

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Artesia

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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.*5. Lease Serial No.
NMNM85891

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.
KNOLL AOK FEDERAL 12. Name of Operator
EOG Y RESOURCES INCContact: MIRIAM MORALES
E-Mail: Miriam_Morales@eogresources.com9. API Well No.
30-015-281273a. Address
104 S FOURTH STREET
ARTESIA, NM 882103b. Phone No. (include area code)
Ph: 575-748-420010. Field and Pool or Exploratory Area
CEDAR CANYON; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 3 T24S R29E SWNE 1980FNL 1980FEL

11. County or Parish, State
EDDY COUNTY, NM**12. CHECK THE APPROPRIATE BOX(ES) TO 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"/> Hydraulic Fracturing	<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	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomple in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

The information below was requested as per COA to flare on previously approved applications.

Total flare amounts per month for 2017 for the Knoll AOK Federal, which includes: *BHry.*

Knoll AOK Federal #1: 30-015-28127 ✓

Knoll AOK Federal #2H: 30-015-35108 ✓

Knoll AOK Federal #3H: 30-015-35907 ✓

Jan:0

Feb:0

Mar:0

NM OIL CONSERVATION
ARTESIA DISTRICT

7/22/17 JUL 19 2017

RECEIVED

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #375332 verified by the BLM Well Information System For EOG Y RESOURCES INC. sent to the Carlsbad Committed to AFMSS for processing by DEBORAH MCKINNEY on 05/10/2017 ()	
Name (Printed/Typed) MIRIAM MORALES	Title PRODUCTION MANAGER
Signature (Electronic Submission)	Date 05/08/2017
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved By _____	Title _____
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 operations thereon.	Office _____
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.	

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****