

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: November 30, 2000

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. LC-069420	
b. Type of Completion: <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr., Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator EOG Resources Inc.		7. Unit or CA Agreement Name and No.	
3. Address P.O. Box 2267 Midland TX 79702		8. Lease Name and Well No. West Corbin Federal 8	
3a. Phone No. (include area code) 432 686 3689		9. API Well No. 30-025-29783	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface 1980' FWL & 660' FNL U/L C At top prod. interval reported below At total depth		10. Field and Pool, or Exploratory South Corbin	
14. Date Spudded WO 12/20/03		11. Sec., T., R., M., or Block and Survey or Area Sec 17, T18S, R33E	
15. Date T.D. Reached		12. County or Parish Lea	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 12/31/03		13. State NM	
17. Elevations (DF, RKB, RT, GL)* 3885 GL			
18. Total Depth: MD 11450 TVD		19. Plug Back T.D.: MD 11372 TVD	
20. Depth Bridge Plug Set: MD TVD			
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)		22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit copy)	

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt.(#ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17 1/2	13 3/8	61		350		400		Surface	
12 1/4	9 5/8	47		2905		1600		Surface	
7 7/8	5 1/2	17		11450		2420		1100 TS	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 7/8	11294							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Bone Spring	7140		7140-7184		990	Producing
B) Wolfcamp	10720		70720-11369			Producing
C)						
D)						

26. Perforation Record

Depth Interval	Amount and Type of Material
10720-11369	Acidized w/ 3500 gal 15% Anti-sludge acid

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity	Gas Gravity	Production Method
12/31/03	1/20/04	24	→	27	21	205			Pumping 2 1/2" X 1 1/4" X 20'
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. →	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	
	120						777	POW	

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. →	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	

(See instructions and spaces for additional data on reverse side)

ACCEPTED FOR RECORD

JAN 28 2004

GARY GOURLEY
PETROLEUM ENGINEER

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr.	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	

28c. Production-Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr.	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
				Rustler	1420
				Yates	3020
				Queen	4200
				Delaware Sand	5000
				Bone Spring	7000
				1st Bone Spring Sand	8280
				2nd Bone Spring Sand	8850
				3rd Bone Spring Sand	9650
				Wolfcamp	10380

32. Additional remarks (include plugging procedure):

Downhole Commingle OCD Order DHC-3234

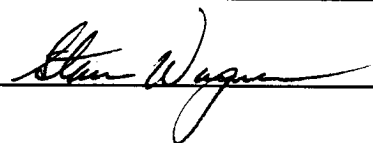
33. Circle enclosed attachments:

1. Electrical/Mechanical Logs (1 full set req'd) 2. Geologic Report 3. DST Report 4. Directional Survey
5. Sundry Notice for plugging and cement verification 6. Core Analysis 7. Other

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) Stan WagnerTitle Regulatory Analyst

Signature

Date 1/27/04