

Santa Fe Main Office
Phone: (505) 476-3441
General Information
Phone: (505) 629-6116

State of New Mexico
Energy, Minerals and Natural Resources

Online Phone Directory Visit:
<https://www.emnrd.nm.gov/ocd/contact-us/>

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

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTION		WELL API NO. 30-025-06615
2. Name of Operator Apache Corporation		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 303 Veteran's Airpark Lane, Suite 1000, Midland, TX 79705		6. State Oil & Gas Lease No. B0-0085
4. Well Location Unit Letter L : 1980 feet from the S line and 660 feet from the W line Section 16 Township 21S Range 37E NMPM County LEA		7. Lease Name or Unit Agreement Name West Blinebry Drinkard Unit [37346]
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3470' GR		8. Well Number 075 9. OGRID Number 873
10. Pool name or Wildcat EUNCIE; BLI-TU-DR, NORTH [22900]		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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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.

Hilcorp is requesting permission to rig up to repair a well that failed its 2025 MIT. Please see attached documents for the proposed work plan and current/proposed wellbore diagram.

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 Alicia Fulton TITLE EHS Regulatory Advisor DATE 8/28/25

Type or print name Alicia Fulton E-mail address: alicia.fulton@apachecorp.com PHONE: 432-818-1088

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____



Hilcorp Energy Company

PROPOSED PROCEDURE TO REPAIR

WEST BLINEBRY DRINKARD UNIT #75 (30-025-06615)

1. MIRU
2. ND WELLHEAD. NU BOPD. TEST BOP.
3. RELEASE PACKER.
4. PULL TUBING OUT OF THE HOLE WHILE SCANNING. ENSURE THAT THE SCANNER IS CALIBRATED FOR LINED TUBING. LAY DOWN ALL RED AND GREEN BAND JOINTS.
5. RUN IN THE HOLE WITH A PACKER AND RBP. SET RBP AT LEAST 100' ABOVE TOP PERFS. SET PACKER. LOAD & TEST CASING TO 550 PSI. POOH.
6. RUN BACK IN THE HOLE WITH A BIT AND BAILER. CLEAN OUT THE WELLBORE TO THE PBTD. POOH AND LAY DOWN ALL TOOLS.
7. RUN IN HOLE WITH AN INJECTION PACKER WITH PUMP OUT PLUG. SET PACKER WITHIN 100' OF TOP PERF.
8. LOAD AND TEST CASING TO 550 PSI FOR 30 MINUTES. PULL OUT OF THE HOLE AND LAY DOWN WORK STRING.
9. HYDROTEST INJECTION TUBING WHILE RUNNING IN THE HOLE. (ANY JOINTS THAT NEED TO BE REPLACED, SHOULD BE REPLACED WITH LIKE TUBING, 2.375".) CIRCULATE PACKER FLUID. LATCH ONTO PACKER. PUMP OUT PLUG.
10. CONTACT NMOCDC WITH AT LEAST 24 HOURS NOTICE, TO SCHEDULE MIT TEST. RUN MIT AT 550 PSI FOR 30 MINUTES AND SUBMIT PASSING TEST AS SOON AS POSSIBLE.
11. RDMO

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CONDITIONS

Action 501055

CONDITIONS

Operator: APACHE CORPORATION 303 Veterans Airpark Ln Midland, TX 79705	OGRID: 873
	Action Number: 501055
	Action Type: [C-103] NOI Workover (C-103G)

CONDITIONS

Created By	Condition	Condition Date
anthony.harris	Post workover MIT required with OCD witness	2/24/2026
anthony.harris	No Tubing Upsize permitted	2/24/2026
anthony.harris	Submit post-workover C-103 Subsequent Report and attach an updated wellbore diagram showing casing, tubing, packer and perforation details and applicable depths.	2/24/2026