Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR

OCD Artesia

FORM APPROVED OM B No. 1004-0137 Expires: October 31, 2014

BURE	•	5	5. Lease Serial No.					
				NMNN1025604				
SUNDRY I	LLS	6	5. If Indian, Allotte	e or Tribe N	lame			
Do not use this form for proposals to drill or to re-enter an								
	Use Form 3160-3 (APD) for sucl			··				
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7. If Unit of CA / Agreement, Name and/or No.				
1. Type of Well				8910138010				
Oil Well Gas Well Other				8. Well Name and No. Empire Abo Unit "L" #123				
2 Name of Country				9. API Well No.				
2. Name of Operator Apache Corporation				30-015-22849				
3a. Address	o. (include area code)		10. Field and Pool, or Exploratory Area					
303 Veterans Airpark Ln, Mi	2-556-9143		Empire Abo					
4. Location of (Footage, Sec., T., R., o			11. County or Parish, State					
UL P, 660 FSL 8	R27E		Eddy County, NM					
	PRIATE BOX(ES) TO INDICA		TICE, RE					
TYPE OF SUBMISSION		TYF	PE OF ACT	ION				
	Acidizc	Deepen	Production (Start/R		me)	☐ Water Shut-off		
	Alter Casing	Fracture Treat	Rec	:lamation		☐ Well Integrity		
Subsequent Report	Casing Repair	New Construction	∏ Rec	complete		Other		
	Change Plans	•		nporarily Abandon		Other		
Final Abandonment Notice				-	•			
	Convert to Injection	Plug Back	wat	er Disposal				
pushed to two side into excavated are contoured to grade constructed to bloc location; reseeding	was installed according to BLI es, 3 ft. of underlying topsoil was a, 3 of excavated topsoil was e; the road to the location was ck access after reseeding; 2-3' g of the location, covered pit ar BLM is being notified that this v	es pushed to two op pushed into excava Ilipped and buried in of topsoil was used ea, and road in acc	oposite sinted area in the sand to cover cordance pection.	des, caliche was covering the cal ne manner; a 2- r the oil pit area with BLM appro	s pushed liche and 3' berm w on the ved meth		ON	
	ed for record - N	MOCD		DEC	1 2 2018	AN		
	·				بالالا	A AJ EUIU	<u> </u>	
14. Thereby certify that the following is true and correct					DE	CEIVED		
Name Guinn	Title							
~ /	Dur							
Signature Sull Au	BUN			11/28/1	8			
	THIS SPACE FOR I	T	TE OFFI	CE USE				
Approved by	w.C. Como	Title S	67		Date	11-29-1	8	
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 operatins thereon.		Office 1						
Title 18 U.S.C. Section 1001 and Title States any false, fictitious or fraudulen				willfully to make to	any depart	ment or agency of (he United	