

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia  
NM OIL CONSERVATION  
ARTESIA DISTRICT

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.*

FEB 23 2017  
RECEIVED

5. Lease Serial No.  
NMLC029435A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
CEDAR LAKE FEDERAL CA 810H

9. API Well No.  
30-015-40466

10. Field and Pool or Exploratory Area  
CEDAR LAKE;GLORIETA-YESO

11. County or Parish, State  
EDDY COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
APACHE CORPORATION  
Contact: JENNIFER E VAN CUREN  
E-Mail: Jennifer.vancuren@arcadis.com

3a. Address  
303 VETERANS AIRPARK LN 1000  
MIDLAND, TX 79705

3b. Phone No. (include area code)  
Ph: 432-687-5400 Ext: 117  
Fx: 432-687-5401

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 8 T17S R31E Mer NMP SWNW 2063FNL 220FWL

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original APD
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must 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 REQUESTS TO CHANGE THE ORIGINAL PLANS OF THE APD FOR THE FOLLOWING WELLS.

- Cedar Lake Federal CA 810H 30-015-40466
- Cedar Lake Federal CA 811H 30-015-40467 *ADD*
- Cedar Lake Federal CA 812H 30-015-40468
- Cedar Lake Federal CA 826H 30-015-40462
- Cedar Lake Federal CA 827H 30-015-40470

PLEASE SEE ATTACHED PLAN FOR INTERIM RECLAMATION PLANNED AFTER SATELLITE HAS BEEN CONSTRUCTED ON THE WEST AND POWER FOR WELLS ARE ON THE WEST. THE AREA WEST OF THE POWER POLES WILL BE RECLAIMED (70 FT), THE AREA NORTH WITH TOPSOIL (70 FT), AND AN AREA TO THE EAST BUT NORTH OF THE SATELLITE (90 FT) WILL BE RECLAIMED. THERE IS AN AREA ON THE SOUTH THAT CAN BE REMOVED AS WELL 30 FT).

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #365200 verified by the BLM Well Information System  
For APACHE CORPORATION, sent to the Carlsbad**

Name (Printed/Typed) JENNIFER E VAN CUREN Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission) Date 01/30/2017

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By *Jennifer E. Van Curen* Title *SALT* Date *2-14-17*

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 *CFO*

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.

(Instructions on page 2)

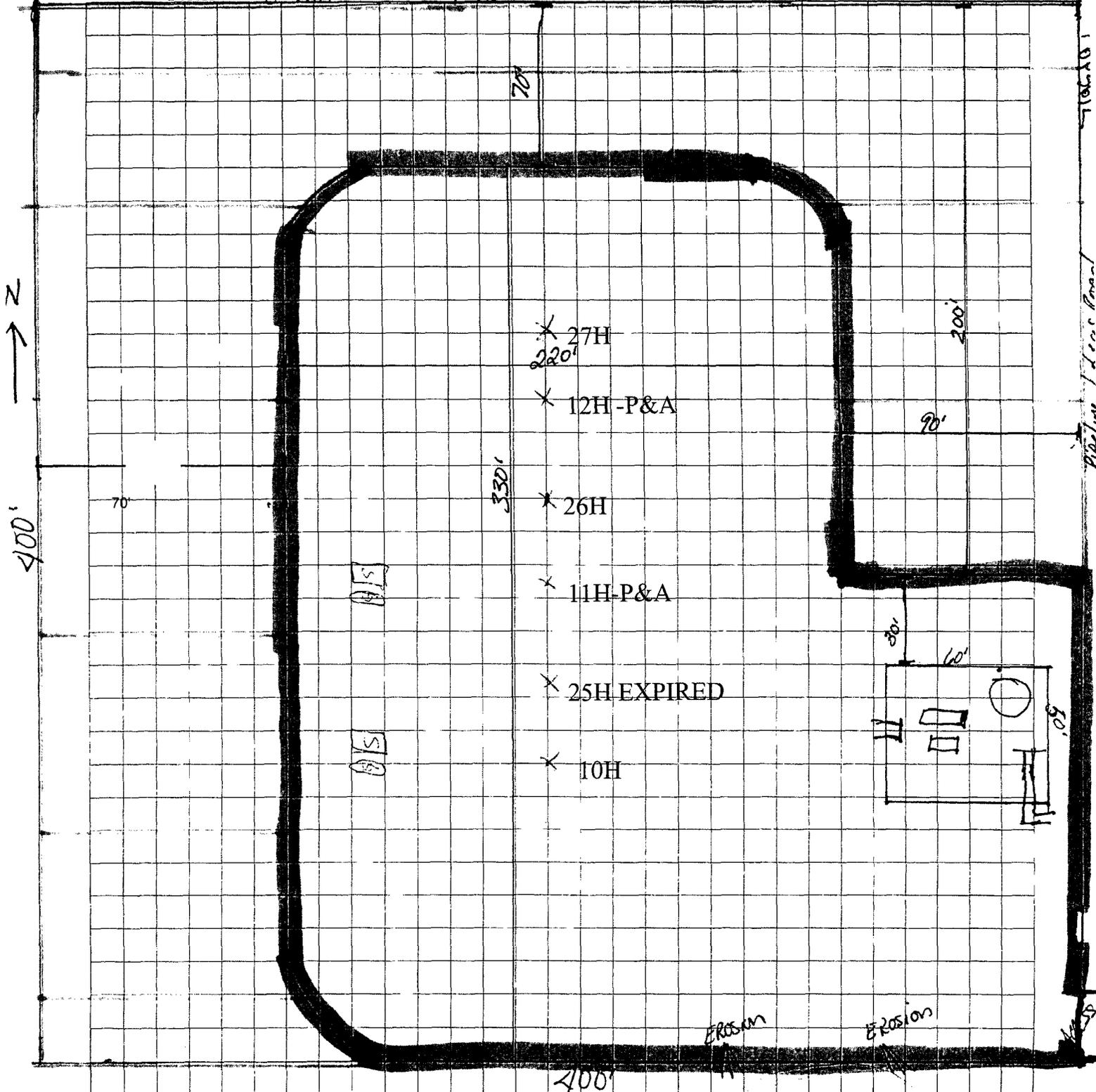
**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

Accepted for record - NMOCD

*RUP 3-6-17*

Approved 3.67  
Remaining 1.67

Topsoil



Power Supply - S  
Proprietary - P

