

Submit To Appropriate District Office Two Copies District I 1625 N French Dr., Hobbs, NM 88240 District II 1301 W Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S St Francis Dr., Santa Fe, NM 87505		<b>HOBBS OCD</b> State of New Mexico Energy, Minerals and Natural Resources <div style="display: flex; justify-content: space-around; align-items: center;"> <div> <b>DEC 01 2011</b>  <b>RECEIVED</b> </div> <div>           Oil Conservation Division            1220 South St. Francis Dr.            Santa Fe, NM 87505         </div> </div>				Form C-105 July 17, 2008	
		1. WELL API NO. 30-015-39011					
		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN					
		3. State Oil & Gas Lease No					
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>							
4. Reason for filing: <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33, attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)				5. Lease Name or Unit Agreement Name <b>EMPIRE ABO UNIT</b>			
7. Type of Completion: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER				6. Well Number: 419			
8. Name of Operator <b>APACHE CORPORATION</b>				9. OGRID 873			
10. Address of Operator 303 VETERANS AIRPARK LANE, SUITE 3000 MIDLAND, TEXAS 79705				11. Pool name or Wildcat <b>EMPIRE ABO</b>			
12. Location	Unit Ltr	Section	Township	Range	Lot		
Surface:	O	31	17S	28E			
BH:							
13. Date Spudded 10/11/2011	14. Date T.D. Reached 10/20/2011	15. Date Rig Released 10/21/2011		16. Date Completed (Ready to Produce) 11/07/2011			
17. Elevations (DF and RKB, RT, GR, etc ) 3696 GR							
18. Total Measured Depth of Well 6310		19. Plug Back Measured Depth 6262		20. Was Directional Survey Made? YES			
21. Type Electric and Other Logs Run QUAD COMBO							
22. Producing Interval(s), of this completion - Top, Bottom, Name ABO 5810-5920'							
<b>CASING RECORD (Report all strings set in well)</b>							
23. CASING SIZE		WEIGHT LB /FT.		DEPTH SET			
8.625		24		496			
5.5		17		6310			
		TAC		5758.27 RKB			
		SN		6043.31 RKB			
24. LINER RECORD			25. TUBING RECORD				
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE		
					2-7/8		
					6044.41		
26. Perforation record (interval, size, and number) ABO: 5810-5920', 2 JSPF, 164 HOLES			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.				
			DEPTH INTERVAL				
			AMOUNT AND KIND MATERIAL USED				
			5810-5920'				
			5000g 15% HCL NEFE.				
<b>PRODUCTION</b>							
Date First Production 11/07/2011		Production Method (Flowing, gas lift, pumping - Size and type pump) PUMPING		Well Status (Prod or Shut-in) PROD.			
Date of Test 11/15/11	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 0	Gas - MCF 0		
Flow Tubing Press	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl	Gas - MCF	Water - Bbl 4		
					Oil Gravity - API - (Corr.) 40		
29. Disposition of Gas (Sold, used for fuel, vented, etc ) SOLD					30. Test Witnessed By		
31. List Attachments INCLINATION REPORT; C-102, C-103, C-104, WELLBORE DIAGRAM, LOGS SENT <del>7-12-2011</del> <b>11-2-2011</b>							
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit							
33. If an on-site burial was used at the well, report the exact location of the on-site burial:							
		Latitude		Longitude			
				NAD 1927 1983			
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief							
Signature <i>Bev Hatfield</i>		Printed Name BEV HATFIELD		Title Sr. Staff Regulatory Tech			
				Date			
E-mail Address Beverly.Hatfield@apachecorp.com							

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly<sup>2</sup> drilled & deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers 616	T. Devonian	T. Cliff House	T. Leadville
T. Queen 1199	T. Silurian	T. Menefee	T. Madison
T. Grayburg 1645	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres 1972	T. Simpson	T. Mancos	T. McCracken
T. Glorieta 3487	T. McKee	T. Gallup	T. Ignacio Otzte
T. Paddock 3703'	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinbry 4360'	T. Gr. Wash	T. Dakota	
T. Tubb 5291'	T. Delaware Sand	T. Morrison	
T. Drinkard	T. Bone Springs	T. Todilto	
T. Abo 5418	T. YESO 3607	T. Entrada	
T. Wolfcamp	T. ABO REEF 5699	T. Wingate	
T. Penn	T.	T. Chinle	
T. Cisco (Bough C)	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 3, from.....to.....

No. 2, from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology