Form 3160-5 (August 1999)

N.M. Oil Cons. Division DEPARTMENT OF THE INTERIOR 1625 N. French Dr. **UNITED STATES**

BUREAU OF LAND MANAGEMENHOBBS, NM 88240

FORM APPROVED OMB NO. 1004-0135 Expires: November 30, 2000

5. Lease Serial No.

S/L NM14437, BHL NM30400 6. If Indian, Allottee or Tribe Name

SUNDRY	NOTICES	AND	REPORTS	ON	WELLS	
3	hin form for	nrana	cala ta drill a	r to	ro ontor an	

Do not use this form for proposals to drill or to re-enter an bandoned well Use Form 3160-3 (APD) for such proposals

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

apandoned well. Ose For	11 3 100-3 (APD) 101	sucii proposais.						
SUBMIT IN TRIPLICATE -	7. If Unit or CA/Agreement, Name and/or N Red Hills North Unit							
1. Type of Well					NM NM 104037 X 8. Well Name and No.			
Oil Well Gas Well X Other		Wate	r Injection		North Unit	No. 710		
2. Name of Operator								
EOG Resources Inc.		T-1 -4 -4 -7 -7 -7		9. API Well 1	No. 7 . 7 .	П		
3a. Address		3b. Phone No. (include are	ea code)	30-025-36217				
P.O. Box 2267 Midland, Texas 7970	n \	915 686 3689		1	Pool, or Explorato	•		
4. Location of Well (Footage, Sec., T., R., M., or Survey 1 1603' FNL & 1832' FEL U/L G (SHL)	Description)	7-255-34	E		Bone Spring			
2380' FSL & 1100' FWL U/L L (BHL)	L	L			11. County or Parish, State			
				Lea	N	<u>«</u>		
12. CHECK APPROPRIATE	BOX(ES) TO IN	DICATE NATURE OF N	NOTICE, REP	ORT, OR OT	HER DATA			
TYPE OF SUBMISSION		TYF	PE OF ACTION					
Notice of Intent	Acidize	Deepen	Production	(Start/Resume)	Water Shut-C	ff		
	Alter Casing Fracture Treat		Reclamatio		Well Integrity			
X Subsequent Report								
	Casing Repair	New Construction	Recomplet	te	X Other			
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporari	rily Abandon Casing Test				
_	Convert to Injecti	on Plug Back	Water Disp	oosal				
6/2/03 Ran 285 jts. 7", 26#, P- Cemented w/ 1055 sx 50/5 6/3/03 Ran temperature survey, 6/4/03 Tested casing to 3100 ps	50/10, tailed w/ TOC @ 5210'. si. OK.		20 (10) (10) (10) (10) (10) (10) (10) (10	JUN	O FOR RECO 1 9 2003 GOURLEY JM ENGINEER			
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)		Title Title		/				
Stan Wagner		Regula	Regulatory Analyst					
Stan Wagan	<u> </u>	Date 6/17/03						
CTHIS		DERAL OR STATE OFF						
Conditions of approval, if thy, are attached. Approval of certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the	of this notice does not we those rights in the sub		MANAGER	D	at gun 2 4 2	003		
Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section	n 1212, makes it a crim	e for any person knowingly a	nd willfully to ma	ike to any depart	ment or agency of	the United		