

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

JUN 04 2010

FORM APPROVED
OMB No 1004-0137
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
LC-032096B

6 If Indian, Allottee or Tribe Name
NA

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1 Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Apache Corporation

3a. Address
6120 S Yale Avenue, Suite 1500
Tulsa, OK 74136-4224

3b. Phone No (include area code)
918-491-4864

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

8 Well Name and No.
East Blinebry Drinkard Unit 080

9. API Well No.
30-025-39674

10. Field and Pool or Exploratory Area
Eunice; Bli-Tu-Dri, North

11. Country or Parish, State
Lea County, New Mexico

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 checked="" 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"/> 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 type="checkbox"/> Other
	<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 recomple 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 recomple 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.)

This well was completed via the following procedure:

- 4/13/10 Perf Drinkard @ 6554-56, 67-70, 6626-29, 33-36, 45-48, 58-64, 71-74, 6710-15' w/ 2 SPF, 72 holes.
- 4/14/10 Acid Drinkard w/ 3000 gals 15% HCl.
- 4/15/10 Frac Drinkard w/ 48K gals gel and 63K # 20/40 sand. Set CBP @ 6506'.
Perf Tubb @ 6259, 61, 67, 69, 74, 81, 83, 88, 94, 96, 6301, 11, 14, 25, 27, 29, 6418-24, 31-33, 46-48, 52-54' w/ 2 SPF, 64 holes.
Acid Tubb w/ 3000 gals 15% HCL. Frac Tubb w/ 49K gals gel, 78K # 20/40. Set CBP @ 6200'.
Perf Lower Blinebry @ 5930, 32, 36, 41, 45, 53, 56, 64, 66, 68, 6008, 18, 26, 32, 38, 40, 65, 67, 75, 82, 85, 90, 6104, 10, 18, 25, 51, 53, 55' w/ 2 SPF, 58 holes.
- 4/16/10 Acid Lower Blinebry w/ 3000 gals 15% HCl. Frac Lower Blinebry w/ 52K gals gel, 22K # 20/40 & 73.5 # 16/30.
Set CBP @ 5870'. Perf Upper Blinebry @ 5624, 30, 60, 63, 78, 88, 93, 95, 5704, 09, 50, 55, 62, 67, 72, 74, 77, 83, 85, 88, 5801, 08, 12, 14, 16, 21, 31, 33' w/ 2 SPF, 56 holes.
Acid Upper Blinebry w/ 3000 gals 15% HCl.
Frac Upper Blinebry w/ 74K gals gel, 22.5K # 20/40 & 128K # 16/30.
- 4/19/10 DO CBP's @ 5870', 6200', 6506'. Circ clean to PBD @ 6745'.
- 4/20/10 RIH w/ production tubing to 6670'. RIH w/ pump and rods.
- 4/21/10 Set 640 pumping unit. Place on production Blinebry/Tubb/Drinkard per R-12538. No DHC required for this pool (22900).

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed)
Sophie Mackay Title Engineering Technician

Signature *Sophie Mackay* Date 05/07/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD

MAY 29 2010

[Signature]

CARLSBAD FIELD OFFICE

PETROLEUM ENGINEER

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 _____

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)

[Signature]
JUL 13 2010