

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.*

File Serial No.  
NMNM125057

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
NMNM112723X

8. Well Name and No.  
EAST BLINEBRY DRINKARD UNIT 13

9. API Well No.  
30-025-06476-00-C1

10. Field and Pool or Exploratory Area  
Multiple--See Attached

11. County or Parish, State  
LEA COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

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 11 T21S R37E NENW 330FNL 1650FWL

**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	Workover Operations
	<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 performed the following:

6/13/2018 MIRUSU POOH w/prod equip.  
6/14/2018 RIH w/bit & WS, tag fill @ 5945', broke circ, DO fill from 5945'-6225'; circ clean.  
6/15/2018 POOH w/bit & WS, RIH & set CIBP @ 6135', dump 2 sx cement on top.  
6/18/2018 RIH w/CBP, test csg.  
6/19/2018 Test lines, cement perms w/66 bbls 14.8# cmt; WO cmt to dry.  
6/20/2018 Tag cmt @ 5638', broke circ, DO cmt from 5638'-5740', circ clean. Test csg to 500#, lost pressure.  
6/21/2018 Test lines, pump cmt plug w/17.7 bbls 14.8# cmt.  
6/22/2018 RIH to tag, cmt soft.  
6/25/2018 Tag cmt @ 5225', broke circ, DO cmt from 5225'-5609', circ clean.

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

**Electronic Submission #427965 verified by the BLM Well Information System  
For APACHE CORPORATION, sent to the Hobbs  
Committed to AFMSS for processing by PRISCILLA PEREZ on 07/23/2018 (18PP1502SE)**

Name (Printed/Typed) REESA FISHER

Title SR STAFF REGULATORY ANALYST

Signature (Electronic Submission)

Date 07/19/2018

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

**ACCEPTED FOR RECORD**

Approved By

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

JUL 25 2018

/s/ Jonathon Shepard

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)

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

Accepted for Record Only

MUB/OCB 8/8/2018

R3DMS-CHART-✓

**Additional data for EC transaction #427965 that would not fit on the form**

**10. Field and Pool, continued**

EUNICE

**32. Additional remarks, continued**

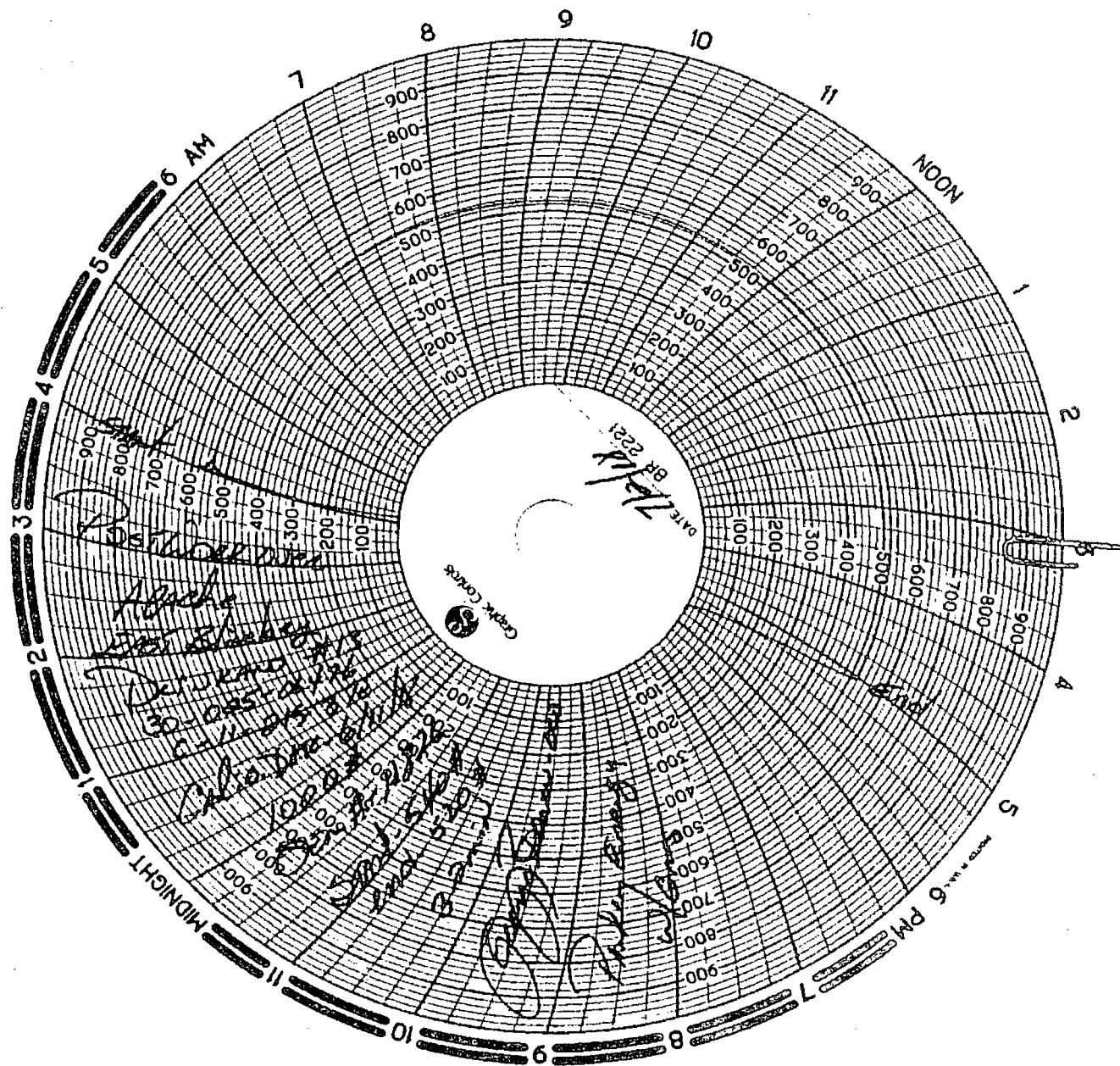
6/26/2018 Tag cmt @ 5609', cont DO cmt to 5700'. Test csg - tested good. DO to 5740', fell out.  
DO CBP.

6/27/2018 Test lines. Acidize Blinbry w/7560 gal 15% acid & 3800# rock salt.

6/28/2018 POOH LD WS, RIH & set inj pkr @ 5659'. Pkr tested good. RIH w/tbg (2-3/8" L-80) w/EOT @  
5665' - tested good.

6/29/2018 Circ pkr fluid. Schedule MIT w/OCD.

7/02/2018 Ran OCD witnessed MIT (chart attached).



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

BRADENHEAD TEST REPORT

Operator Name <b>Apache</b>	*API Number <b>30-025-06476</b>
Property Name <b>EAST Blinburg Drinkard</b>	Well No. <b>13</b>

1. Surface Location

UL - Loc <b>C</b>	Section <b>11</b>	Township <b>21S</b>	Range <b>37E</b>	Feet from <b>330</b>	N/E Line <b>N</b>	Feet From <b>1650</b>	E/V Line <b>W</b>	County <b>LCA</b>
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Well Status

TA'D WELL YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	SHUT-IN YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	INJECTOR YES <input checked="" type="checkbox"/> SWD <input type="checkbox"/>	OIL PRODUCER YES <input type="checkbox"/> GAS <input type="checkbox"/>	DATE <b>7/2/18</b>
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OBSERVED DATA

	(A)Surface	(B)Interm.1	(C)Interm.2	(D)Prod. Casing	(E)Tubing
Pressure	<b>Ø</b>	<b>Ø</b>	<b>—</b>	<b>Ø</b>	<b>Ø</b>
Flow Characteristics					
Puff	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	CO <sub>2</sub> <input type="checkbox"/>
Steady Flow	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	WTR <input type="checkbox"/>
Surges	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	GAS <input type="checkbox"/>
Down to nothing	<b>Ø/N</b>	<b>Ø/N</b>	<b>Y/N</b>	<b>Ø/N</b>	Type of Fluid Injected for Waterflood if applies
Gas or Oil	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	
Water	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	

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

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <b>7/2/18</b>	Phone:
Witness: <b>J. Rowe</b>	

INSTRUCTIONS ON BACK OF THIS FORM