Submit 3 Copies to Appropriate	District	State of New	Mexico			Form C-10	
Office		Energy, Minerals &	Natural Resources		Revised	March 25, 199	
District I 1625 N. French Dr., Hobbs, NM	99940			WEL	L API NO.		
District II		ONCED) (ATION	DI 110101		30 025 31044		
OLE GONGLINATION DIVISION							
District III					dicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM District IV	1 87410	Santa Fe, NM 87	505		ATE X FEE		
2040 South Pacheco, Santa Fe,	NM 87505			6. S	ate Oil & Gas Lease No.		
				j	LG4087		
SUNDE	RY NOTICES AND REPOR	TS ON WELLS		7. Le	ease Name Or Unit Agree	ement Name	
(DO NOT USE THIS FORM FOR DIFFERENT RESERVOIR. USE PROPOSALS.)	R PROPOSALS TO DRILL E "APPLICATION FOR PEI	OR TO DEEPEN C RMIT" (FORM C-10	R PLUG BACK TO A 1) FOR SUCH		STATE 16		
Type of Well: Oil Well X	Gas Well 🗍 🔘	ther					
Name of Operator EOG Resources, in				8. W	ell No.		
Address of Operator	IIC.				7		
P.O. Box 2267, Midland, TX 79702					9. Pool Name or Wildcat		
Well Location					CORBIN, WOLFCA	MP, SOUTH	
Unit Letter P	510 feet from the Se	OUTHline and	660 f	eet from the	EAST line		
Section 16	Township 18	ss	Range 33E	NILADEA	•		
10.	Elevation (Show whether D	R, RKB, RT, GR, e.	fc.)	NMPM	County LEA		
11 Check Appropri	RKB 3878						
NOTICE OF INTER	riate Box to Indicate Nature	of Notice, Report o	1	01100000100100			
PERFORM REMEDIAL WORK	PLUG AND ABAI	NDON 🔲	REMEDIAL WORK	SUBSEQUEN	REPORT OF: ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILL	LING OPNS 🔲	PLUG AND		
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AND		ABANDONMENT		
OTHER:			OTHER: A	DDITIONAL WOLI	FCAMP PAY	\mathbf{x}	
12. Describe proposed or complete	ted operations. (Clearly sta	ate all pertinent deta	ils, and give pertinent	dates including or	diameter de de la		
of starting any proposed work or recompilation.). SEE RULE 1103. For M	fultiple Completions	Attach wellbore diag	gram of proposed c	ompletion		
2/18/2001 PERFD WOLFCAM	P 2 SPF W/4" CSG GUN A	AS FOLLOWS: 10,8	90-11,175', TOTAL 12	22 HOLES.			
2/20/2001 ACIDIZED WOLFCA	AMP PERFS 10,890-11,17	5' W/6000 GALS 15	% NEFE HCL ACID.				
2/22/2001 RAN 333 JTS 6.5 No							
2/24/2001 STARTED WELL PL	JMPING TO BATTERY.						
hereby certify that the information	above is true and complete	to the best of my k	nowledge and belief.				
GIGNATURE DE COMPANION DE COMPA	Latfuli	TITLE SR. REG	ULATORY ADMIN.	DATE	9/15/2001		
ype or print name This space for State use)	U .		Telephone	e No. 915 686	-3689		
This space for state use)					Crr. N		
PPROVED BY conditions of approval, if any:		TITLE	 	DATE	SF2:::	200j	
		FLTE	DELLO DELLA	7 = , = , i l			