

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NMOCD

Hobbs

FORM 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.*5. Lease Serial No.  
NMNM90161

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
NMNM120042X8. Well Name and No.  
WEST BLINEBRY DRINKARD UNIT 1839. API Well No.  
30-025-4378010. Field and Pool or Exploratory Area  
EUNICE; B-T-D, NORTH11. County or Parish, State  
LEA COUNTY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**

## 1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other: INJECTION

## 2. Name of Operator

APACHE CORPORATION

Contact: REESA FISHER

E-Mail: Reesa.Fisher@apachecorp.com

## 3a. Address

303 VETERANS AIRPARK LANE SUITE 3000  
MIDLAND, TX 79705

## 3b. Phone No. (include area code)

Ph: 432-818-1062

## 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 8 T21S R37E SESW 730FSL 2215FWL

## 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 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"/> Hydraulic Fracturing | <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 checked="" type="checkbox"/> Other |
|   | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon     | <input type="checkbox"/> Temporarily Abandon       | Production Start-up                       |
|   | <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 recompleat 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 recompleat 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 5/15/2017 (WFX- )

6/09/2017 MIRUSU Tag cmt @ 6842'.

6/12/2017 Log - TOC @ Surface.

6/13/2017 Perf Drinkard @ 6678'-6791' w/2 SPF, 154 shots.

Test good to 500#.

Acidize Drinkard w/10,000 gal 15% HCL NEFE acid.

6/14/2017 RIH w/equip &amp; 204 jts 2-3/8" J-55 IPC tbg, set packer @ 6625'.

6/15/2017 Test held 30 min @ 500#.

Prep to lay injection line &amp; begin injection at a later date.

6/21/2017 Ran OCD witnessed MIT; chart attached. Ready to inject, pending injection Order.

## 14. I hereby certify that the foregoing is true and correct.

Electronic Submission #385043 verified by the BLM Well Information System  
For APACHE CORPORATION, sent to the Hobbs  
Committed to AFMSS for processing by JENNIFER SANCHEZ on 08/31/2017 ( )

Name (Printed/Typed) REESA FISHER

Title SR STAFF REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/17/2017

## 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.

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.

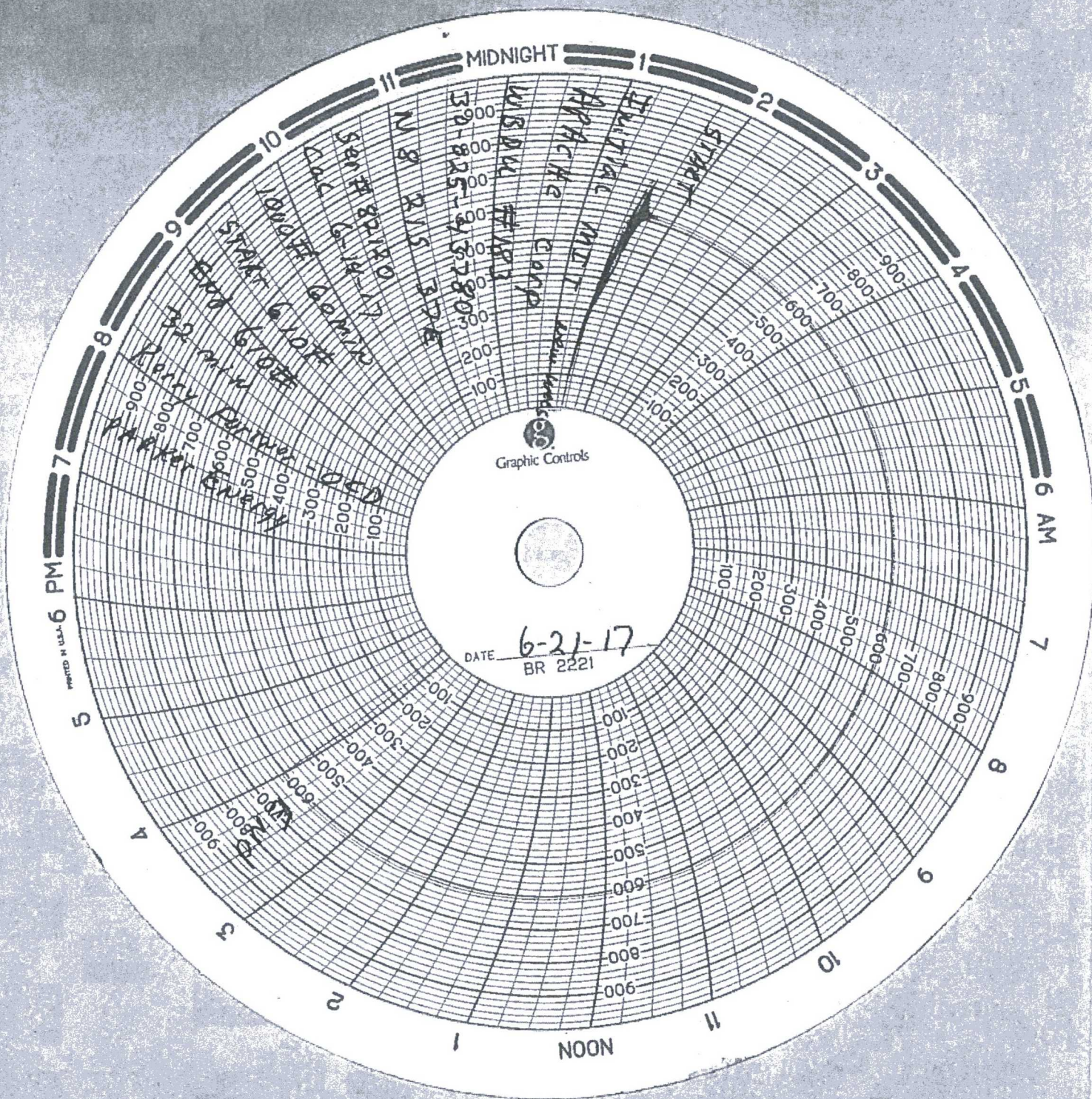
(Instructions on page 2)

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

**Additional data for EC transaction #385043 that would not fit on the form**

**32. Additional remarks, continued**

WO Injection Order



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

**BRADENHEAD TEST REPORT**

|                                     |  |  |  |
|-------------------------------------|--|--|--|
| Operator Name<br><b>APACHE CORP</b> |  | API Number<br><b>30-025-43780-0000</b> |  |
| Property Name<br><b>WBDU</b>        |  | Well No.<br><b>183</b>                 |  |

**Surface Location**

|                      |                     |                         |                      |                         |                      |                          |                      |                      |
|----------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot<br><b>N</b> | Section<br><b>8</b> | Township<br><b>21-S</b> | Range<br><b>37-E</b> | Feet from<br><b>730</b> | N/S Line<br><b>S</b> | Feet From<br><b>2215</b> | E/W Line<br><b>W</b> | County<br><b>LEA</b> |
|----------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------|

**Well Status**

|                                   |                                 |                                   |                                   |                        |
|-----------------------------------|---------------------------------|-----------------------------------|-----------------------------------|------------------------|
| TA'D Well<br><b>YES</b> <b>NO</b> | SHUT-IN<br><b>YES</b> <b>NO</b> | INJECTOR<br><b>INJ</b> <b>SWD</b> | PRODUCER<br><b>OIL</b> <b>GAS</b> | DATE<br><b>6-21-17</b> |
|-----------------------------------|---------------------------------|-----------------------------------|-----------------------------------|------------------------|

**OBSERVED DATA**

|                      | (A)Surf-Interm | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg  | (E)Tubing          |
|----------------------|----------------|--------------|--------------|--------------|--------------------|
| Pressure             | <b>0</b>       | <b>—</b>     | <b>—</b>     | <b>0</b>     | <b>0</b>           |
| Flow Characteristics |                |              |              |              | <b>NOT INS</b>     |
| Puff                 | <b>Y / 0</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / 0</b> | <b>CO2</b>         |
| Steady Flow          | <b>Y / 0</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / 0</b> | <b>WTR</b>         |
| Surges               | <b>Y / 0</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / 0</b> | <b>GAS</b>         |
| Down to nothing      | <b>0 / N</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>0 / N</b> | If applicable type |
| Gas or Oil           | <b>Y / 0</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / 0</b> | fluid injected for |
| Water                | <b>Y / 0</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / 0</b> | Waterflood         |

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

|  |        |                                  |
|--|--------|----------------------------------|
| Signature:                                     |        | <b>OIL CONSERVATION DIVISION</b> |
| Printed name:                                  |        | <b>Entered into RBDMS</b>        |
| Title:   |        | <b>Re-test</b>                   |
| E-mail Address:                                |        |                                  |
| Date: <b>6-21-17</b>                           | Phone: |                                  |
| Witness: <b>KERRY FORTNER-OCD 575-399-3221</b> |        |                                  |