

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**NMOCD**  
**Artesia**

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

**SUNDRY NOTICES AND REPORTS 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 proposals.*

5. Lease Serial No. NMNM0557371
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. AAO FEDERAL 002
9. API Well No. 30-015-32308
10. Field and Pool, or Exploratory REDLK;GLOYESO;NE-Q/G/SA
11. County or Parish, and State EDDY COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator APACHE CORP	Contact: ISABEL HUDSON E-Mail: Isabel.Hudson@apachecorp.com
3a. Address 303 VETERANS AIRPARK LANE SUITE 1000 MIDLAND, TX 79705	3b. Phone No. (include area code) Ph: 432-818-1142
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T18S R27E 430FNL 2310FWL	

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. 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 has performed the following work. Please see attachment, MIT Chart.

10/20/2016 MIRUSU. MIRU pump truck & kill well. POOH w/ production equipment. MIRU Empire Services; POOH tubing, RDMO Empire Services. MIRU Renegade Services. RIH w/ 5-1/2" CIBP on WL. Stacked out @ 1900' could not go deeper. POOH w/ 1877' plug would not go up or down. POOH w/ WL. RIH w/CMT bailer on WL. Dump 35' CMT on top of CIBP. POOH w/ bailer & WL. RDMO Renegade Services. RDMOSU & RDMO pump truck. Ran MIT on 10-26-2016 (please see attachment).

ACCEPTED FOR RECORD  
NMOCD RE  
12/15/16

NM OIL CONSERVATION  
ARTESIA DISTRICT

DEC 12 2016

RECEIVED

*TA Status approved for 12 months ending 10/20/2017*

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #357432 verified by the BLM Well Information System</b> <b>For APACHE CORP, sent to the Carlsbad</b> <b>Committed to AFMSS for processing by DEBORAH MCKINNEY on 11/14/2016 ()</b>	
Name (Printed/Typed) ISABEL HUDSON	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 11/08/2016
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By _____	Title _____
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 operations thereon.	Office _____

ACCEPTED FOR RECORD  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

