

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.
30-025-41611

5. Indicate Type of Lease
STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Monument ABO

8. Well Number 4

9. OGRID Number 873

10. Pool name or Wildcat
ABO

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 ☐

2. Name of Operator
Apache Corp.

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

4. Well Location

Unit Letter D : 990 feet from the N line and 660 feet from the W line
Section 2 Township 20S Range 36E 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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: TA Test ☒

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.

MIRU Sunset Hot Oiler.

Execute Bradenhead test.

Pressure up on csg to 600# for 32 minutes ending pressure 590#. Record on chart.

Release pressure. Request TA extension.

Final extension

FINAL TA STATUS- EXTENSION

Approval of TA EXPIRES: 1-31-21
Well needs to be PLUGGED OR RETURNED
to PRODUCTION
BY THE DATE STATED ABOVE: 27

Spud Date:

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

SIGNATURE Joel Sisk TITLE Foreman DATE 7/31/2020

Type or print name Joel Sisk E-mail address: joel.sisk@apacheccorp.com PHONE: 575-441-0793
For State Use Only

APPROVED BY: Kerry Int TITLE CO DATE 8-7-20
Conditions of Approval (if any):

Apache Corp.
Monument Abs #4
36-025-41411
D-2-255-36E
Start 100#
End 590#
32 minutes
American Valve & Mfg
Ser # 594019
Calib. 3-31-20
Sun set Truck
Good Site

Start 100#

End 590#

7-31-20

32 minutes

22

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

BRADENHEAD TEST REPORT

Operator Name <i>Apache Corp.</i>	API Number <i>30-025-41611</i>
Property Name <i>Monument Abo</i>	Well No. <i>4</i>

Surface Location									
UL - Lot <i>D</i>	Section <i>2</i>	Township <i>20S</i>	Range <i>36E</i>		Feet from <i>990</i>	NS Line <i>N</i>	Feet from <i>160</i>	E/W Line <i>W</i>	County <i>LC9</i>

Well Status									
<input checked="" type="radio"/> YES TA'D WELL NO	<input checked="" type="radio"/> YES SHUT-IN NO	INJ	INJECTOR <i>NA</i>	SWD	<input checked="" type="radio"/> OIL PRODUCER GAS	DATE <i>7-31-20</i>			

OBSERVED DATA

	(A) Surface	(B) Interm (1)	(C) Interm (2)	(D) Prod Comp	(E) Tubing
Pressure	<i>30#</i>	<i>NA</i>	<i>NA</i>	<i>50#</i>	
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	CO2 WTR — GAS — Type of fluid subjected for waterflood if applies
Steady Flow	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	
Surges	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	
Down to nothing	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	
<u>Gas</u> or Oil	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	
Water	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> 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.

Signature <i>Joel Sisk</i>	OIL CONSERVATION DIVISION
Printed name <i>JOEL SISK</i>	Entered into RBDMS
Title <i>Foreman</i>	Re-test
E-mail Address <i>joel.sisk@apachecorp.com</i>	<i>XJ</i>
Date <i>7-31-20</i>	
Phone <i>575-441-0793</i>	
Witness	

INSTRUCTIONS ON BACK OF THIS FORM