

Submit 1 Copy To Appropriate District
Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103

October 13, 2009

WELL API NO.

30-025-37934

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

North Monument G/SA Unit Blk. 6

8. Well Number 340

9. OGRID Number 873

10. Pool name or Wildcat

Eunice Monument G/SA

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK INTO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-102) FOR SUCH
PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐

2. Name of Operator

Apache Corp.

3. Address of Operator

P O box Drawer D Monument NM 88265

4. Well Location

Unit Letter O: 165 feet from the S line and 2630 feet from the E line

Section 20 Township 19S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ P AND A ☐

CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: ☒

TA Test

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MIRU Sunset Hot Oilier.

Perform Bradenhead test.

Pressure up on csg to 600# for 32 minutes ending pressure 595#. Record test on chart.

Release pressure. Request TA extension.

FINAL TA STATUS- EXTENSION

Approval of TA EXPIRES: 9-1-21

Well needs to be PLUGGED OR RETURNED
to PRODUCTION

BY THE DATE STATED ABOVE: 27

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Joel Sisk

TITLE Foreman

DATE 8/31/2020

Type or print name

Joel Sisk

E-mail address:

joel.sisk@apacheccorp.com

PHONE: 575-441-0793

For State Use Only

APPROVED BY:

Kenny Junt

TITLE

C O A

DATE

9-18-20

Conditions of Approval (if any)

District I
1621 N French Dr., Hobbs, NM 88240
Phone: (575) 397-6151 Fax (575) 397-0720

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

HOB

SEP

RE

BRADENHEAD TEST REPORT

Operator Name <i>Apache Corp</i>	API Number <i>30-025-37934</i>
Property Name <i>NMGSAU</i>	Well No. <i>340</i>

Surface Location

UL - Lot <i>0</i>	Section <i>20</i>	Township <i>19S</i>	Range <i>37E</i>	Feet from <i>165</i>	N/S Line <i>5</i>	Feet from <i>2430</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL <input checked="" type="radio"/> YES	NO	SHUT-IN <input checked="" type="radio"/> YES	NO	INJ <i>NA</i>	SWD	PRODUCER <input checked="" type="radio"/> OIL	GAS	DATE <i>8-31-20</i>
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OBSERVED DATA

	(A) Surface	(B) Interf(1)	(C) Interf(2)	(D) Prod Cmg	(E) Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	CO2
Steady Flow	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	WTR
Surges	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	GAS
Down to nothing	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	Type of fluid injected for
Gas or Oil	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	Waterflood if
Water	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	applicable

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

Signature <i>Joel Sisk</i>	OIL CONSERVATION DIVISION
Printed name: <i>Joel Sisk</i>	Entered into RBDMS
Title <i>Foreman</i>	Re-test
E-mail Address: <i>joel.sisk@apachecorp.com</i>	
Date: <i>8-31-20</i>	
Phone: <i>575-441-0793</i>	
Witness: <i>Juan arreola</i>	

INSTRUCTIONS ON BACK OF THIS FORM

