

Submit 1 Copy To Appropriate District
OfficeDistrict I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM

87505

State of New Mexico
Energy, Minerals and Natural ResourcesOIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103

October 13, 2009

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-39067
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Apache Corp.		6. State Oil & Gas Lease No. BO-2287
3. Address of Operator P O box Drawer D Monument NM 88265		7. Lease Name or Unit Agreement Name North Monument G/SA Unit 302708
4. Well Location Unit Letter <u>H</u> : <u>1330</u> feet from the <u>N</u> line and <u>1185</u> feet from the <u>E</u> line Section <u>35</u> Township <u>19S</u> Range <u>36E</u> NMPM Lea County		8. Well Number 374
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3658 GL		9. OGRID Number 873
		10. Pool name or Wildcat Eunice Monument G/SA (23000)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐

OTHER: **TA RETEST** ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MIRU Maclaskey Hot Oiler.

Perform Bradenhead test.

Pressure up on casing to 550# for 32 minutes, ending pressure 545#. Record test on chart.

Release pressure. Request TA extension.

FINAL TA STATUS- EXTENSIONApproval of TA EXPIRES: 2/1/22Well needs to be **PLUGGED OR RETURNED**
to **PRODUCTION**BY THE DATE STATED ABOVE: X 7

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Joel Sisk TITLE Foreman DATE 1/22/2021Type or print name JOEL SISK E-mail address: joel.sisk@apacheccorp.com PHONE: 575-441-0793**For State Use Only**APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 1/25/21

Conditions of Approval (if any):

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Apache Corp.	API Number 30-025-39067
Property Name NMGSAH	Well No. 374

Surface Location

UL - Lot H	Section 35	Township 19S	Range 36E	Feet from 1330	N/S Line FNL	Feet from 1185	E/W Line FEL	County Lea
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Well Status

TA'D WELL <input checked="" type="radio"/> YES <input type="radio"/> NO	SHUT-IN <input checked="" type="radio"/> YES <input type="radio"/> NO	INJ	INJECTOR	SWD	PRODUCER <input checked="" type="radio"/> OIL <input type="radio"/> GAS	DATE 1-22-21
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OBSERVED DATA

	(A) Surface	(B) Interim (1)	(C) Interim (2)	(D) Prod Casing	(E) Tubing
Pressure	20#			18#	
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y <input type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> Y <input type="radio"/> N	CO2 _____ WTR _____ GAS _____ Type of fluid injected for waterflood if applies
Steady Flow	<input checked="" type="radio"/> Y <input type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> Y <input type="radio"/> N	
Surges	<input checked="" type="radio"/> Y <input type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> Y <input type="radio"/> N	
Down to nothing	<input checked="" type="radio"/> Y <input type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> Y <input type="radio"/> N	
Gas or Oil	<input checked="" type="radio"/> Y <input type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> Y <input type="radio"/> N	
Water	<input checked="" type="radio"/> Y <input type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> Y <input type="radio"/> N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature Joel Sisk	OIL CONSERVATION DIVISION
Printed name: Joel Sisk	Entered into RBDMS
Title Production Foreman	Re-test
E-mail Address: joel.sisk@apachecorp.com	
Date 1-22-21	
Phone 575-441-0793	
Witness	

K7

INSTRUCTIONS ON BACK OF THIS FORM

Apache Corp.
NMG5AU # 374
30-825-39067
H-35-195-36E
Start 550#
End 545#
32 minutes
Ser # 594019
Calibrated 9-15-20
Paul Sih

K 7



DATE 1-22-21
BR 2222
Paul Sih

End 545#

Start 550#

32 minute 5