

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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*

RECEIVED
SEP 27 2010
HOBBSOCD

SUBMIT IN TRIPLICATE - Other instructions on page 2

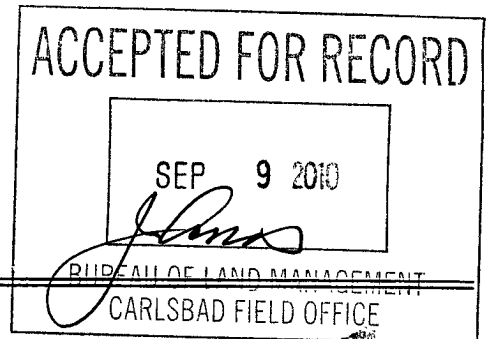
1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Water Injection		5. Lease Serial No NM18640
2. Name of Operator EOG Resources Inc.		6. If Indian, Allottee or Tribe Name
3a. Address P.O. Box 2267 Midland, Texas 79702	3b. Phone No. (include area code) 432-686-3689	7. If Unit or CA/Agreement, Name and/or No. Red Hills North Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) S/L 562 FSL & 509 FWL, Sec 8, T25S, R34E BHL 121 FNL & 2400 FEL, Sec 18, T25S, R34E		8. Well Name and No. Red Hills North 811
		9. API Well No. 30-025-32980
		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	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 repair leak
	<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 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.)

8/2/10 MIRU to repair tubing/packer leak. POOH w/ 2-7/8" IPC injection tubing, laydown.
8/3/10 RIH w/ casing inspection log. Log casing from 11018' to 7980'. POOH and laydown logging tool.
RIH w/ 2-7/8" workstring, latch to on/off tool @ 11118'. Test casing.
8/4/10 POOH and laydown workstring. All tests good.
8/6/10 RIH w/ 2-7/8" IPC tubing and Baker nickel plated packer. Packer set at 11048'.
8/7/10 Rig down. RUN MIT test to 500 psi. MIT test good.
Return to injection.



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 8/26/10

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by ELG 9-27-10	Title	Date SEP 27 2010
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 UC FIELD OFFICE	

