

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
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.

5. Lease Serial No.
NMNM0557371

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

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

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
AAO FEDERAL SWD 1

2. Name of Operator
APACHE CORPORATION
Contact: FATIMA VASQUEZ
E-Mail: fatima.vasquez@apachecorp.com

9. API Well No.
30-015-42549

3a. Address
303 VETERANS AIRPARK LN
MIDLAND, TX 79705

3b. Phone No. (include area code)
Ph: 432-818-1015

10. Field and Pool, or Exploratory
REDLAKE; GL-Y, NE (96836)

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 1 T18S R27E SWNE

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

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 Venting and/or Flaring
	<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 recomplate 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 recomplate 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.)

Apache is requesting permission to temporarily flare 2.0M mcf a day for 90 days from 03/04/2015-06/03/2015 on the wells listed below due to Frontier not being able to take gas at the new battery. Gas will be measured prior to flaring.

- AAO FEDERAL #014 30-015-42024 -
- AAO FEDERAL #015 30-015-42025 -
- AAO FEDERAL #016 30-015-42026 -
- AAO FEDERAL #017 30-015-42027 -
- AAO FEDERAL #018 30-015-42035 -
- AAO FEDERAL #019 30-015-42051 -
- AAO FEDERAL #020 30-015-42036 -
- AAO FEDERAL #021 30-015-42334 -

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

**NM OIL CONSERVATION
ARTESIA DISTRICT**

JUN 25 2015

CSD 7/23/15
Accepted for record
NMOC

RECEIVED

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

**Electronic Submission #293805 verified by the BLM Well Information System
For APACHE CORPORATION, sent to the Carlsbad
Committed to AFSS for processing by DEBORAH HAM on 05/11/2015 ()**

Name (Printed/Typed) FATIMA VASQUEZ

Title REGULATORY ANALYST II

Signature (Electronic Submission)

Date 03/04/2015

APPROVED

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

JUN 19 2015

Approved By _____

Title _____

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 _____

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Additional data for EC transaction #293805 that would not fit on the form

32. Additional remarks, continued

AAO FEDERAL #022 30-015-42335
AAO FEDERAL #023 30-015-42336-
AAO FEDERAL #024 30-015-42337-
AAO FEDERAL #025 30-015-42361-
AAO FEDERAL #026 30-015-42338-
AAO FEDERAL #027 30-015-42359-
AAO FEDERAL #028 30-015-42358-
AAO FEDERAL #029 30-015-42339-
AAO FEDERAL #030 30-015-42360-

1-1062412

**AAO Federal SWD 1
30-015-42549
Apache Corporation
June 19, 2015
Conditions of Approval**

1. Report all volumes on OGOR B as disposition code 08.
2. Comply with NTL-4A requirements
3. Subject to like approval from NMOCD
4. Flared volumes will still require payment of royalties
5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5. Include meter serial number on sundry.
6. This approval does not authorize any additional surface disturbance.
7. Submit updated facility diagram as per Onshore Order #3.
8. Approval not to exceed 90 days for date of approval.
9. Submit Subsequent Report to this sundry with actual volumes of gas flared monthly on 3160-5 (sundry notice).
10. If flaring is still required past 90 days submit new request for approval.
11. If a portable unit is used to flare gas it must be monitored at all times.
12. Comply with any restrictions or regulations when on State or Fee surface.

JAM 061915