

MAR 09 2015

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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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM122622
2. Name of Operator EOG RESOURCES INCORPORATED Contact: STAN WAGNER E-Mail: stan_wagner@eogresources.com		6. If Indian, Allottee or Tribe Name
3a. Address MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 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) Sec 36 T26S R33E SESW 330FSL 1760FWL		8. Well Name and No. ENDURANCE 36 STATE COM 2H
		9. API Well No. 30-025-40258-00-X1
		10. Field and Pool, or Exploratory BRADLEY
		11. County or Parish, and State LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 Drilling Operations
	<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 site is ready for final inspection.)

6/7/14 Spud 17-1/2" hole.
Ran 22 jts 13-3/8", 54.5#, J55 STC casing set at 924'.
Cement lead w/ 400 sx Class C, 13.5 ppg, 1.75 yield;
tail w/ 300 sx Class C, 14.8 ppg, 1.34 yield.
Circulated 214 sx cement to surface. WOC 24+ hrs.
6/8/14 Tested casing to 1500 psi for 30 minutes. Test good.
6/9/14 Resumed drilling 12-1/4" hole.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #249369 verified by the BLM Well Information System For EOG RESOURCES INCORPORATED, sent to the Hobbs Committed to AFMSS for processing by CATHY QUEEN on 06/12/2014 (140000405)		ACCEPTED FOR RECORD MAR 5 2015 <i>[Signature]</i>
Name (Printed/Typed) STAN WAGNER	Title REGULATORY ANALYST	
Signature (Electronic Submission)	Date 06/12/2014	THIS SPACE FOR FEDERAL OR STATE OFFICE USE
Approved By _____	Title _____	
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.		BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. 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.		Office _____

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MAR 10 2015

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MAR 09 2015

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
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SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM122622
2. Name of Operator EOG RESOURCES INCORPORATED Contact: STAN WAGNER E-Mail: stan_wagner@eogresources.com		6. If Indian, Allottee or Tribe Name
3a. Address MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-686-3689	7. If Unit or CA/Agreement, Name and/or No. ENDURANCE 36 STATE COM 2H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 36 T26S R33E SESW 330FSL 1760FWL		8. Well Name and No. ENDURANCE 36 STATE COM 2H
		9. API Well No. 30-025-40258-00-X1
		10. Field and Pool, or Exploratory BRADLEY
		11. County or Parish, and State LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 Drilling Operations
	<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 site is ready for final inspection.)

6/11/14
Ran 120 jts 9-5/8", 40#, (28) HCK55 & (92) J55 LTC casing set at 5140'. Cemented lead w/ 800 sx Class C, 12.7 ppg, 2.22 yield; tail w/ 200 sx Class C, 14.8 ppg, 1.35 yield. Circulated 211 sx cement to surface. WOC 18 hrs.
6/12/14
Tested casing to 1500 psi for 30 minutes. Test good. Resumed drilling 8-3/4" hole.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #250102 verified by the BLM Well Information System For EOG RESOURCES INCORPORATED, sent to the Hobbs Committed to AFMSS for processing by CATHY QUEEN on 06/19/2014 (14001175)		<div style="border: 2px solid black; padding: 5px; width: fit-content; margin: auto;"> <p>ACCEPTED FOR RECORD</p> <p>MAR 5 2015</p> <p><i>[Signature]</i></p> <p>BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE</p> </div>
Name (Printed/Typed) STAN WAGNER	Title REGULATORY ANALYST	
Signature (Electronic Submission)	Date 06/18/2014	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved By _____		Title _____
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 _____

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HOBBBS CD
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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		6. If Indian, Allottee or Tribe Name
		7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. ENDURANCE 36 STATE COM 2H	
2. Name of Operator EOG RESOURCES, INC.	Contact: STAN WAGNER E-Mail: stan_wagner@eogresources.com	9. API Well No. 30-025-40258
3a. Address P.O. BOX 2267 MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-686-3689	10. Field and Pool, or Exploratory BRADLEY; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 36 T26S R33E SENW 330FSL 1760FWL		11. County or Parish, and State LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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6/21/14 TD @ 17042' MD.
6/22/14 Ran 417 jts 5-1/2", 20#, HCP110 NSCC casing set at 17042'.
6/23/14 Cemented lead w/ 240 sx 50:50 Class H, 10.8 ppg, 3.68 yield;
middle w/ 200 sx 50:50 Class H, 11.9 ppg, 2.36 yield;
tail w/ 1750 sx 50:50:2 Class H, 14.2 ppg, 1.3 yield.
Pressured casing to 3109 psi to rupture cementing plug.
6/24/14 Released rig.

14. I hereby certify that the foregoing is true and correct.		Electronic Submission #250538 verified by the BLM Well Information System For EOG RESOURCES, INC., sent to the Hobbs Committed to AFMSS for processing by LINDA JIMENEZ on 10/08/2014	
Name (Printed/Typed) STAN WAGNER	Title REGULATORY ANALYST	ACCEPTED FOR RECORD MAR 5 2015 <i>D. Stan</i>	
Signature (Electronic Submission)	Date 06/24/2014		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved By _____	Title _____	BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE	
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**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****