

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

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

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

EOG Resources Inc.

3a. Address

P.O. Box 2267 Midland, Texas 79702

3b. Phone No. (include area code)

432 686 3689

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**2200' FNL & 2500' FWL U/L F Sec 13, T-25-S, R-33-E
660' FSL & 2000' FWL U/L N Sec 07, T-25-S, R-34-E**

**Subject to
Like Approval
By State**

5. Lease Serial No.

NM-108500

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No

Red Hills North Unit

8. Well Name and No.

Red Hills North Unit No. 309

9. API Well No.

30-025-36499

10. Field and Pool, or Exploratory Area

Red Hills; Bone Spring

11. County or Parish, State

Lea NM

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

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

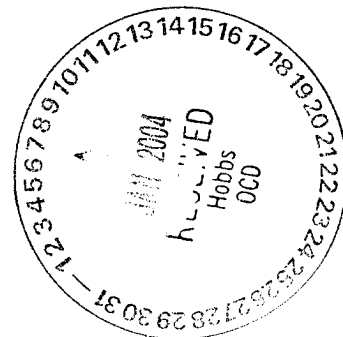
- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <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.)

This Sundry being filed to change the proposed BHL to:

660' FSL & 2000' FWL U/L N Sec 07, T-25-S, R-34-E

C-102 Attached.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Stan Wagner

Title

Regulatory Analyst

Date

432 686 3689

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

/s/ JOE G. LARA

FIELD MANAGER

Date

JAN 06 2004

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

CARLSBAD FIELD 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.

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
1301 W. Grand Avenue, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico

Energy, Minerals, and Natural Resources Department

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, New Mexico 87505

Form C-102

Revised August 15, 2000

Submit to Appropriate District Office

State Lease - 4 copies

Fee Lease - 3 copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-36499	² Pool Code 51020	³ Pool Name Red Hills Bone Spring
⁴ Property Code 26406	⁵ Property Name RED HILLS NORTH UNIT	
⁷ OGRID No. 7377	⁸ Operator Name EOG RESOURCES	⁶ Well Number 309
		⁹ Elevation 3350'

¹⁰ Surface Location

UL or lot no. F	Section 13	Township 25 SOUTH	Range 33 EAST, N.M.P.M.	Lot Idn	Feet from the 2200'	North/South line NORTH	Feet from the 2500'	East/West line WEST	County LEA
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Dedicated Acres 80									
¹³ Joint or Infill									
¹⁴ Consolidation Code									
¹⁵ Order No.									

NO ALLOWABLE WELL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<p>¹⁶</p> <p>NAD 27 NM E ZONE X = 749891 Y = 412544 N = 32.13162 W = 103.52607</p>	<p>¹⁷ OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>Stan Wagner</i> Signature Stan Wagner Printed Name Regulatory Analyst Title 12/18/03 Date</p> <p>¹⁸ SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>OCTOBER 14, 2003 Date of Survey Signature and Seal of Professional Surveyor <i>V. L. Bezner</i> Certificate Number V. L. BEZNER R.P.S. #7920 JOB #91778-A / 22NE / E.U.O.</p>
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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

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⁴ Property Code 26406	⁵ Property Name RED HILLS NORTH UNIT	
⁷ OGRID No. 7377	⁸ Operator Name EOG RESOURCES	⁶ Well Number 309
		⁹ Elevation 3350'

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
	18	25 SOUTH	33 EAST, N.M.P.M.						LEA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Dedicated Acres 80		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

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<p>¹⁶</p> <p>TERMINUS HOLE INFORMATION PROVIDED BY EOG RESOURCES, INC.</p>	<p>¹⁷ OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>Stan Wagner</i> Signature Stan Wagner Printed Name Regulatory Analyst Title 12/18/03 Date</p> <p>¹⁸ SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>OCTOBER 14, 2003 Date of Survey Signature and Seal of Professional Surveyor</p> <p>Certificate Number V. L. BEZNER R.P.S. #7920 JOB #91778-B / 22NE / E.U.O.</p>
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⁴ Property Code 26406	⁵ Property Name RED HILLS NORTH UNIT	
⁷ OGRID No. 7377	⁸ Operator Name EOG RESOURCES	⁶ Well Number 309
		⁹ Elevation 3336'

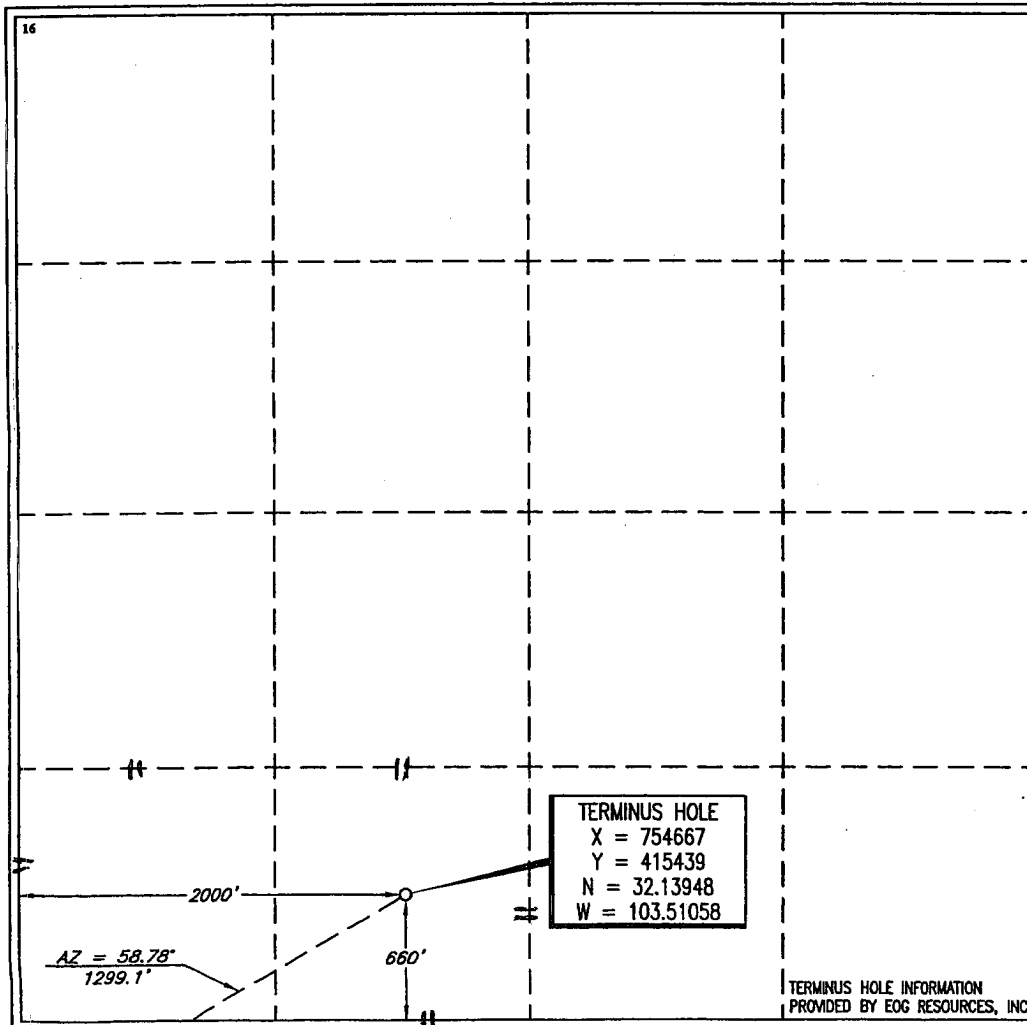
¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	7	25 SOUTH	34 EAST, N.M.P.M.		660'	SOUTH	2000'	WEST	LEA
¹² Dedicated Acres 80		¹³ Joint or Infill	¹⁴ Consolidation Code		¹⁵ Order No.				

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¹⁷ OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Stan Wagner
Signature

Stan Wagner
Printed Name

Regulatory Analyst
Title

12/18/03
Date

¹⁸ SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

OCTOBER 15, 2003

Date of Survey

Signature and Seal of Professional Surveyor

Stan Wagner
Signature
V. L. HEZNER
Certificate Number
R.P.S. #7920

JOB # 91778-C / 22NE / E.U.O.

REVISED: 12/04/03; J.C.P.