

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS **HOBBS OCD**
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. **DEC 17 2012**

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>convert to injection</u>		5. Lease Serial No. LG4087
2. Name of Operator EOG Resources Inc.		6. If Indian, Allottee or Tribe Name
3a. Address P.O. Box 2267 Midland, Texas 79702	3b. Phone No. (include area code) 432 686 3689	7. If Unit or CA/Agreement, Name and/or No. East Corbin 3
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FSL & 1980' FEL. U/L 0 Sec 16, T18S, R33E		8. Well Name and No. Delaware Unit
		9. API Well No. 30-025-30949
		10. Field and Pool, or Exploratory Area West Corbin Delaware
		11. County or Parish, State Lea NM

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

EOG Resources will be moving in to repair a possible tubing or packer leak as soon as our rig schedule will allow.

POOH w/ injection tubing and packer.
Repair tubing/packer.
RIH w/ injection tubing and packer.
Perform MIT test to 500 psi.
Return to injection.

SUBJECT TO LIKE APPROVAL BY STATE

*accept for record
11/30/2012*

*accept for record
12/18/2012*

file a subsequent sundry describing this well's conversion to injection (state well in federal unit)

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Stan Wagner		Title Regulatory Analyst
Signature <i>Stan Wagner</i>		Date 11/16/2012
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved by	Title	ACCEPTED FOR RECORD DEC 17 2012 <i>Stan Wagner</i> BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
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	