

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICES AND REPORTS ON
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.
NMNM125057
6. Indian allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 5.

7. If Unit or CA/Agreement, Name and/or No.
X7

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
LOCKHART B-11-17 EB4 #26

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

9. API Well No.
30-025-06536-00-C1

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

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

10. Field and Pool or Exploratory Area
Multiple--See Attached

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 11 T21S R37E SWNE 1980FNL 1980FEL

11. County or Parish, State
LEA COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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 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 performed the required testing for this well 6/13/2018, witnessed by the OCD. Passing chart attached.

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

**Electronic Submission #427847 verified by the BLM Well Information System
For APACHE CORPORATION, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 07/23/2018 (18PP1491SE)**

Name (Printed/Typed) REESA FISHER

Title SR STAFF REGULATORY ANALYST

Signature (Electronic Submission)

Date 07/18/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD

Approved By Kerry Fortner - OCD

Title

Date 8-10-18

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.

JUL 25 2018

/s/ Jonathon Shepard

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 the jurisdiction of the Bureau of Land Management.

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Additional data for EC transaction #427847 that would not fit on the form

10. Field and Pool, continued

WANTZ

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

BRADENHEAD TEST REPORT

Operator Name A PACHE Corp		API Number 30-025-06536
Property Name EBDU		Well No. 026

Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
G	17	21S	37-E	1980	N	1980	E	LEA

Well Status

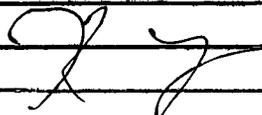
TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input type="radio"/> NO <input checked="" type="radio"/>	YES <input type="radio"/> NO <input checked="" type="radio"/>	<input checked="" type="radio"/> INJ SWD	OIL <input type="radio"/> GAS <input type="radio"/>	6-13-18

OBSERVED DATA

	(A) Surf-Interm	(B) Interm 1	(C) Interm 2	(D) Prod Csmg	(E) Gobing
Pressure	0	0	✓	0	1155
Flow Characteristics					
Puff	Y/N <input checked="" type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	CO2 _____
Steady Flow	Y/N <input checked="" type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	WTR _____
Surges	Y/N <input checked="" type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	GAS _____
Down to nothing	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	If applicable type
Gas or Oil	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	fluid injected for
Water	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Y/N <input type="radio"/>	Waterflood

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

M#T
maclasley
ser # 0733
cal 3-28-18

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date:	
Phone:	
Witness: Kerry Fortner - ocd	

399-3221