

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0137  
Expires October 31, 2014

OCD Hobbs

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.

HOBBS OCD

SUBMIT IN TRIPLICATE - Other instructions on page 2

APR 30 2013

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		RECEIVED	5. Lease Serial No. NMNM108504 SL NMNM108503 BHL
2. Name of Operator EOG Resources, Inc.			6. If Indian, Allottee or Tribe Name
3a. Address P.O. Box 2267 Midland, TX 79702	3b. Phone No. (include area code) 432-686-3689	7. If Unit or CA/Agreement, Name and/or No.	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 50' FSL & 2190' FEL, U/L O (SWSE), SHL Sec 24, T25S, R33E 2310' FSL & 2190' FEL, U/L J (NWSE), BHL Sec 13, T25S, R33E		8. Well Name and No. Vaca 24 Fed Com 5H	
		9. API Well No. 30-025-40536	
		10. Field and Pool, or Exploratory Area Red Hills	
		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 type="checkbox"/> Other
	<input checked="" 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 final site is ready for final inspection.)

EOG Resources, Inc. intends to use Cactus Rig #102 to drill this well.  
Attached are the Co-Flex Hose Specifications and Test Certification specific to this rig.  
No other changes to the approved APD are necessary.

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Stan Wagner		Title Regulatory Analyst	APPROVED
Signature <i>Stan Wagner</i>		Date 4/18/2013	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved by		Title	APR 25 2013 Date <i>/s/ Chris Walls</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	

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes 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.

MAY 09 2013



Midwest Hose  
& Specialty, Inc.

INTERNAL HYDROSTATIC TEST CERTIFICATE		
Customer:	CACTUS	Customer P.O. Number: RIG#102
HOSE SPECIFICATIONS		
Type:	Rotary / Vibrator Hose GRADE E / API 7K	Hose Length: 35 FEET
I.D.	4 INCHES	O.D. 6.15 INCHES
WORKING PRESSURE	TEST PRESSURE	BURST PRESSURE
10,000 PSI	15,000 PSI	N/A PSI
COUPLINGS		
Part Number	Stem Lot Number	Ferrule Lot Number
E4.0X64WB E4.0X64WB	8099764 8099764	NQ745 NQ745
Type of Coupling:	Die Size:	
SWAGE-IT	6.62 INCHES	
PROCEDURE		
<i>Hose assembly pressure tested with water at ambient temperature.</i>		
TIME HELD AT TEST PRESSURE	ACTUAL BURST PRESSURE:	
12 1/2 MIN.	N/A PSI	
Hose Assembly Serial Number:	Hose Serial Number:	
190843	10037	
Comments: ASSET# M12079		
Date:	Tested:	Approved:
2/21/2013	Billy Balak	Phillip W. [Signature]



Midwest Hose & Specialty, Inc.

# Internal Hydrostatic Test Graph

February 12, 2013

Customer: Cactus

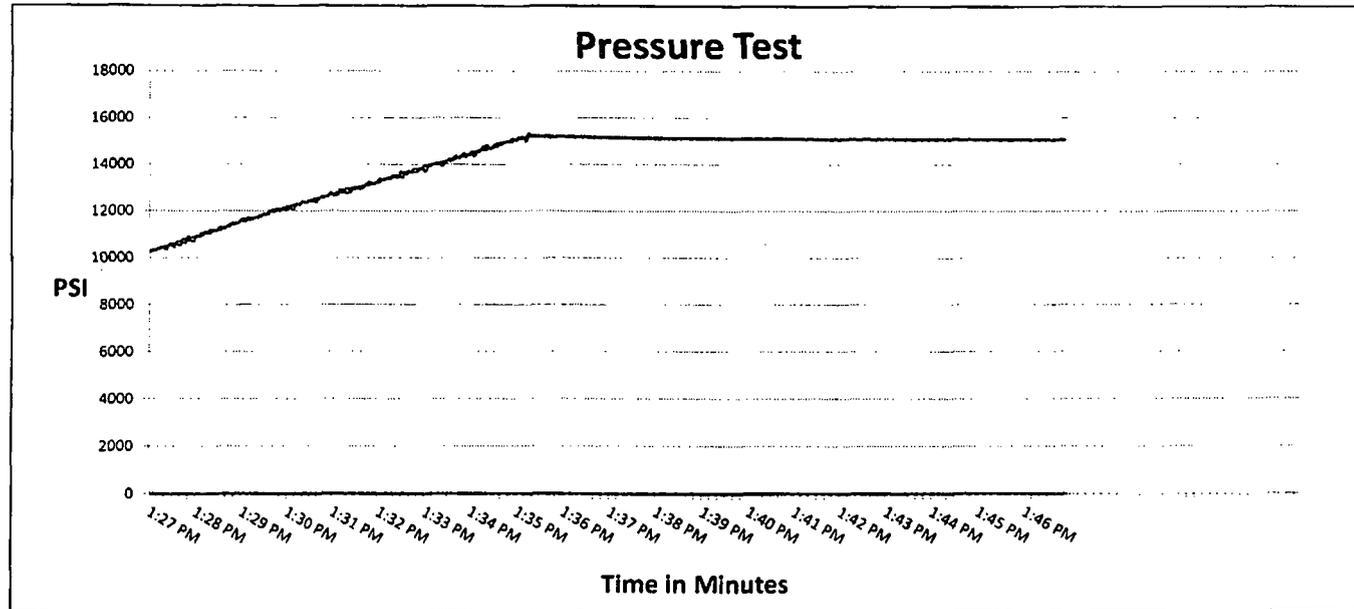
Pick Ticket #: 190843

### Hose Specifications

<b>Hose Type</b>	<b>Length</b>
E	35'
<b>I.D.</b>	<b>O.D.</b>
4"	6.15"
<b>Working Pressure</b>	<b>Burst Pressure</b>
10000 PSI	Standard Safety Multiplier Applies

### Verification

<b>Type of Fitting</b>	<b>Coupling Method</b>
4 1/16 10K	Swage
<b>Die Size</b>	<b>Final O.D.</b>
6.62"	6.65"
<b>Hose Serial #</b>	<b>Hose Assembly Serial #</b>
10037	190843



**Test Pressure**  
15000 PSI

**Time Held at Test Pressure**  
12 2/4 Minutes

**Actual Burst Pressure**

**Peak Pressure**  
15336 PSI

**Comments:** Hose assembly pressure tested with water at ambient temperature.

**Tested By:** Billy Balak

**Approved By:** Phil Maytubby

x Billy Balak

x Phil Maytubby

**Co-Flex line**  
**Conditions of Approval**

Variance approved to use flex line from BOP to choke manifold. Check condition of 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 exchanged 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).