HOBBS OCD

UNITED STATES

FORM APPROVED

(August, 2007)	DEPARTMENT OF BUREAU OF LAND	OMB No. 1004- 0137 Expires: July 31, 2010							
SUNDRY NOTICES AND REPORTS ON WELRSCEIVED Do not use this form for proposals to drill or to re-enter an						5. Lease Serial No. NMLC 031741A 6. If Indian, Allottee, or Tribe Name			
abandoned well. Use Form 3160-3 (APD) for such proposals.					, , , , , , , , , , , , , , , , , , ,				
SUBMIT IN TRIPLICATE - Other Instructions on page 2.					7. If Unit or CA. Agreement Name and/or No.				
1. Type of Well X Oil Well Gas Well Other					WBDU NM120042X 8. Well Name and No. West Blinebry Drinkard Unit (WBDU) #105				
								2. Name of Operator Apache Corporation (873)	
3a. Address	3b. I	. Phone No. (include area code)		30-025-40480 10. Field and Pool, or Exploratory Area					
303 Veterans Airpark Lane Suite 1000 Midland TX 79705			•				18-1062		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Lat.		Eunice; B-T-D, North (22900)				
330' FNL & 2550' FWL UL C Sec 8 T21S R37E			Long.		l '	11. County or Parish, State Lea County NM			
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DA						· · · · · · · · · · · · · · · · · · ·			
TYPE OF SUBMISSION	(0) 10 11/12/11/11/11/11			· · · · · · · · · · · · · · · · · · ·					
THE OF SOBMISSION	TYPE OF SUBMISSION TYPE OF ACTION								
Notice of Intent	Acidize	Deepe	n	Production (Sta	art/ Resume)	Water Shut-off			
	Altering Casing	Fractu	re Treat	Reclamation		Well In	tegrity		
X Subsequent Report	Casing Repair	New 6	Construction	Recomplete		X Other	WORKOVER		
	Change Plans	Plug a	nd abandon	Temporarily At	oandon				
Final Abandonment Notice Convert to Injection		Plug b	Plug back Water Disposa			al			
6/18/2014 Acidize Blinebr 6/19/2014 RIH w/pkr to te 6/20/2014 Frac Blinebry w	inspection.) owing: iH w/prod equip. O'. Perf Blinebry @ 570 i5-86', 5912-13', 26-27', y w/3600 gal acid. st csg. 5000 psi i/spearhead of 2000 gal : † 20/40 SLC, flush w/540 ip & rods. 2-7/8" 8RT J H w/rods & tbg.	01-02', 25-2 88-89', 60 15% HCL 60 gal line 5080'; circ 55 EUE 6	26', 40-41', 5 09-10', 29-30 . Pump 112 ar gel. clean. .5# tbg. EO	52-53', 63-64', 73 0' w/1 SPF, 36 ho 2,434 gal 25# XL OT w/SN @ 6996	-74', 80-81', 8 bles. Borate; 140,4 '. RTP	9-90', 581	7-18', 44-45',		
14. I hereby certify that the foregoing is true a	and correct.					- 	10/		
Name (Printed/ Typed)			Title:	. com	<u> </u>		<i>U</i>		
Reesa Fisher Signature:			Sr St	taff Regulatory A	ACCE	PTED F	OR RECORI		
1 1000 HOVE			9/3/14						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE									
Approved by:			Title:		Da	te: JUN 1	9 2015		
Conditions of approval, if any are attache certify that the applicant holds legal or ed which would entitle the appli	the subject le	ase Office:			RO	1			
Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime				n knowingly and willfo	ill to nate Recy	U OF EATH	HAM BE EIN EWYE		
States any false, fictitiousor fraudulent statements or representations as to any matter within its jurisdiction. (Instructions on page 2)					1)		ELD OFFICE		