Form 3160-5 (August 2007)

# NM OIL CONSERVATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

ARTESIA DISTRICT

FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010

# Expires: July 31, 201 5. Lease Serial No.

| SUNDRY | NOTICES | <b>AND</b> | <b>REPORTS</b> | 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 proposaGEIVED

Multiple--See Attached

6. If Indian, Allottee or Tribe Name

| SUBMIT IN TRII                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 7. If Unit or CA/Agreen NMNM134086 | nent, Name and/or No.         |                |                                                             |                         |                            |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------|----------------|-------------------------------------------------------------|-------------------------|----------------------------|--|
| Type of Well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | er                                 |                               |                | 8. Well Name and No.<br>MultipleSee Attac                   | hed                     |                            |  |
| 2. Name of Operator APACHE CORPORATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                    | S<br>com                      |                | 9. API Well No.<br>MultipleSee Att                          | ached                   |                            |  |
| 3a. Address<br>303 VETERANS AIRPARK LA<br>MIDLAND, TX 79705                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | NE SUITE 3000                      | (include area code)<br>8-1801 |                | 10. Field and Pool, or Exploratory CEDAR LAKE-GLORIETA-YESO |                         |                            |  |
| 4. Location of Well (Footage, Sec., T.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | , R., M., or Survey Description)   | . :                           | ·              |                                                             | 11. County or Parish, a | nd State                   |  |
| MultipleSee Attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                    |                               | •              |                                                             | EDDY COUNTY             | , NM                       |  |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                    | •                             |                |                                                             |                         |                            |  |
| 12. CHECK APPR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ROPRIATE BOX(ES) TO                | INDICATE                      | NATURE OF I    | NOTICE, R                                                   | EPORT, OR OTHER         | DATA                       |  |
| TYPE OF SUBMISSION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                    |                               | TYPE OF ACTION |                                                             |                         |                            |  |
| Notice of Intent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ☐ Acidize                          | ☐ Deej                        | oen            | ☐ Product                                                   | ion (Start/Resume)      | ☐ Water Shut-Off           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☐ Alter Casing                     | ☐ Frac                        | ture Treat     | ☐ Reclam                                                    | ation                   | ☐ Well Integrity           |  |
| ☐ Subsequent Report                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Casing Repair                      | □ New                         | Construction   | □ Recomp                                                    | olete                   | <b>⊘</b> Other             |  |
| ☐ Final Abandonment Notice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ☐ Change Plans                     | Plug                          | and Abandon    | Tempor                                                      | arily Abandon           | Venting and/or Flari<br>ng |  |
| ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Convert to Injection               | ☐ Plug                        | Back           | □ Water I                                                   | Disposal                |                            |  |
| Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall 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 is requesting to Temporary Flare an estimated 1.8 MMCF per day for 90 days 09/16/16 to 12/16/16 on PAD 27W located E-09-17S-31E, Due to high Nitrogen levels per Frontier. Gas will be measured prior to flaring.  CROW PAD 27W FLARE(2)  CEDAR LAKE FEDERAL CA 858 30-015-43088 (NFE FED COM #58H ) CEDAR LAKE FEDERAL CA 922 30-015-41166 (CROW FED COM #022H) CEDAR LAKE FEDERAL CA 923 30-015-41167 (CROW FED COM #23H) CEDAR LAKE FEDERAL CA 924 30-015-41168 (CROW FED COM #24H)  SEE ATTACHED FOR CONDITIONS OF APPROVAL |                                    |                               |                |                                                             |                         |                            |  |
| 14. I hereby certify that the foregoing is true and correct.  Electronic Submission #351526 verified by the BLM Well Information System  For APACHE CORPORATION, sent to the Carlsbad  Committed to AFMSS for processing by DEBORAH MCKINNEY on 09/19/2016 (16DLM0931SE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                    |                               |                |                                                             |                         |                            |  |
| Name (Printed/Typed) EMILY FO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | LLIS                               |                               | Title REGUL    | _ATORY AN                                                   | ALYST                   |                            |  |
| Signature (Electronic S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date 09/16/2                       | 016                           |                |                                                             |                         |                            |  |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                    |                               |                |                                                             |                         |                            |  |
| Approved By CHARLES NIMMER Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TitlePETROLEUM ENGINEER Date 10/   |                               |                | Date 10/12/2016                                             |                         |                            |  |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                    |                               |                |                                                             |                         |                            |  |

## Additional data for EC transaction #351526 that would not fit on the form

### 5. Lease Serial No., continued

NMLC029426B NMLC029435B

#### Wells/Facilities, continued

| Agreement<br>NMNM134086 | Lease<br>NMLC029426B | Well/Fac Name, Number API Number<br>CEDAR LAKE FEDERAL CA 922H 30-015-41166-00-S1 | Location<br>Sec 9 T17S R31E SWNW 1680FNL 10FWL                                                               |
|-------------------------|----------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| NMNM134086              | NMLC029435B          | CEDAR LAKE FEDERAL CA 858H 30-015-43088-00-S1                                     | 32.851674 N Lat, 103.883393 W Lon<br>Sec 8 T17S R31E SENE 1672FNL 85FEL<br>32.851503 N Lat, 103.882758 W Lon |
| NMNM134086              | NMLC029426B          | CEDAR LAKE FEDERAL CA 923H 30-015-41167-00-S1                                     | Sec 9 T17S R31E SWNW 1650FNL 10FWL 32.851757 N Lat, 103.883394 W Lon                                         |
| NMNM134086              | NMLC029426B          | CEDAR LAKE FEDERAL CA 924H 30-015-41168-00-S1                                     | Sec 9 T17S R31E SWNW 1620FNL 10FWL                                                                           |

### 32. Additional remarks, continued

1.Meter #T295 2.Volumes are being reported to the BLM on ONRR thru OGOR report

BUREAU OF LAND MANAGEMENT
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972

Apache Corporation Cedar Lake Fed CA 922H NMLC029435B

10/12/2016

Pursuant to **NTL-4A III**, Lessees or operators are hereby authorized to vent or flare gas on a short-term basis <u>without</u> <u>incurring a royalty</u> obligation in the following circumstances:

- A. <u>Emergencies.</u> During temporary emergency situations, such as compressor or other equipment failures, relief of abnormal system pressures, or other conditions which result in the unavoidable short-term venting or flaring of gas. However, this authorization to vent or flare gas in such circumstances without incurring a royalty obligation is limited to 24 hours per incident and to 144 hours cumulative for the lease during any calendar month, except with the prior authorization, approval, ratification, or acceptance of the Supervisor.
- B. <u>Well Purging and Evaluation Tests.</u> During the unloading or cleaning up of a well during drill stem, producing, routine purging, or evaluation tests, not exceeding a period of 24 hours.
- C. <u>Initial Production Tests.</u> During initial well evaluation tests, not exceeding a period of 30 days or the production of 50 MMcf of gas, whichever occurs first, unless a longer test period has been authorized by the appropriate State regulatory agency and ratified or accepted by the Supervisor.
- D. <u>Routine or Special Well Tests.</u> During routine or special well tests, other than those cited in NTL-4A III.B and C above, only after approval by the Supervisor.

If a flaring event conforms with the requirements listed above as per NTL-4A III., the flared volumes are not royalty bearing and the operator does not need to submit a Sundry Notice. Report flared volumes as unavoidably lost on OGOR B.

#### **Condition of Approval to Flare Gas**

- 1. The first 24 hours of a <u>temporary emergency flare\*</u> is considered "unavoidably lost" and is therefore royalty free. Flared volumes that are considered unavoidably lost are not to be included in Sundry Notice (Form 3160-5). NTL-4A specifies no more than 24 hours per incident and no more 144 hours cumulative for the lease during any calendar month. These Volumes are not royalty bearing and shall be reported on OGOR "B" as disposition code"23".
- 2. Flared volumes considered to be "avoidably lost":
  - Exceeding the first 24 hours for each temporary emergency flare event (144 hours cumulative for the lease per month), well purging and evaluation test.
  - During initial well evaluation tests, exceeding a period of 30 days or the production of 50 MMcf of gas, whichever occurs first
  - Scheduled flaring operations

These flare events will require prior approval via Notice of Intent- Sundry Notice (Form 3160-5). Volumes flared beyond limits defined in NTL-4A are considered "avoidably lost" and will require payment of royalties, unless an exception is granted in accordance with NTL-4A.IV.B.. <u>Volumes for avoidably lost gas shall be reported on OGOR "B" reports as disposition code "08"</u>. If the operator believes that the flared volumes were "unavoidably lost" and the BLM determines them to be "avoidably lost", the operator can submit a more detailed request via Sundry Notice (Form 3160-5) for an exception in accordance with NTL-4A.IV.B.. As an

- alternative to producing oil and flaring gas the operator may choose to shut the well in and avoid paying royalties on otherwise avoidably lost gas.
- 3. Approval not to exceed 90 days,(from <u>09/16/2016</u> to <u>12/16/2016</u>), if flaring is still required past 90 days submit new request for approval.
- 4. Submit Subsequent Report with actual volumes of gas flared for each month gas is flared on a Sundry Notice (Form 3160-5). Include method for volume determination and duration. Report unavoidably lost (first 24 hrs of unexpected event) and avoidably lost (exceeding the first 24 hrs or flared gas that has been approved as avoidably lost by the Authorized Officer) volumes and durations on the Subsequent Report.
- 5. In determining the volumes of gas to be reported in accordance with NTL-4A the BLM CFO requires Vent/flare gas metering to meet all requirements for a sales meter as per Federal Regulations, Onshore Order #5 and NTL 2008-01. Include meter serial number on Sundry Notice (Form 3160-5).
  - If installation of an approved gas meter is not economically feasible for continued operations. Submit Notice of Intent Sundry Notice (Form 3160-5) to request an alternate method of determining gas volumes with a valid justification. Alternate methods are listed in NTL-4A. The Authorized Officer may require the installation of additional measurement equipment whenever it is determined that the present methods are inadequate to meet the purposes of this Notice.
- 6. An updated facility diagram is required within 60 days of modifications to existing facilities per Onshore Order #3.
- 7. This approval does not authorize any additional surface disturbance.
- 8. Subject to like approval from NMOCD

#### **Regulations and Definitions**

**Definition:** As per **NTL-4A II. A.** "Avoidably lost" production shall mean the venting or flaring of produced gas without the prior authorization, approval, ratification, or acceptance of the Supervisor and the loss of produced oil or gas when the Supervisor determines that such loss occurred as a result of (1) negligence on the part of the lessee or operator, or (2) the failure of the lessee or operator to take all reasonable measures to prevent and/or to control the loss, or (3) the failure of the lessee or operator to comply fully with the applicable lease terms and regulations, appropriate provisions of the approved operating plan, or the prior written orders of the Supervisor, or (4) and combination of the foregoing.

**NTL-4A.IV.B.** Oil Well Gas. Except as provided in II.C and III above, oil well gas may not be vented or flared unless approved in writing by the Supervisor. The Supervisor may approve an application for the venting or flaring of oil well gas if justified either by the submittal of (1) an evaluation report supported by engineering, geologic, and economic data which demonstrates to the satisfaction of the Supervisor that the expenditures necessary to market or beneficially use such gas are not economically justified and that conservation of the gas, if required, would lead to the premature abandonment of recoverable oil reserves and ultimately to a greater loss of equivalent energy than would be recovered if the venting or flaring were permitted to continue or (2) an action plan that will eliminate venting or flaring of the gas within 1 year from the date of application.

\*Temporary Emergency Flaring is defined as an unexpected situation requiring immediate action. A flaring event is considered an emergency if the occurrence is out of the operators control and the operator had less than 24 hrs notification of the event. Scheduled or routine flare events will not be considered an emergency.