

New Mexico Oil Conservation Division, District I

1625 N. French Drive

UNITED STATES Hobbs, NM 88240

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTForm 3160-5
(April 2004)FORM APPROVED
OMB NO. 1004-0137
Expires March 31, 2007

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

BOG Resources Inc.

3a. Address

P.O. Box 2267 Midland, Texas 79702

3b. Phone No. (include area code)

432 686-3714

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

2140' FNL & 330' FWL U/L E 1750FNL & 2800' FWL Sec. 6
Sec 6, T25S, R34E Surface T-25-S:R-34-E U/L G BHL

5. Lease Serial No.

NM 14497-A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

Diamond 6 Federal 2

9. API Well No.

30-025-36628

10. Field and Pool, or Exploratory Area

Red Hills; Bone Spring

11. County or Parish, State

Lea NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 Add
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Horizontal Lateral
	<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 recompleat 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once 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 final site is ready for final inspection.)

Well History: Originally drilled and completed in 2004. 5-1/2" 17# HCP-110 casing set in 7-7/8" hole at 12500' and cmt'd with 1630 sx with top of cement at 5190'. The original completion was perforated and fracture stimulated with 81,000 gal and 146,000# of 18/40 sand from 12307-12330'. The well is currently producing.

A CIBP will be set at \pm 11950'. The intent of this project is to re-enter the wellbore and drill a 2,500' lateral in the 3rd Bone Springs Formation. A whipstock will be used to exit the existing 5 1/2" casing and a 4 3/4" hole size lateral will be drilled. A 3 1/2" liner will be run and cemented. The final decision on cementing all or part of the liner will be made after review of the rock being cut in the lateral.

Survey Plats and Drilling Curves Attached

SUBJECT TO
LIKE APPROVAL14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Mike Francis

Title Agent

Signature

Date

11/12/2004

THIS SPACE FOR 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

Date

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.

DISTRICT II
1301 W. Grand Avenue, Artesia, NM 88210

Energy, Minerals, and Natural Resources Department

Revised August 15, 2000
Submit to Appropriate District Office
State Lease - 4 copies
Fee Lease - 3 copies

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

1220 South St. Francis Dr.

Santa Fe, New Mexico 87505

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-36628		² Pool Code	³ Pool Name Red Hills Bone Spring	
⁴ Property Code	⁵ Property Name DIAMOND "6" FEDERAL			⁶ Well Number 2
⁷ OGRID No. 7377	⁸ Operator Name EOG RESOURCES, INC.			⁹ Elevation 3460'

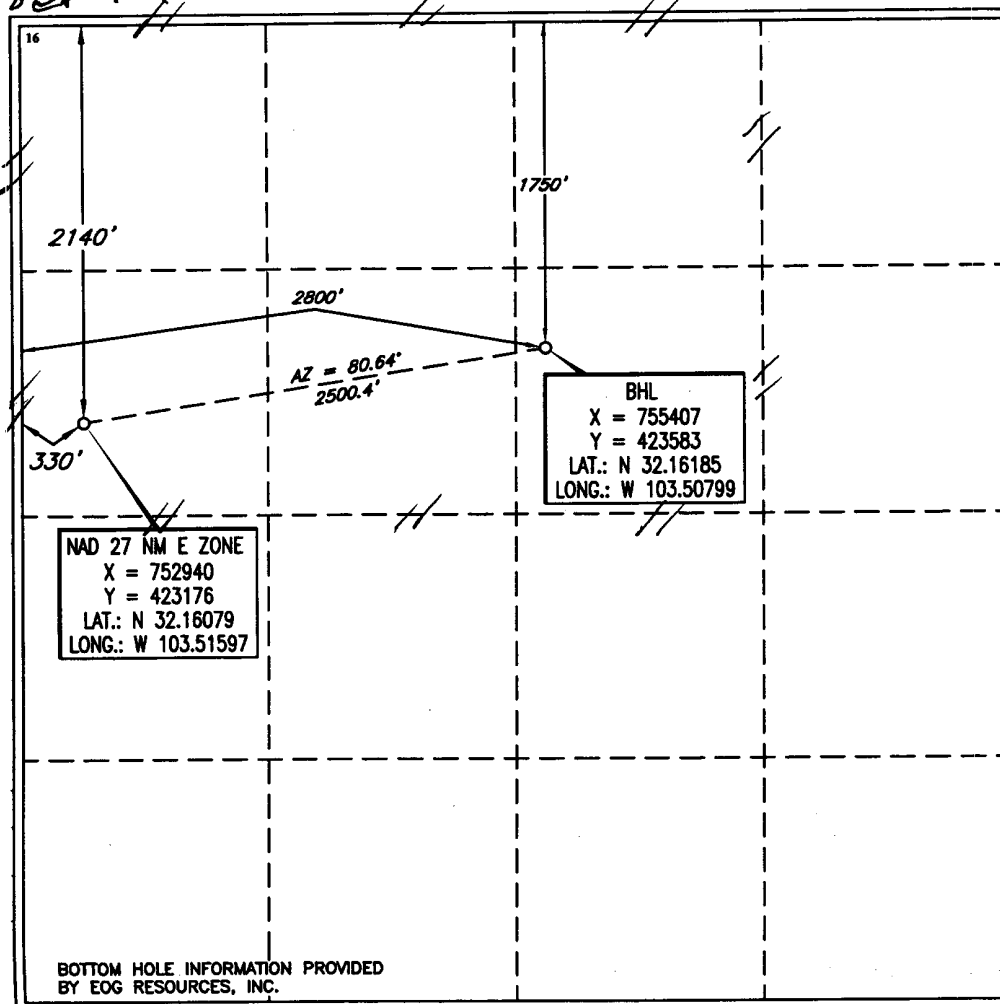
¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	6	25 SOUTH	34 EAST, N.M.P.M.		2140'	NORTH	330'	WEST	LEA

¹¹ **Bottom Hole Location If Different From Surface**

UL or lot no. G	Section 6	Township 25 SOUTH	Range 34 EAST, N.M.P.M.	Lot Idn	Feet from the 1750'	North/South line NORTH	Feet from the 2800'	East/West line WEST	County LEA
¹² Dedicated Acres 240		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

NO ALLOWABLE WELL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



¹⁷ OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature *Mike Franco*

Mike Francis
Printed Name

Agent

Title
11/12/2004

Dentist

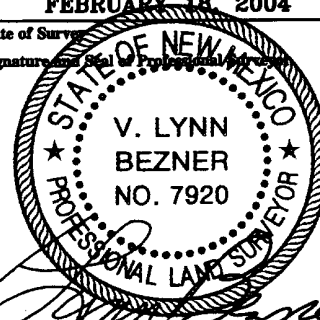
¹⁸ SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

FEBRUARY 18, 2004

Date of Survey _____

Signature and Seal of Professional Engineer

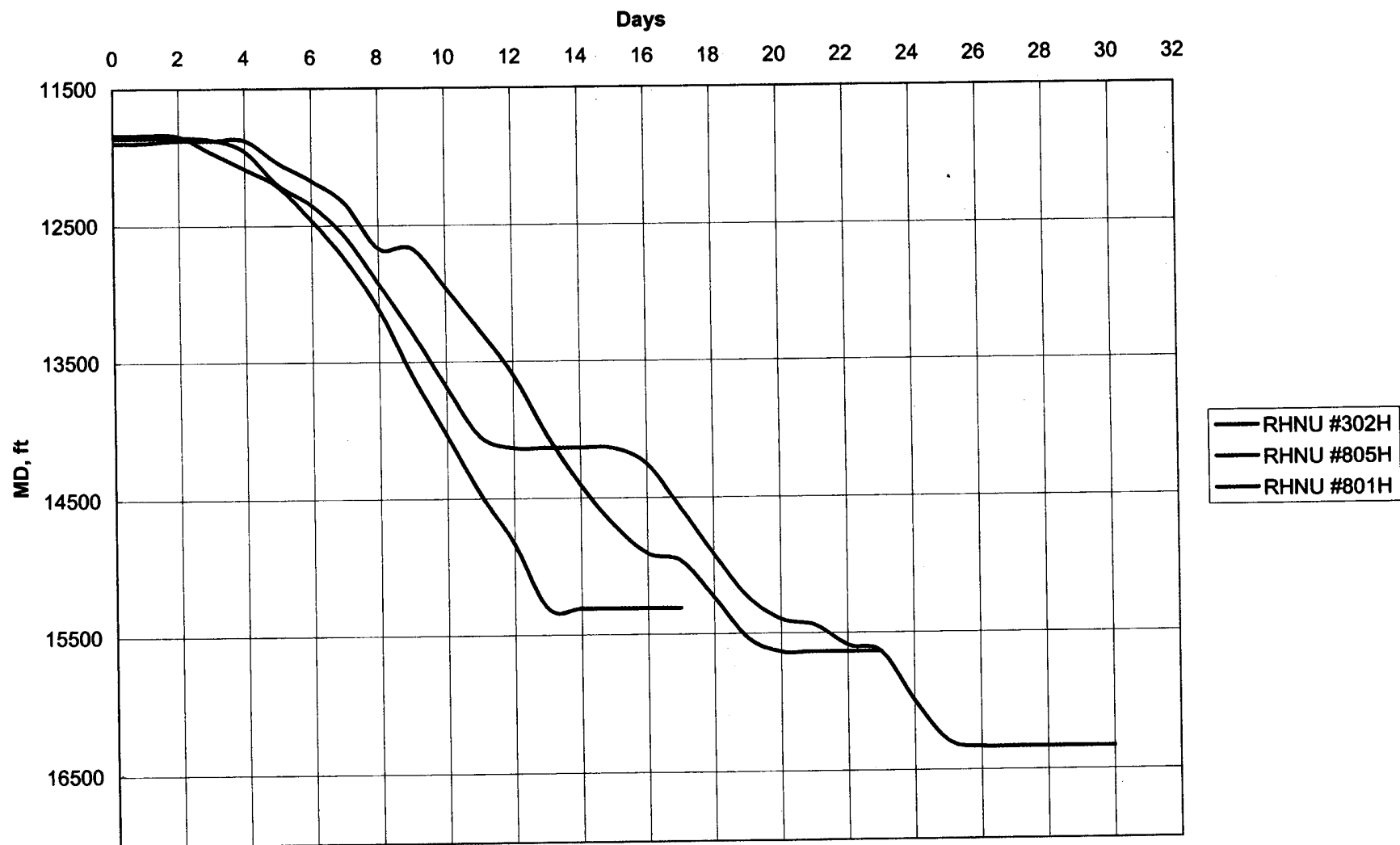


Certificate Number

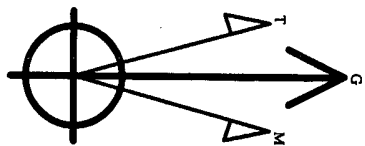
V. L. BEZNER R.P.S. #7920

JOB #93177-2 / 22 NE / E.U.O.

Bone Springs Re-entry Horizontal Wells

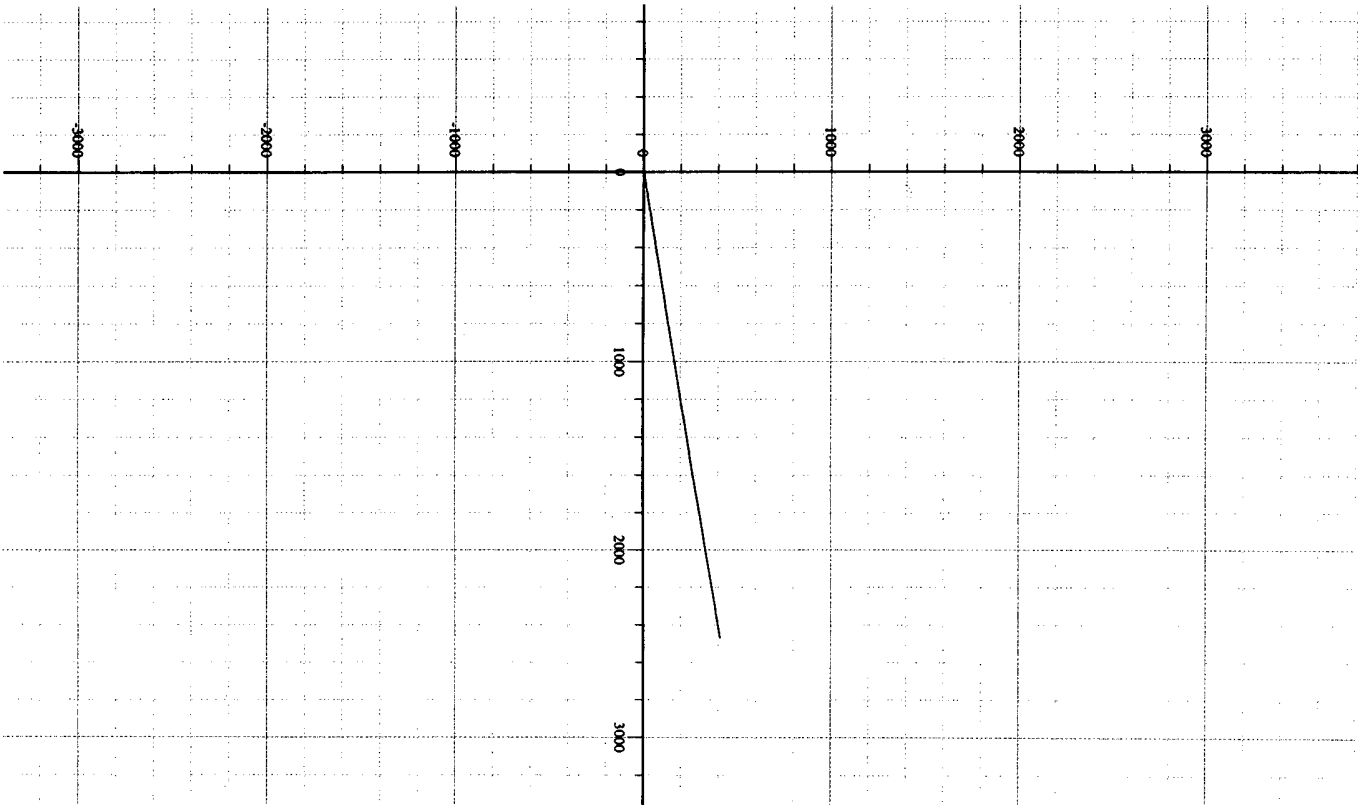


Field: Red Hills
 Site: Diamond 6 Fed Con #2
 Well: Diamond 6 Fed Con #2
 Wellpath: Lateral Sidetrack
 Plan: Plan #1

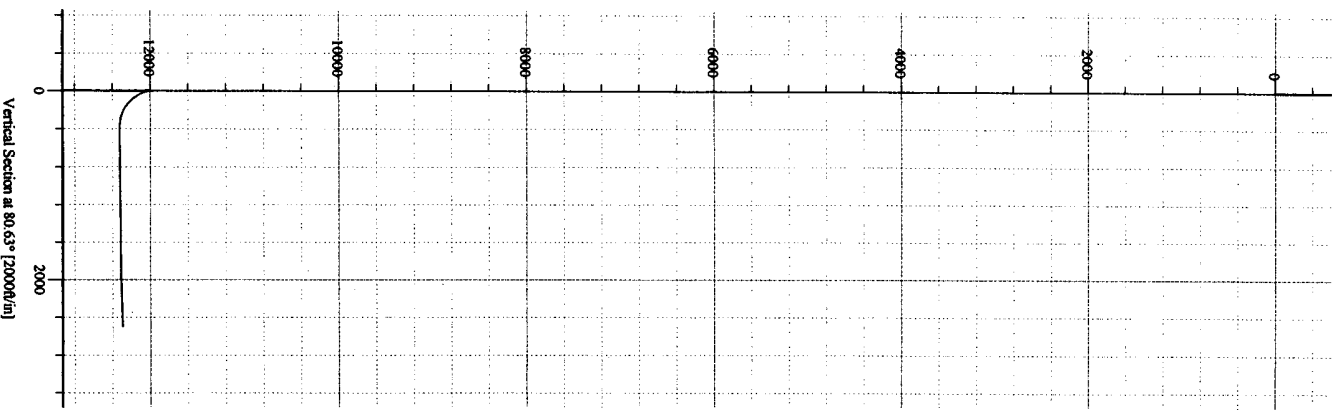


Azinutis to Grid North
 True North: -0.44°
 Magnetic North: 8.11°
 Magnetic Field
 Strength: -49428nT
 Dip Angle: 60.39°
 Date: 11/4/2004
 Model: igr2000

South(-)/North(+) [1000ft/in]



True Vertical Depth [2000ft/in]



West(-)/East(+) [10000ft/in]