Form 3160-5 HOBBS OCD					OCD-HOBBS			
August 2007)		FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010 5. Lease Serial No. NMNM104049 6. If Indian, Allottee or Tribe Name						
AUG 2 2 2016 B								
Do not use the								
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No.			
I. Type of Well ☐ Oil Well ☐ Gas Well ☑ Other: INJECTION					Well Name and No. WEST CORBIN FEDERAL 16			
Name of Operator EOG RESOURCES INCORP	Contact:	STAI ner@e	N WAGNER eogresources.com		9. API Well No. 30-025-30683-0	00-S2		
3a. Address		3b. Phone No. (include area code) Ph: 432-686-3689			10. Field and Pool, or Exploratory CORBIN			
MIDLAND, TX 79702		and the second second			SWD			
4. Location of Well (Footage, Sec., 7	C., R., M., or Survey Description	n)			11. County or Parish, and State			
Sec 7 T18S R33E SWSE 800FSL 1980FEL			-		LEA COUNTY, NM			
		'						
12. CHECK APPI	ROPRIATE BOX(ES) TO	O INI	DICATE NATURE OF	NOTICE, R	EPORT, OR OTHE	ER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION							
□ Notice of Intent	☐ Acidize	□ Deepen [☐ Produc	tion (Start/Resume)	■ Water Shut-Off		
	☐ Alter Casing		☐ Fracture Treat	☐ Reclamation		■ Well Integrity		
Subsequent Report ■	☐ Casing Repair		■ New Construction	□ Recom	plete	☐ Other		
☐ Final Abandonment Notice	☐ Change Plans		□ Plug and Abandon	□ Temporarily Abandon				
	☐ Convert to Injection		☐ Plug Back	■ Water Disposal				
13. Describe Proposed or Completed Op If the proposal is to deepen direction. Attach the Bond under which the wo following completion of the involved testing has been completed. Final Al determined that the site is ready for f 6/8/16 MIRU to repair hole in POOH w/ tubing and packer. 6/9/16 Replaced 2 jts 2-7/8" I Performed MIT test to 520 psi Returned well to injection.	ally or recomplete horizontally, rk will be performed or provide to operations. If the operation re bandonment Notices shall be fil inal inspection.) tubing. RIH and unset pa PC injection tubing. Set p	give s the Be sults in ed only	subsurface locations and meast ond No. on file with BLM/BI/ n a multiple completion or rec y after all requirements, include	ured and true v A. Required su ompletion in a	ertical depths of all perti- bsequent reports shall be new interval, a Form 316	nent markers and zones. e filed within 30 days 60-4 shall be filed once		

14. I hereby certify that t	he foregoing is true and correct. Electronic Submission #342751 verifie For EOG RESOURCES INCOR Committed to AFMSS for processing by PRI	PORAT	ED, sent to the h	Hobbs						
Name (Printed/Typed) STAN WAGNER			Title REGULATORY ANALYST							
Signature (Electronic Submission)			06/21/2016	06/21/2016ACCEPTED FOR RECORD						
	THIS SPACE FOR FEDERA	L OR	STATE OFFIC	CE VSE						
Approved By		Title		AUG 16 2	2016	Date				
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.			е	PR Juras						
Title 18 U.S.C. Section 100 States any false, fictitious	1 and Title 43 U.S.C. Section 1212, make it a crime for any pe or fraudulent statements or representations as to any matter w	erson kno ithin its j	wingly and willfull jurisdiction.	y to make to any department	opagen	ex of the United				

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

Accepted for Record Only

MUSJOCD 8/22/2016

