

**HOBBS OCD**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

APR 18 2016

**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.*

**RECEIVED**

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

5. Lease Serial No.  
NMNM2512

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
NMNM72602X

8. Well Name and No.  
NORTHEAST DRINKARD UNIT 103

9. API Well No.  
30-025-09897

10. Field and Pool, or Exploratory  
EUNICE; B-T-D, NORTH

11. County or Parish, and State  
LEA COUNTY COUNTY, NM

1. Type of Well  Other: INJECTION

2. Name of Operator APACHE CORPORATION Contact: REESA FISHER  
E-Mail: Reesa.Fisher@apachecorp.com

3a. Address 303 VETERANS AIRPARK LANE SUITE 3000 MIDLAND, TX 79705

3b. Phone No. (include area code) Ph: 432-818-1062

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 3 T21S R37E NWNW 660FNL 660FWL

**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 checked="" 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 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 tested this well 4/7/2016, per OCD UIC annual testing requirements. Chart attached.

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

**Electronic Submission #336302 verified by the BLM Well Information System  
For APACHE CORPORATION, sent to the Hobbs**

Name (Printed/Typed) REESA FISHER Title SR STAFF REGULATORY ANALYST

Signature (Electronic Submission) Date 04/12/2016

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

Approved By \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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 \_\_\_\_\_

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 \*\***

**FOR RECORD ONLY**

OCD B 4-29-16

APR 29 2016

W



Graphic Controls

NEDU 103 W/W

DATE 4-7-16  
BR 2221

Alcoche Corp  
30 023 2030  
NE Drinkard Lab  
B 21 317  
Start 360 End 500

Meadskey  
Cal 7-116  
Serial 1003  
1000 1001

Handwritten notes in the lower-left quadrant of the chart.

Handwritten signature and date: 4-7-16

