

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
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.
NMNM92748

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
SERRANO FEDERAL 2

9. API Well No.
30-015-29401

10. Field and Pool or Exploratory Area
DAGGER DRAW; UPPER PENN N.

11. County or Parish, State
EDDY COUNTY, NM.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
EOG Y RESOURCES, INC. Contact: LAURA WATTS
E-Mail: laura_watts@eogresources.com

3a. Address
105 SOUTH FOURTH STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-4272
Fx: 575-748-4585

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 11 T19S R25E NWSW 1980FSL 660FWL

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 Workover Operations
	<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 recomplete 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 recompletion 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.

- 12/7/16 - NU BOP. POOH with tubing.
- 12/8/16 - Set RBP at 7641 ft and packer at 7,608 ft.
- 12/9/16 - Pressure test casing to 1000 psi, held good for 15 minutes. Released packer and POOH. Perforated Upper Penn 7,600 ft - 7,603 ft (18 holes).
- 12/12/16 - Performed formation test. Perforated Upper Penn 7,553 ft - 7,556 ft (18 holes). POOH.
- 12/13/16 - Straddled perms 7,553 ft - 7,556 ft. Performed formation test.
- 12/19/16 - Straddled perms 7,600 ft - 7,603 ft. Performed formation test. POOH. Perforated Upper Penn 7,530 ft - 7,533 ft (18 holes).
- 12/20/16 - Straddled perms 7,530 ft - 7,533 ft. Performed formation test.
- 12/27/16 - POOH. Perforated Upper Penn 7,496 ft - 7,499 ft (18 holes). Performed formation test.
- 1/3/17 - POOH. Tagged RBP at 7,620 ft and released it.
- 1/4/17 - POOH with RBP. TIH with 2-7/8 inch 6.5 lb J55 tubing to 7,495 ft. ND BOP and NU WH.

OC 8-29-17
Accepted for record - NMOCD

NM OIL CONSERVATION
ARTESIA DISTRICT
AUG 29 2017

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #363633 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 01/24/2017 ()

Name (Printed/Typed) LAURA WATTS Title ASSISTANT REGULATORY LEAD

Signature (Electronic Submission) Date 01/12/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____ Date _____

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 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD 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 ****