

DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CCW-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.**

5. Lease Serial No.  
NMNM30398

6. If Indian, Allottee or Indian Name

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

8. Well Name and No.  
CAVINESS FED 02

9. API Well No.  
30-025-29428-00-S1

10. Field and Pool, or Exploratory  
MESCALERO ESCARP

11. County or Parish, and State  
LEA COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
EOG RESOURCES INCORPORATED

Contact: BEV HATFIELD  
E-Mail: beverly\_hatfield@eogresources.com

3a. Address  
P. O. BOX 2267  
MIDLAND, TX 79702

3b. Phone No. (include area code)  
Ph: 915.686.3689  
Fx: 915.686.3765

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

Sec 11 T18S R33E SESW 660FSL 1980FWL

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 type="checkbox"/> Other	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" 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 recomple 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 recomple 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.)

EOG RESOURCES RESPECTFULLY REQUESTS T&A STATUS ON THIS PROPERTY WHICH WAS PURCHASED LAST YEAR FROM BURLINGTON. EOG IS REVIEWING POSSIBLE USE OF THIS WELLBORE.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #8854 verified by the BLM Well Information System  
For EOG RESOURCES INCORPORATED, sent to the Hobbs  
Committed to AFMSS for processing by Linda Askwig on 11/13/2001 (02LA0010SE)

Name (Printed/Typed) BEV HATFIELD

Title AUTHORIZED SIGNATURE

Signature (Electronic Submission)

Date 11/12/2001

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

Title

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.

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.

**\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\***

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