

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED  
OMB NO. 1004-0137  
Expires: October 31, 2014

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well ☐ Oil Well ☐ Gas Well ☐ Dry ☒ Other  
b. Type of Completion: ☐ New Well ☐ Work Over ☐ Deepen ☐ Plug Back ☐ Diff. Resyr. **Other: Convert to Injection**

2. Name of Operator  
Apache Corporation (873)

3. Address 303 Veterans Airpark Lane Suite 1000  
Midland TX 79705

3a. Phone No. (include area code)  
432/818-1062

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*  
At surface 660' FSL & 330' FEL UL P Sec 11 T21S R37E  
At top prod. interval reported below  
At total depth

5. Lease Serial No.  
LC-032096B

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.  
EBDU

8. Lease Name and Well No.  
East Blinebry Drinkard Unit (EBDU) #022

9. API Well No.  
30-025-06528

10. Field and Pool or Exploratory  
Eunice; B-T-D, North (22900)

11. Sec., T., R., M., on Block and  
Survey or Area UL P Sec 11 T21S R37E

12. County or Parish  
Lea County

13. State  
NM

14. Date Spudded  
06/15/1956

15. Date T.D. Reached  
07/04/1956

16. Date Completed 01/02/2014  
☐ D & A ☒ Ready to Prod.

17. Elevations (DF, RKB, RT, GL)\*  
3429' GL

18. Total Depth: MD 5900'  
TVD

19. Plug Back T.D.: MD 5897'  
TVD

20. Depth Bridge Plug Set: MD  
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)  
CBL

22. Was well cored? ☒ No ☐ Yes (Submit analysis)  
Was DST run? ☒ No ☐ Yes (Submit report)  
Directional Survey? ☒ No ☐ Yes (Submit copy)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12-1/4"	8-5/8"	24#	Surface	1400'		750 s Class C			
7-7/8"	5-1/2"	14/15.5#	Surface	5899'		3200 sx Class C		2250' (CBL)	

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2-3/8"	5750'	5668'						

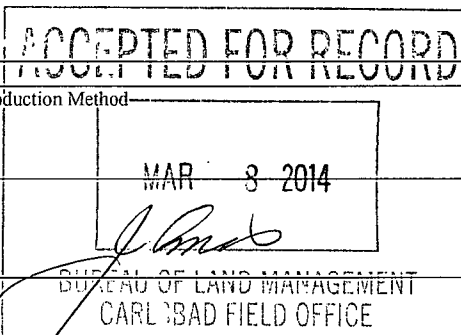
Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Blinebry			5704' - 5883'	4 SPF		Injecting
B)						
C)						
D)						

Depth Interval	Amount and Type of Material

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
1/2/2014		24	→						Injection Packer
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→					Injecting	

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

\*(See instructions and spaces for additional data on page 2)



WFX-909

MAR 25 2014

ONE/ADMS TEST 03/18/14

dm

## 28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

## 28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

## 29. Disposition of Gas (Solid, used for fuel, vented, etc.)

SOLD

## 30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
BUREAU OF LAND MGMT CARLSBAD FIELD OFFICE	2014 JAN 23 PM 3:59	RECEIVED			

## 32. Additional remarks (include plugging procedure):

## 33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☒ Electrical/Mechanical Logs (1 full set req'd.)
 ☐ Geologic Report
 ☐ DST Report
 ☐ Directional Survey
- ☐ Sundry Notice for plugging and cement verification
 ☐ Core Analysis
 ☐ Other:

## 34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)\*

Name (please print) Reesa FisherTitle Sr Staff Reg Analyst

Signature

Reesa FisherDate 01/22/2014

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.

(Continued on page 3)

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