

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

HOBBS OCD State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OCT 10 2018

RECEIVED

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-06584
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name East Blinebry Drinkard Unit (EBDU) / 35023
8. Well Number 051
9. OGRID Number 873
10. Pool name or Wildcat Eunice; B-T-D, North (22900)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3427' GL

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.)

1. Type of Well: Oil Well Gas Well Other Injection

2. Name of Operator
Apache Corporation

3. Address of Operator
303 Veterans Airpark Lane, Suite 1000 Midland, TX 79705

4. Well Location
Unit Letter G : 1980 feet from the North line and 1650 feet from the East line
Section 14 Township 21S Range 37E NMPM County Lea

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>CTI</u> <input checked="" type="checkbox"/>	

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.

Apache converted this well to injection, per the following: (WFX-982)

9/10/2018 MIRUSU POOH LD prod equip.

9/11/2018 RIH w/bit & RBP to test tbg - test good. Casing leaked off; bleed air off.

9/12/2018 Re-test csg - test good. Log to 5585'; TOC @ 1020'. POOH

9/13/2018 RIH & set CBP @ 5710'. Test good; est inj rate, RIH & set cmt ret @ 5578'; test good.

9/14/2018 Pump 500 sx Class C Neat cmt to squeeze upper Blinebry 5614'-5690'.

9/17/2018 DO cmt to 5703'; test squeeze - test good. Cont to DO to 5850'; circ clean.

9/18/2018 Perf Blinebry @ 5731'-5845' w/2 SPF, 160 total shots.

9/19/2018 Acidize Blinebry w/6048 gal 15% HCL NEFE acid & 290# rock salt. Set Inj Pkr @ 5702'; csg tested good.

9/20/2018 POOH LD WS RIH w/2-3/8" IPC J-55 tbg w/EOT @ 5705'; circ 130 bbls pkr fluid.

9/21/2018 Csg tested good. Wait to run MIT w/OCD.

9/25/2018 Ran passing MIT w/OCD witness; chart attached.

9/26/2018 Begin injection @ 14 psi w/flow rate of 487 BW.

Spud Date: 10/5/1957 Rig Release Date: 10/31/1957

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

SIGNATURE Reesa Fisher TITLE Sr. Staff Reg Analyst DATE 10/2/2018

Type or print name Reesa Fisher E-mail address: Reesa.Fisher@apachecorp.com PHONE: (432) 818-1062

For State Use Only
APPROVED BY: Melissa Brown TITLE AO/I DATE 10/10/2018
Conditions of Approval (if any):

RBDMS - CHART - ✓

OCT 10 2018

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

BRADENHEAD TEST REPORT

Operator Name APACHE		API Number 30-025-06584
Property Name EAST Blinby DINKARD		Well No. 51

Surface Location									
UL - Lot	Section	Township	Range		Feet from	N/S Line	Feet From	E/W Line	County
G	14	21S	37E		1380	N	1650	E	LEA

Well Status											
TA'D WELL	YES	NO	SHUT-IN	YES	NO	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE
	<input checked="" type="radio"/>			<input checked="" type="radio"/>		<input checked="" type="radio"/>					9/25/18

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	ϕ	—	—	ϕ	ϕ
Flow Characteristics					
Puff	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	CO2 —
Steady Flow	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	WTR —
Surges	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	GAS —
Down to nothing	<input checked="" type="radio"/> N	Y/N	Y/N	<input checked="" type="radio"/> N	Type of Fluid
Gas or Oil	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	Injected for
Water	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	Waterflood if
					applies

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

Initial TEST

Signature:		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test
E-mail Address:		
Date: 9/25/18	Phone:	
	Witness: [Signature]	