

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMLC032096A
2. Name of Operator APACHE CORPORATION		6. If Indian, Allottee or Tribe Name
3a. Address 303 VETERANS AIRPARK LANE SUITE 3000 MIDLAND, TX 79705		7. If Unit or CA/Agreement, Name and/or No. NMNM120042X
3b. Phone No. (include area code) Ph: 432-818-1062		8. Well Name and No. WEST BLINEBRY DRINKARD UNIT 145
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T21S R37E SENE 1780FNL 940FEL		9. API Well No. 30-025-43229
10. Field and Pool or Exploratory Area EUNICE; B-T-D, NORTH		11. County or Parish, State LEA COUNTY COUNTY, NM

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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Hydraulic Fracturing
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other
	Production Start-up

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 recompletable 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 recompletable 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.

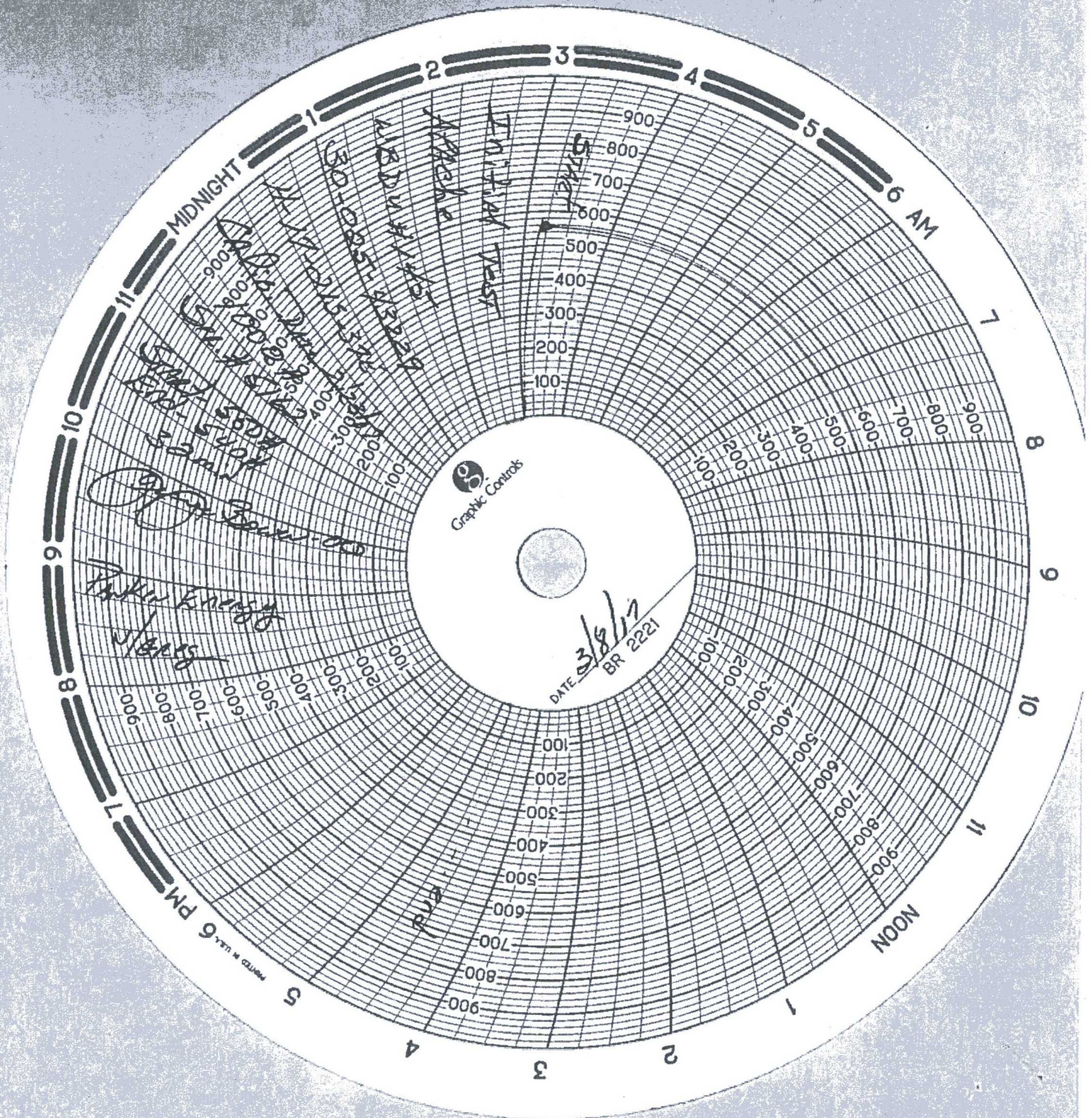
Apache completed this well, as follows: (RR 2/25/2017; WFX-959)
 2/28/2017 MIRUSU RIH w/WS. SD due to high winds.
 3/01/2017 Circ well clean, POOH w/bit & tbg. Log - ETOC @ 86'.
 3/02/2017 Perf Drinkard 6592-97', 6600-06', 09-14', 15-27', 33-36', 44-61', 65-71', 78-82', 84-97'
 w/3 SPF, 240 shots. Test lines.
 Acidize Drinkard w/10,080 gal 15% acid & 2250# rock salt.
 3/03/2017 RIH w/5-1/2" Injection Pkr, set @ 6538'. Tested good.
 3/04/2017 MIRUTT Test 2-3/8" 4.7# J-55 IPC tbg in hole; EOT @ 6560', SN @ 6553'. Tested good. Circ
 pkr fluid, latch up to packer. Waiting to run MIT w/OCD.
 3/08/2017 Ran OCD witnessed MIT; chart attached. Installing injection lines.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #370761 verified by the BLM Well Information System For APACHE CORPORATION, sent to the Hobbs Committed to AFMSS for processing by DEBORAH HAM on 03/23/2017 ()	
Name (Printed/Typed) REESA FISHER	Title SR STAFF REGULATORY ANALYST
Signature (Electronic Submission)	Date 03/23/2017
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
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.	Date
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.	Office

(Instructions on page 2)

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

KZ



District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393 6161 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name <i>Apache</i>	API Number <i>30-025-43229</i>
Property Name <i>WBDU</i>	Well No. <i>145</i>

7. Surface Location

UL - Lot <i>H</i>	Section <i>17</i>	Township <i>21S</i>	Range <i>37E</i>	Feet from <i>1780</i>	N/S Line <i>N</i>	Feet From <i>940</i>	E/W Line <i>E</i>	County <i>LCA</i>
----------------------	----------------------	------------------------	---------------------	--------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

TA'D Well YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR YES <input checked="" type="radio"/> SWD	PRODUCER OIL <input checked="" type="radio"/> GAS	DATE <i>3/8/17</i>
--	--	--	--	-----------------------

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>—</i>	<i>—</i>	<i>Ø</i>	<i>Ø</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>—</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
Down to nothing	<i>Ø/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Ø/N</i>	If applicable type
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	fluid injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood

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

Initial Test

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>3/8/17</i>	Phone:
Witness: <i>[Signature]</i>	