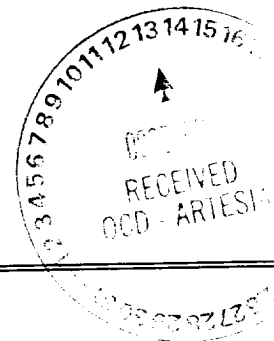
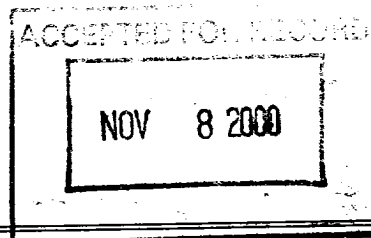
660' FWL & 760' FSL (Unit M)
Sec 13, T26S, R30E

INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	5-1/2" csg
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Mike Francis

Title

Agent

Signature

Date

11/2/00

FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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Office

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