

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS
JUL 26 2011

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 Inj.
2 Name of Operator EOG Resources, Inc.
3a Address P. O. Box 2267, Midland, Texas 79702
3b Phone No (include area code) 432-686-3684

4 Location of Well (Footage, Sec, T, R, M, or Survey Description)
1000' FNL & 1700' FWL, U/L C, Sec 17, T25S, R34E SL
232' FSL & 112' FWL U/L D, Sec 17, T25S, R34E BHL

5 Lease Serial No
NM94108, NM24490
6 If Indian, Allottee or Tribe Name
7 If Unit or CA/Agreement, Name and/or No
Red Hills North Unit
8 Well Name and No.
Red Hills North Unit 904
9 API Well No
30-025-36237
10 Field and Pool, or Exploratory Area
Red Hills; Bone Spring
11 County or Parish, State
Lea, New Mexico

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 checked="" 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 type="checkbox"/> Other
	<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 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 site is ready for final inspection.)

Pull well, redress packer, test tubing. Re-run MIT

Condition of Approval Notify OCD Hobbs
office 24 hours prior of running MIT Test & Chart

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Renee Jarratt

Title Environmental Rep

Signature

Renee Jarratt

Date

07/13/2011

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

[Signature]

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.

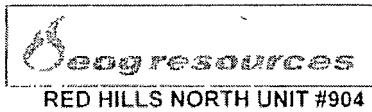
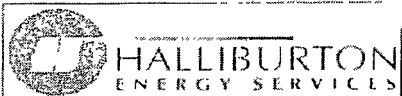
Office

Title 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)



AUG 04 2011



Company Rep. JAMES BROWN
Tool Specialist LARRY MARTIN

Office HOBBS
Sap # 3874502

23,000# COMPRESSION

1-Sep-05

Installation	Length	Depth	Description	OD	ID
	17.50	0.00	KB CORRECTION	N/A	N/A
	<6.50>	17.50	SLACKOFF FOR COMPRESSION	N/A	N/A
	11,278.12	11.00	345 JOINTS 2 7/8" 6.5# EUE L-80 TUBING	3.660	2.441
			9.625" 40# SURFACE TO 5,150		
			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	2.441
	0.80	11,330.17	X' PROFILE NIPPLE (DH 1150 SS)	3.660	2.313
	0.44	11,330.97	MULESHOE GUIDE	3.660	2.500
		11,331.41	BOTTOM OF ASSEMBLY		
			4 1/2" 11.6# LINER 11,416-13,304		
			PERFS 12,707-13 HOLES/12,939-11 HOLES/13,200-27 HOLES		

**Red Hills North Unit 904
30-025-36237
EOG Resources
July 19, 2011
Conditions of Approval**

1. 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.**

TAM 071911