

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.*

**NMOCD**  
**Artesia**

5. Lease Serial No.  
~~NMNM1700~~

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

7. If Unit or CA/Agreement, Name and/or No.  
NMNM127934

1. Type of Well

Oil Well  Gas Well  Other

8. Well Name and No.  
FEDERAL FC COM 2H

2. Name of Operator  
EOG Y RESOURCES, INC.

Contact: TINA HUERTA  
E-Mail: tina\_huerta@eogresources.com

9. API Well No.  
30-015-26907

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

3b. Phone No. (include area code)  
Ph: 575-748-4168

10. Field and Pool or Exploratory Area  
LONG DRAW;GLORIETA-YESO

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

Sec 24 T20S R24E SWSW 760FSL 660FWL

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 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.

8/17/17 - NU BOP. POOH with tubing.  
8/21/17 - Cleaned out well down to 6592 ft. Pressured up to 400 psi.  
8/22/17 - Spotted 750g 15 percent NEFE HCL acid from 6592 ft. Spotted 750g 15 percent NEFE HCL acid from 5748 ft. Spotted 750g 15 percent NEFE HCL acid from 4906 ft. Spotted 750g 15 percent NEFE HCL acid from 4064 ft. Pumped 150 bbls 2 percent KCL with biocide with 3.5 BPM at 1500 psi to displace acid. Pumped 150 bbls 2 percent KCL with biocide and Oxygen Scavenger at 4 BPM at 1500 psi. Pumped 340 bbls 2 percent KCL with biocide and Oxygen Scavenger at 10.5 BPM at min 250 psi.  
8/23/17 - Set 2-7/8 inch 6.5Lb J-55 L-80 tubing at 2430 ft. ND BOP. Turned well over to production.

BC 9-27-17  
Accepted for record - NMOCD

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

SEP 26 2017

RECEIVED

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #387711 verified by the BLM Well Information System  
For EOG Y RESOURCES, INC., sent to the Carlsbad  
Committed to AFMSS for processing by JENNIFER SANCHEZ on 09/18/2017 ( )

Name (Printed/Typed) TINA HUERTA

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 09/06/2017

**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 \*\***