Form 3160-5

HOBBS OCD

FORM APPROVED

	DEPARTMENT OF THE IN BUREAU OF LAND MANAGE	NTERIOR	0 8 2016	OMB NO. 1004-0135 Expires: July 31, 2010		
CHAIDE	NOTICES AND DEDO	DEC CALMELLO	5. Lease	e Serial No. NM90161		
Do not use t	his form for proposals to ell. Use form 3160-3 (API	drill or to re-enter an	EIVED 6. If Ind	lian, Allottee or Tribe Name		
SUBMIT IN TR		it or CA/Agreement, Name and/or No. NM120042X				
Type of Well Oil Well		Name and No. T BLINEBRY DRINKARD UNIT 34				
Name of Operator APACHE CORPORATION	9. API V 30-0	Well No. 125-09909				
3a. Address 303 VETERANS AIRPARK LANE SUITE 3000 MIDLAND, TX 79705 3b. Phone No. (include area code) Ph: 432-818-1062				d and Pool, or Exploratory IICE; B-T-D, NORTH		
4. Location of Well (Footage, Sec.,	11. Cou	nty or Parish, and State				
Sec 9 T21S R37E NENW 66	LEA	COUNTY COUNTY, NM				
12. CHECK API	PROPRIATE BOX(ES) TO	INDICATE NATURE OF	NOTICE, REPORT,	OR OTHER DATA		
TYPE OF SUBMISSION		ТҮРЕ О	FACTION			
☐ Notice of Intent	☐ Acidize	Acidize Deepen Produc		/Resume)		
_	☐ Alter Casing	☐ Alter Casing ☐ Fracture Treat ☐ Recla		■ Well Integrity		
Subsequent Report	☐ Casing Repair	■ New Construction	☐ Recomplete ☐ Other			
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	□ Temporarily Aba	Temporarily Abandon		
	☐ Convert to Injection	☐ Plug Back	■ Water Disposal			
Attach the Bond under which the w following completion of the involve	nally or recomplete horizontally, ork will be performed or provide ed operations. If the operation res Abandonment Notices shall be file	give subsurface locations and measu the Bond No. on file with BLM/BIA	ired and true vertical dept A. Required subsequent re empletion in a new interva	hs of all pertinent markers and zones. ports shall be filed within 30 days al, a Form 3160-4 shall be filed once		
Apache performed an annua	pressure test on 5/25/201	6; passing chart attached.				

14. I hereby certify that the	ne foregoing is true and correct. Electronic Submission #340867 verifie For APACHE CORPORA	d by the TION, s	BLM Well Information System ent to the Hobbs				
Name (Printed/Typed)	REESA FISHER	Title SR STAFF REGULATORY ANALYST					
Signature	(Electronic Submission)	Date 06/02/2016					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
		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.

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



