Form 3160-5' (August 2007) HOBBS OCD						FORM APPROVED OMB NO. 1004-0137 Expires July 31, 2010		
- COM SUNDRY NOTICES AND DEPORTS ON WELLS						5. Lease Serial No.		
AUG 2 5 2011 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.						NM108503 6. If Indian, Allottee or Tribe Name		
SOBMIT IN TRIPLICATE - Other Instructions on page 2						7. If Unit or CA/Agreement, Name and/or No.		
1 Type of Well X Oil Well Gas Well Other 2. Name of Operator						8. Well Name and No Caballo 23 Federal 2H		
EOG Resources Inc.						9. API Well N		
3a Address			3b. Ph	one No. (include are	a code)	30-025-40		
P.O. Box 2267 Midland, Texas 79702			4	132-686-3689		10. Field and	Pool, or Exploratory Area	
4 Location of Well (Footage, Sec., T., R., M., or Survey Description)						Red Hills	Bone Spring	
50' FNL & 2200' FWL, U/L C SHL						11. County of	r Parich State	
330' FSL & 2200' FWL, U/L N BHL Sec 23, T25S, R33E						Lea	NM	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA								
TYPE OF SUBMISSION				TYPE OF ACTION				
X Notice of Intent		Acidize		Deepen		(Start/Resume)	Water Shut-Off	
Subsequent Report		Alter Casing	H	Fracture Treat New Construction	Reclamation		Well Integrity X Other	
Final Abandonment Notice		Change Repair	님		Recomplet			
		Convert to Injection	on	Plug and Abandon Plug Back	Water Disp	y Abandon osal	BOPE Change	
If the proposal is to deepe Attach the Bond under w following completion of t testing has been complete determined that the final second records are second records.	en directionally or recomploid the work will be perfethe involved operations. If	ete horizontally, give sommed or provide the In the operation results a cotices shall be filed or ction.) to drill this	ubsurface Bond No. n a multip ally after a	c locations and meas on file with BLM/E ole completion or re- all requirements, inc	ured and true ver BIA. Required su completion in a n luding reclamation	tical depths of a absequent report ew interval, a F on, have been co	d approximate duration thereof. Il pertinent markers and zones. Its shall be filed within 30 days form 3160-4 shall be filed once completed, and the operator has P and the	
Manufacturer:	Midwest Hose & Speciality SN#90067			E ATTACH	ED FOR			
Serial Number:				ONDITIONS	OF APPR	OVAL		
Length:	35'							
Size:	OD = 8" ID = 4"							
Ends:	Flanges Size: 4-1/16"							
WP Rating: 10,000 psi Anchors required by manufacturer: No								
14. I hereby certify that the foregoing is true and correct Name (Printed Typed) Stan Wagner			Tit	^{le} Regulat	ory Analyst			
Signature the Way			Da	te 8/16/201	L		APPROVED	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							TOVED	
Approved by	17	·		Title		D	ate AUG 1 9 2011	
Conditions of approval, if any, are attached Approval of this notice does not warrant or certify the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.			ıfy that	Office AUG 2 6	2011		AUG 1 9 2011 /s/ Chris Walls	

<u>Co-Flex line</u> <u>Conditions of Approval</u>

Variance approved to use flex line from BOP to choke manifold. Check condition of 3" flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be swapped with a hose of equal size and equal or greater pressure rating. Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review. If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).