		00	D-HQBBS OCD			
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Type of Subwetting Gas Welling Other Image: Sec. Transmission of the second seco	SUBMIT IN T	RIPLICATE- Other instructions of	on reverse side.	-		
Name of Operator EOC Resources, Inc. 9. Proce No, frachular anna codu 9. Proce No, frachular anna codu 12. Check Association 13b Proce No, frachular anna codu 10 Field and Pool, or Edipointary Arra Resources, Inc. 13. Decision of Well Robings, Sec. T. R. M. or Survey Description 11 County of Well No. 33b-025-38237 14000 FNL & 1700 FWL, UL C. Sec 17, T2SS, R34E SL. 11 County of Plant, State Las, New Mexico 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Subsequent Report Addr Cang Deepen Production (Stat/Resume) Water Shut-Off Subsequent Report Addr Cang Deepen Production (Stat/Resume) Water Shut-Off Subsequent Report Connect to Ingettan Plug and Abandon Temporanly Abandon Temporanly Abandon 13 Describe Proposed of Completed Poranomability or recomplete honzonabily, gave sharefuce locations and measured and run ventcal deptil of all patternet matches and zones Adandon due or ventches whet will be officined prove sharefuce locations and measured and run ventcal deptil of all patternet matches and zones Adandon due or state with well and other with the wild and due of following the due to a proposed wells and the due to a prove the Boad No. State Report Hondon Honzonability, gave sharefuce locations and measured and run ventcal deptis of all patternet matches and zones to any proposed wells and Ad	1 Type of Well Oil Well	Gas Well 0/ Other Thi				
a Adves b O Bes 2267, Midland, Texes 73702 b P. O. Bes 2267, Midland, Texes 73702 b Condition of Well (Foorge, Sec. T. R. M. or Survey Description) 1000 FNL & 1700 FWL, UL C, Sec 17, T25S, R34E SL 2327 FSL & 112° PML UL D, Sec 17, T25S, R34E SL 2327 FSL & 112° PML UL D, Sec 17, T25S, R34E BHL 1000 FNL & 1700 FWL, UL C, Sec 17, T25S, R34E BHL 11 Camy or Parish, Sinc 2327 FSL & 112° PML UL D, Sec 17, T25S, R34E BHL 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA TYPE OF SUBMISSION 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA TYPE OF SUBMISSION 13. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE. Report, OR OTHER DATA TYPE OF SUBMISSION 14. Addres 15. CHECK AdPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE. Report, OR OTHER DATA TYPE OF SUBMISSION 15. Consider frequence and the source of the Comparison of th	2 Name of Operator EOG Res	ources, Inc.	Red Hills North Unit 904			
Location of Well (Fonzae, Ser, T. R. M. or Survey Description) 1000 FNL & 1700 FWL, ULC, See 17, T2SS, R34E SL 232' FSL & 112' FML ULC, D. See 17, T2SS, R34E BHL 11 Centry of Parts, State 232' FSL & 112' FML ULC, See 17, T2SS, R34E BHL 12 CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA TYPE OF SUBMISSION 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA TYPE OF SUBMISSION 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA TYPE OF SUBMISSION 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA TYPE OF SUBMISSION 13. Change Plans Production (Start/Resame) 14. Water Deposal 15. Conge Plans 16. Conge Plans 17. C	3a. Address		30-025-36237			
TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Acidaze Deepen Production (Start/Resume) Water Shat-Off Subsequent Report Casing Repar Production (Recomplate Other Other Final Abandonment Notee Connect to Injection Play and Abandon Other Other 13 Describe Proposed of Completed Operation (clearly state all performed or provide the BoarNorth), years and across Attach the Board under which the work will be performed or provide the BoarNorth, years and measured and the vertical depths of all performed rules and and cores that the site is to depen directionally or ecompleted operation (File operation recompleted or provide the BoarNorth), and measured and the vertical depths of all performed rules and and cores that the site is a ready for final inspection) Pull well, redress packer, test tubing. Re-run MIT 41. Intereby certify that the foregoing is true and correct Name (File only after all requiremental Rep Signale Type) Title Environmental Rep Signaler Mark (File only after all requiremental Rep Title Approval Signaler Title Environmental Rep Title Approval Signaler Title Environmental Rep Other Other Signaler Title Space FOR FEDERAL OR STATE OFFICE USE Approved by Other Other Nam (Firrinited Typed)<	1000' FNL & 1700' FWL, U	/L C, Sec 17, T25S, R34E SL		11 County or Parish, State		
Acidaze Acidaze Deepen Production (Star#Resume) Water Shuk-Off Well Integrity Subsequent Report Charge Treat Construction Production (Star#Resume) Well Integrity Other	12. CHECK	APPROPRIATE BOX(ES) TO INDICATE	E NATURE OF NOTICE, R	EPORT, OR OTHER DATA		
Notice of intent After Casing Pricture Treat Recomplete Well Integrity Subsequent Report Charge Plans Program Abandon Complete Other Control Final Abandonnent Notice Convert to Ingection Plug Back Water Disposal Convert Convert to Ingection Conve	TYPE OF SUBMISSION		TYPE OF ACTION			
Condition of Approval Notify OCD Hobbs Office Condition of Approval Notify OCD Condition of Approval Notify OCD Cond	Notice of Intent					
Signature General Decemperative of the properties of the propert						
13 Describe Proposed or Completed Operation (clearly state all perturent details, including estimated starting date of any proposed work and approximate duration thereof 13 Describe Proposed or Completed Operation (clearly state all perturent details, including estimated starting date of any proposed work and approximate duration thereof 14 Describe Proposed or Completed Operation (clearly state all perturent details, including estimated starting date of any proposed work and approximate duration thereof 15 Describe Proposed or Completed Operation (clearly state all perturent details, including estimated starting date of any proposed work and approximate duration thereof 16 Mater Disposit Operation of the work on the work of any perture all perturent markers and zones Attach the Bond under which the work will be performed or provide the Bond No on file with BLM/BIA Required all benefit do noce Description of the work of any proposed work and approximate duration thereof 16 Mater Disposit Mater Disposit Description of the work of any period subsequent reports shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection) Pull well, redress packer, test tubing. Re-run MIT State and correct State and correct Name (Printed Typed) Remee' Jarratt Title Environmental Rep Signature Date 07/13/2011 Date 0				bandon		
If the proposal is to despen directionally or recomplete horizontally, give subsurface locations and measured and true vertical deptits 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 moviled operation is if the operation results in a multiple completion or recompletion 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 site is ready for final inspection.) Pull well, redress packer, test tubing. Re-run MIT Secondition of Approval Notify OCD Hobbs Office 24 hours prior of running MIT Test & Chart If the revised approval Notify OCD Hobbs Office 24 hours prior of running MIT Test & Chart If the revised approval Notify OCD Hobbs Office 24 hours prior of running MIT Test & Chart If the revised approval Notify OCD Hobbs Office 24 hours prior of running MIT Test & Chart If the provide the Bond on the antice of the and correct Name (Printed Typed) Renee' Jarratt Title Environmental Rep Date 07/13/2011 This SPACE FOR FEDERAL OR STATE OFFICE USE Approved by This SPACE FOR FEDERAL OR STATE OFFICE USE Approved by This SPACE FOR FEDERAL OR STATE OFFICE USE Approved by This SPACE FOR FEDERAL OR STATE OFFICE USE Approved by This SPACE for first in the subject for any person first in the subject of the subje	Final Adandonment Nouce	Convert to Injection Plug Bac	k Water Disposal			
Condition of Approval Notify OCD Hobbs office 24 hours prior of running MIT Test & Chart 14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Renee' Jarratt Signature Marcut Date 07/13/2011 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Marcut Title this notice does not warrant or certify that the applicaan holds legal to contact the test in the subject lease which would entitle the applicant holds legal to contact the test. Title 8 USC Section 1001 and Title 43 USC Section 1212, make it a crime for any person knowingly and willfully to materio any department or agency of the United (Instructions on page 2)						
14. Ihereby certify that the foregoing is true and correct Name (Printed/Typed) Title Environmental Rep Renee' Jarratt Date 07/13/2011 Signature (MMM MATCH) Title Environmental Rep Distribution of provide the second		V				
Name (Printed/Typed) Title Environmental Rep Signature (Multiple Additional Signature (Multiple Additis))))))))))))))))))))))))))))))))))			-	CONDITIONS OF APPROVA		
Approved by This space for federal or state of fice use Approved by Title 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 constable title to those rights in the subject lease which would entitle the applicant to consuct operations thereofer Title Office Office Vite 18 USC Section 1001 and Title 43 USC Section 1212, make it a crime for any person knowingly and willifully to make to any department or agency of the United tates any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction Title BUSC Section 1001 and Title 43 USC Section 1212, make it a crime for any person knowingly and willifully to make to any department or agency of the United (Instructions on page 2)	Name (Printed/Typed)		Title Environmental Rep			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by	Signature (ALS & (Valuat	Date	07/13/2011		
Conditions of approval, i) any, are attached Approval of this notice does not warrant or sertify that the applicant holds legal of cantable title to those rights in the subject lease which would entitle the applicant to consuct operations thereofO/_/ Intel 18 USC Section 1001 and Title 43 USC Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United itates any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction (Instructions on page 2)	<u>_</u>		L OR STATE OFFICE	USE		
The 18 USC Section 1001 and Title 43 USC 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)	certify that the applicant holds leg	gal or equitable title to those rights in the subject l	rant or	APPROVED		
(Instructions on page 2)			y person knowingly and willfully	to make to any department or agency of the United		
		statements or representations as to any matt	ier within its jurisdiction			
			BURE	AU OF LAND MANAGEMENT AUG 0 4 ARLSBAD FIELD OFFICE		

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		BURTO		Jeog resources Company Rep. RED HILLS NORTH UNIT #904 Tool Specialist		
	0# COMPR			1-Sep-05	Office Sap#	HOBBS 3874502
Inst	allation	Length	Depth	Description	OD	1D
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		17.50	0.00	KB CORRECTION	N/A	N/A
		<6.50>	17.50	, SLACKOFF FOR COMPRESSION	N/A	N/A
i gen si se generative de services de s		11,278.12	11.00 ·	345 JOINTS 2 7/8" 6.5# EUE L-80 TUBING	3.660	`2.44 1'
				9.625" 40# SURFACE TO 5.150		
angalana. Antiritati			P			
				7" 26# CASING TO 12,260		
		2.15	11,289.12	XL ON-OFF TOOL ('X' PROFILE) (N/P OVERSHOT/DH 1150 GUDGEON)	5.500	2.313
		6.20	11,291.27	7" 23-29# PLT PACKER (NICKLE PLATED)	6.025	2.423
		32.70	11,297.47	1 JOINT 2 7/8" L-80 TUBING	3.660	2 44 !
	4 <u></u>	0.80 0.44	11,330.17 11,330.97 11,331.41	X' PROFILE NIPPLE (DH 1150 SS) MULESHOE GUIDE BOTTOM OF ASSEMBLY	3.660 3.660	2.313 2.500
4	4			4 1/2" 11.6# LINER 11,416-13,304		
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				S 12.707-13 HOLES/12,939-11 HOLES/13,200-27 H	JLES	
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Red Hills North Unit 904 30-025-36237 EOG Resources July 19, 2011 Conditions of Approval

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- Conduct a Mechanical Integrity Test of the tubing/casing annulus any time the packer or tubing is pulled. The test pressure should be at least 200psig above the tubing (at test time) pressure but no more than casing test pressure as described by Onshore Order 2.III.B.1.h. (The reservoir pressure may need to be reduced). Trap that pressure and record it on a chart for 30 minutes. Less than a 10% leakoff will not restrict injection approval. Document the MIT on a calibrated recorder chart within 25 to 85 per cent of its full range. Notify Paul R. Swartz at 575.234.5985 and/or 575.200.7902 at least 24 hours before the test. If there is no response, notify the BLM on call drilling phone, 575.361.2822.
- 2. Submit the recorded MIT chart with a subsequent Sundry Form 3160-005 relating the MIT activity. Include the original and three copies of the recorded chart and Sundry.

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