

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

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: INJECTION		5. Lease Serial No. NMNM90161 ✓
2. Name of Operator APACHE CORPORATION		6. If Indian, Allottee or Tribe Name
Contact: REESA FISHER E-Mail: Reesa.Fisher@apachecorp.com		7. If Unit or CA/Agreement, Name and/or No. NMNM120042X ✓
3a. Address 303 VETERANS AIRPARK LANE SUITE 3000 MIDLAND, TX 79705	3b. Phone No. (include area code) Ph: 432-818-1062	8. Well Name and No. WEST BLINEBRY DRINKARD UNIT 192 ✓
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 8 T21S R37E NWSE 1865FSL 1985FEL ✓		9. API Well No. 30-025-42494 ✓
		10. Field and Pool or Exploratory Area EUNICE; B-T-D, NORTH
		11. County or Parish, State LEA COUNTY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Production Start-up
	<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 recomplete 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must 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 completed this well, as follows: (RR 3/18/2017) (WFX-960)

3/21/2017 MIRUSU RIH w/tbg, circ well clean.
3/22/2017 Log - ETOC @ 190'.
Perf Drinkard @ 6662'-6761'.
Acidize Drinkard w/10,000 gal 15% acid.
3/23/2017 PU Inj Pkr & set @ 6630'. Test csg - tested good.
3/24/2017 POOH LD WS SD due to high wind.
3/27/2017 RIH w/204 jts 2-3/8" IPC tbg. Circ pkr fluid.
Tested csg - tested good. Waiting to run MIT w/OCD witness.

3/31/2017 RUN OCD witnessed MIT (chart attached). Put well on injection.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #372525 verified by the BLM Well Information System For APACHE CORPORATION, sent to the Hobbs Committed to AFMSS for processing by DEBORAH MCKINNEY on 04/11/2017 ()	
Name (Printed/Typed) REESA FISHER	Title SR STAFF REGULATORY ANALYST
Signature (Electronic Submission)	Date 04/10/2017

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 _____		

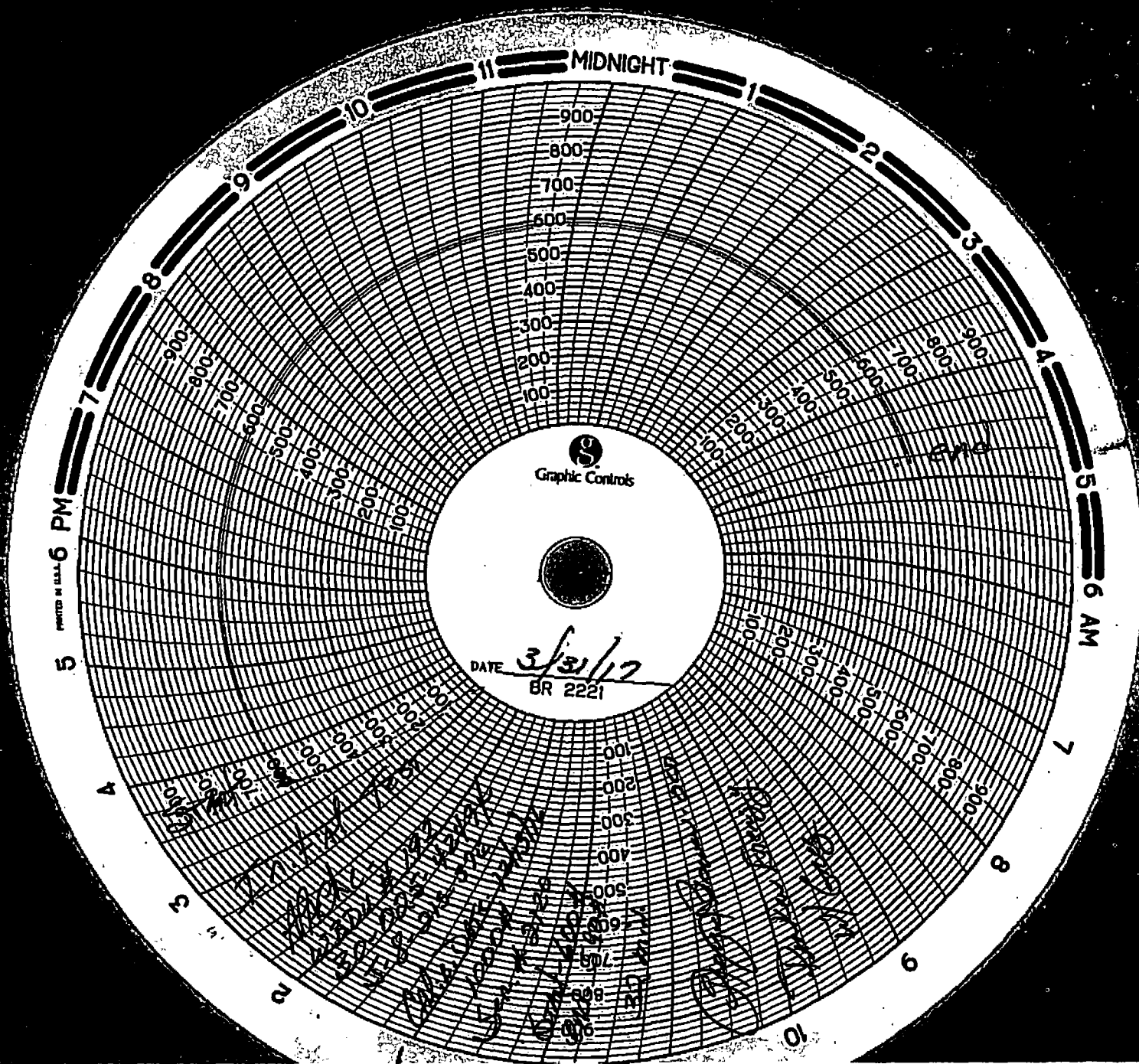
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

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

Kg





State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Apache		API Number 30-025-42494	
Property Name WBD4		Well No. 192	

2 Surface Location

UL - Lot J	Section 8	Township 21S	Range 37E	Feet from 1865	N/S Line S	Feet From 1995	E/W Line E	County Lea
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR INJ	SWD	OIL	PRODUCER GAS	DATE 3/31/17
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	0	—	—	0	0
Flow Characteristics					
Pull	Y/N	Y/N	Y/N	Y/N	CO2 —
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR —
Surges	Y/N	Y/N	Y/N	Y/N	GAS —
Down to nothing	Y/N	Y/N	Y/N	Y/N	Type of fluid injected for Waterflood if applies.
Gas or Oil	Y/N	Y/N	Y/N	Y/N	
Water	Y/N	Y/N	Y/N	Y/N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Initial Test

Signature:		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test
E-mail Address:		
Date: 3/31/17	Phone:	
Witness: [Signature]		

INSTRUCTIONS ON BACK OF THIS FORM