Form 3160-5 (June 2015)

UNITED STATES HOBBS OCD DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICES AND REPORTS ON WELLS

2 Doyngtuse this form for proposals to drill or to re-enter and adaptioned well. Use form 3160-3 (APD) for such proposals

5. Lease Serial No.

6. If Indian, Allottee or Tribe Name

	i. Use form 3100-3 (APL			TOND	DS		
RECEPTEDING	RIPLICATE - Other inst	ructions on	page 2		7. If Unit or CA/Agree NMNM104037X	ement, Name and/or No.	
Type of Well	er				8. Well Name and No. RED HILLS NORT	TH UNIT 710H	
Name of Operator EOG RESOURCES INC	Contact: E-Mail: Kay_Maddo	KAY MADDO ox@EOGRES	X OURCES.com		9. API Well No. 30-025-36217		
3a. Address PO BOX 2267 MIDLAND, TX 79702		3b. Phone No Ph: 432-68	. (include area co 6-3658	de)	10. Field and Pool or I RED HILLS	Exploratory Area	
4. Location of Well (Footage, Sec., T.	, R., M., or Survey Description)				11. County or Parish,	State	
Sec 7 T25S R34E 1603FNL 18	832FEL				LEA COUNTY,	NM	
12. CHECK THE AP	PROPRIATE BOX(ES)	TO INDICA	TE NATURE	OF NOTI	CE, REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION			N				
☐ Notice of Intent	Acidize	☐ Dee	pen	☐ Pro	oduction (Start/Resume)	☐ Water Shut-Off	
Notice of Intent	☐ Alter Casing	☐ Hyd	raulic Fracturin	g Rec	clamation	■ Well Integrity	
Subsequent Report Subsequent Re	☐ Casing Repair	□ New	Construction	□ Rec	complete	Other	
☐ Final Abandonment Notice	☐ Change Plans	Plug	and Abandon	□ Ter	mporarily Abandon		
	☐ Convert to Injection	□ Plug	Back	□ Wa	ater Disposal		
13. Describe Proposed or Completed Ope If the proposal is to deepen directiona Attach the Bond under which the wor following completion of the involved testing has been completed. Final Abdetermined that the site is ready for fit EOG Resources performed a 24 hr injection volume 544 bbl Average injection pressure of 206/12/2017 BLM approved TA 06/23/2017 pmp 200 sxs cmt 06/24/2017 RIH Tag TOC @ 06/25/2017 Ran MIT - passed EOG requests TA approval. TI NOI will be submitted by 6/12/2014. I hereby certify that the foregoing is	ally or recomplete horizontally, k will be performed or provide operations. If the operation restandonment Notices must be file and inspection. 24 hr injection test, 6/3/20 s 2791 psi A NOI @ 11,759 10,640' d chart is attached his well will either be return 2018 true and correct.	give subsurface the Bond No. or sults in a multipl ed only after all 017	locations and men file with BLM/I e completion or requirements, inc	asured and tr BIA. Require ecompletion luding reclan	are vertical depths of all pertined subsequent reports must be in a new interval, a Form 316 nation, have been completed a	ent markers and zones. filed within 30 days 0-4 must be filed once	
Name (Printed/Timed) VAV MAD	Committed to AFMSS for p	RESOURCES	INC, sent to the DEBORAH MC	e Hobbs CKINNEY or	n 06/30/2017 ()		
Name (Printed/Typed) KAY MADDOX			Title REGULATORY ANALYST				
Signature (Electronic S	Submission)		Date 06/29/2017				
	THIS SPACE FO	R FEDERA	L OR STAT	POFF	FOR RECO	RD	
Approved By Mustofa t	tague		Title		EUM ENGINEER	Date 7-18-201	
Conditions of approval, if any are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu	uitable title to those rights in the ct operations thereon.	subject lease	Office		JUL 18 2017 CFO		
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a statements or representations as	crime for any pe to any matter w	erson knowingly ithin its jurisdiction	and SUMHAL on. CAR	Jonake 10 Bry department of	agency of the United	

Additional data for EC transaction #380306 that would not fit on the form

32. Additional remarks, continued

State of New Mexico

Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office

Puff Y / S Y	1 -			TEST REPORT			
Catholis North County Surface Location	1/1	Operator Na	ime		#31-1	API Numb	217
Surface Location CL. Lot Section Township Range Feet from N/S Line Feet From E/W Line County Well Status Well Status OBSERVED DATA OBSERVED DATA Column Col		Pro	perty Name		11000		
County C	111	delills North			***	110	WILL
Well Status	III . Lot Section T	Counchin Range			Fact From	FAVLine	County
Pressure Produce	G 7 253 344						
OBSERVED DATA OBSERVED DATA	The second secon		Well Sta	atus			
OBSERVED DATA (A)Surface						s //-	DATE - 2 7 //
Color Colo		- Alexander				118	20 201
Columbia Colombia			ORSERVET) DATA			
Pull Y/B Y/B Y/B Y/B WTR & GAS _ Type of Diele Ingreed for Water Y/B Y/B Y/B Y/B Y/B Y/B Surges Y/B Y/B Y/B Y/B Y/B Surges Y/B Y/B Y/B Y/B Y/B Surges Type of Diele Ingreed for Waterfield I spales.			OBSERVEE	DAIA			
Puff Y S Y		(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Pro	d Csng	(E)Tubing
Pull Y / Ø Y / Ø Y / Ø Y / Ø WTR & WTR & GAS					parameter of the second of	(See-24) 8 5	
Steady Flow Y N Y N Y N Y N Surges Y N Y N Y N Surges Y N N N Surges Y N Surges S	-low Characteristics						
Surges Y / N Y / S Y / S Type of Yeller Down to nothing S / N S / N S / N Supplies Gas or Oil Y / S Y / S Y / S Y / S Supplies Water Y / S Y / S Y / S Y / S Supplies	Puff	YIN	13	YIC			
Down to nothing Gas or Oil Water Y W Y W Y W Y W Species Y W Y W Y W Species Water Y W Y W Y W Species Y W Y W Species Y W	Steady Flow	YIR		1/0		7	
Gas or Oil Y & Y / & Y / & Y / & Sopplex Water Y / & Y / & Y / & Y / & Y / & Sopplex		YIN	110	~		6	Type of Held Injected for Waterfined II
Gas or Oil Y O Y O Y O Y O Y O Y O Y O Y O Y O Y					_	-	
						- A	
Remarks – Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.	Water	I V	1100	A G		418	
The Table of Dan Long Gold Ford all RAJACI	Signature:	Integ C. E	Southin	bleed down or continu	OIL CON	SERVATIO	ON DIVISION
The transfer of the transfer o	Signature AT Printed Jame: Title: Frodera	Lan Form	Sourting on Comput	1 Bent	OIL CON	SERVATIO	ON DIVISION

INSTRUCTIONS ON BACK OF THIS FORM

Witness:

