

Submit 1 Copy To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-41268
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Bertha J Barber
8. Well Number 19
9. OGRID Number 873
10. Pool name or Wildcat Eunice Monument G/SA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Injection well ☐

2. Name of Operator
Apache Corp.

3. Address of Operator
P O box Drawer D Monument NM 88265

4. Well Location
Unit Letter D: 820 feet from the N line and 415 feet from the E line
Section 8 Township 20S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: TA wellbore ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/7/2019

1. MEET OCD REP. GARY ROBINSON
2. LOAD CSG W/ PKR FLUID. PRESSURE UP TO 580#.
3. RECORD TEST ON CHART RECORDER FOR 32 MINUTES.
4. ENDING PRESSURE 565#. RELEASE PRESSURE.
5. REQUEST TA STATUS FOR WELL.

This Approval of Temporary
Abandonment Expires 3/7/2021

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE PUMPER III DATE 3/7/2019

Type or print name JIMMY CROSS E-mail address: jimmy.cross@apacheccorp.com PHONE: 575-441-7731

For State Use Only

APPROVED BY: Kerry Fisher TITLE Compliance Officer A DATE 3-18-19
Conditions of Approval (if any):

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

BRADENHEAD TEST REPORT

Operator Name Apache		API Number 30-025-41268 ✓
Property Name Bertha J BARBER		Well No. #19 ✓

Surface Location									
UL - Lot D	Section 8	Township 20S	Range 87E		Feet from 820	N/S Line N	Feet from 415	E/W Line N	County LEA ✓

Well Status									
TA'D WELL <input checked="" type="radio"/> YES NO		SHUT-IN <input checked="" type="radio"/> YES NO		INJECTOR INJ SWD		PRODUCER <input checked="" type="radio"/> OIL GAS		DATE 3-7-19 ✓	

OBSERVED DATA

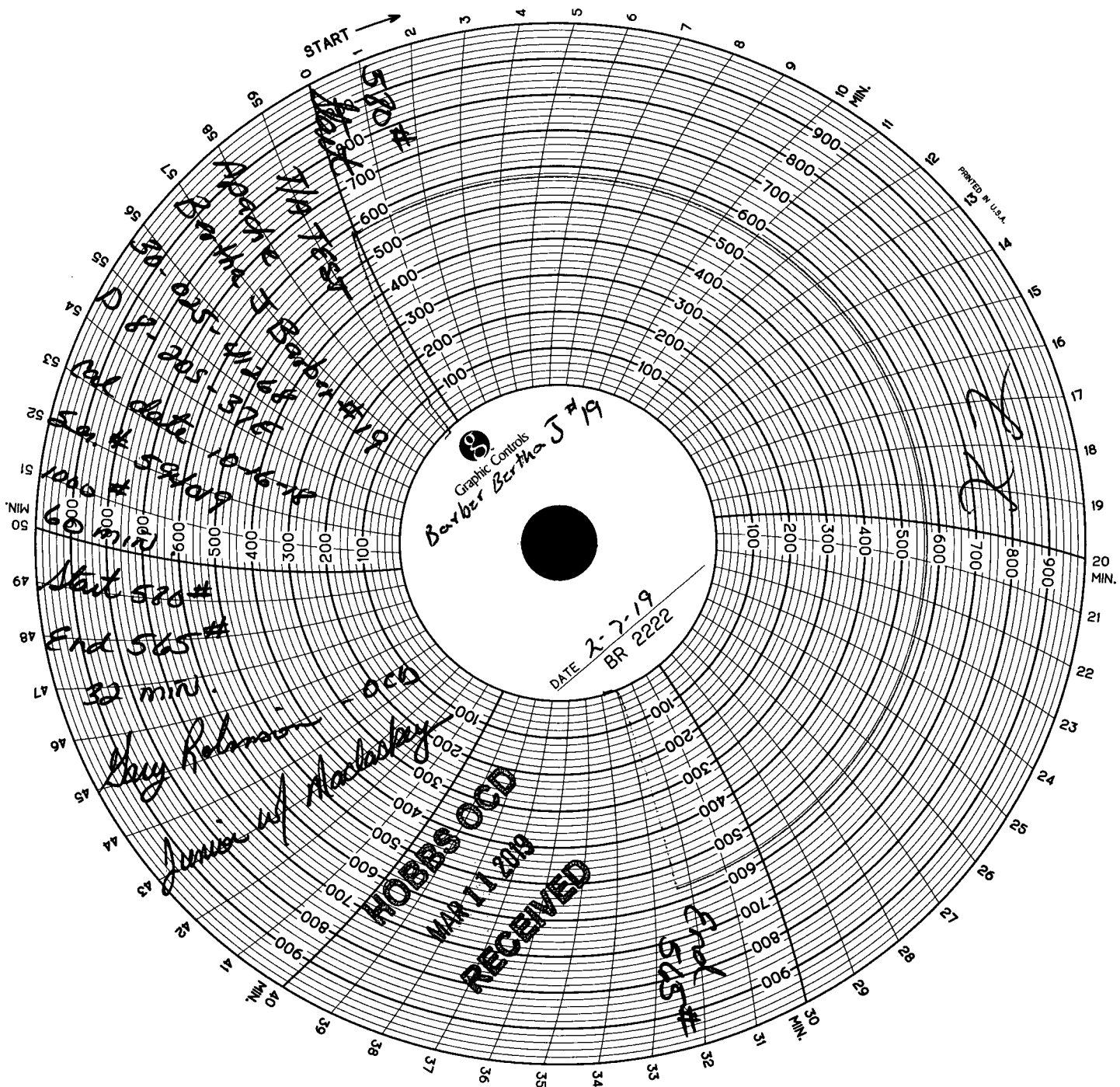
	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	N/A	N/A	0	NONE ✓
Flow Characteristics					
Pull	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	CO2 <input type="checkbox"/>
Steady Flow	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	WTR <input type="checkbox"/>
Surges	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> N	Type of Fluid Injected for Waterflood if applies
Gas or Oil	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	
Water	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	

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

T/A TEST

Signature:		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	ELK
Title:		Re-test	
E-mail Address:			
Date:	Phone:		
Witness: Shay Holmson			

INSTRUCTIONS ON BACK OF THIS FORM



Graphic Controls
Barber Bertha J #19

DATE 2-7-19
BR 2222

HOBB'S OGD
MAR 11 2019
RECEIVED

Start 580#
End 565#
32 min.

Gray Robinson
Junior up Alaska

End 565#

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