

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 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.

File No.
NMLC065525A

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit or CA/Agreement, Name and/or No.
NMNM112723X

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

8. Well Name and No.
EAST BLINEBRY DRINKARD UNIT 57

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

9. API Well No.
30-025-29061-00-S1

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
EUNICE
WANTZ

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 1 T21S R37E NESW 1650FSL 1650FWL

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 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 Workover Operations
	<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 following workover operations:

- 5/29/2019 MIRUSU POOH w/prod equip.
- 5/30/2019 Cont POOH w/WS, tag fill @ 5830'. Broke circ. CO from 5830'-6420'; circ clean.
- 5/31/2019 Test lines. Acidize w/12,096 gal 15% acid & 5000# rock salt.
- 6/03/2019 Rel pkr, wash salt, POOH. RIH & set new Inj Pkr @ 5799'. Tested good.
- 6/04/2019 POOH LD WS RIH w/191 jts 2-3/8" K-55 tbg w/EOT @ 5806'. Circ 130 bbls packer fluid.
- 6/05/2019 NDBOP Csg tested good. Schedule MIT w/OCD.
- 6/07/2019 Ran good OCD witnessed test. Chart & Bradenhead attached.

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

Electronic Submission #468506 verified by the BLM Well Information System
For APACHE CORPORATION, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 06/11/2019 (19PP2144SE)

Name (Printed/Typed) REESA FISHER

Title SR STAFF REGULATORY ANALYST

Signature (Electronic Submission)

Date 06/11/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____

Title

Accepted for Record

JUN 12 2019
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.

Jonathon Shepard
Carlsbad Field Office
Office

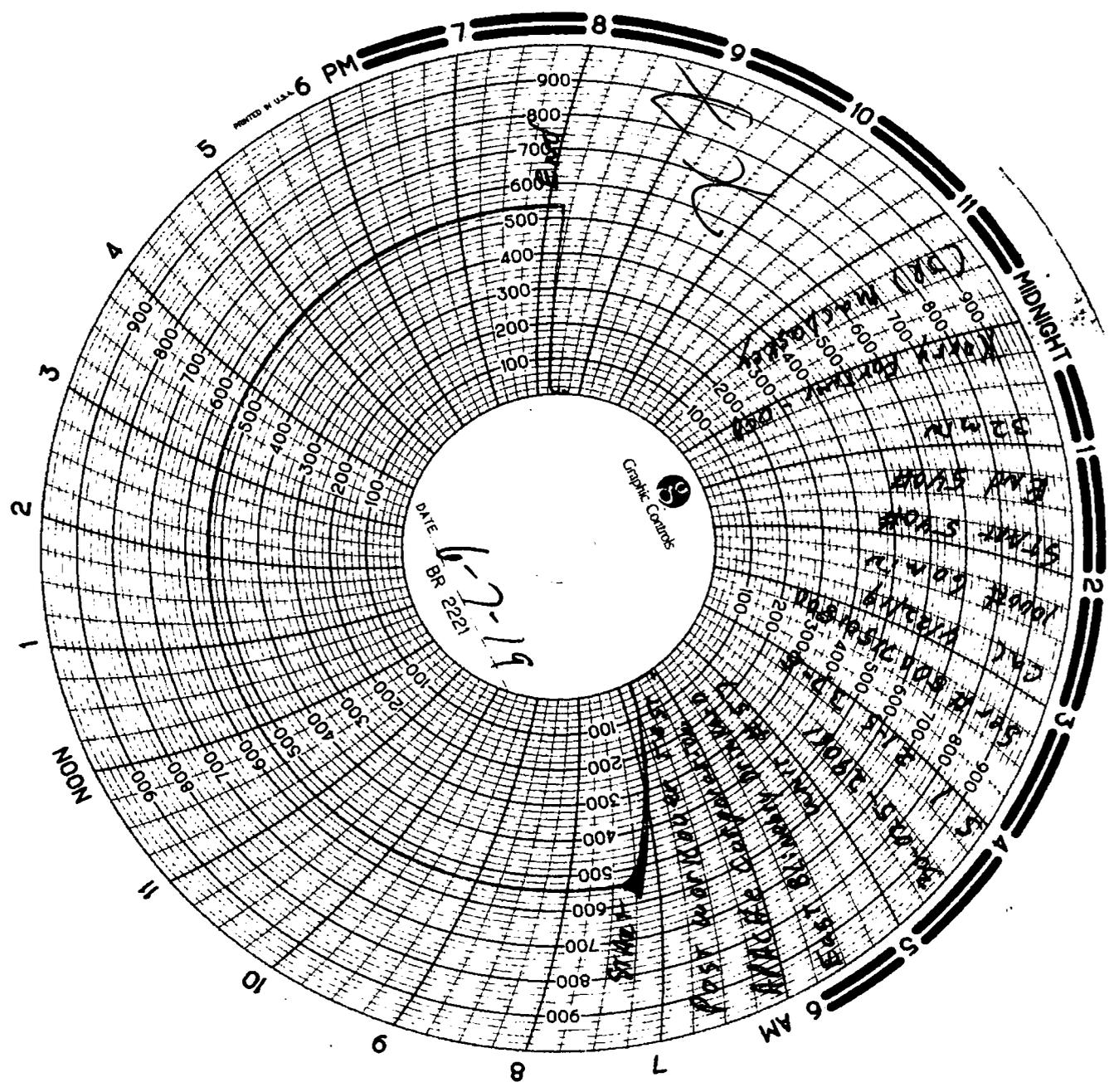
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

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

KZ NM OCD 7-11-19

FOR RECORD ONLY



District I
 1625 N French Dr Hobbs, NM 88240
 Phone (575) 393-6161 Fax (575) 393-0720

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

BRADENHEAD TEST REPORT

APACHE CORPORATION		Operator Name	API Number 30-025-29061-00-00	
EAST BLINEBRY DRINKARD UNIT			Property Name	Well No 057

Surface Location									
U/L - Lot S	Section 01	Township 21-S	Range 37-E		Feet from 1650	N/S Line S	Feet From 1650	E/W Line W	County LEA

Well Status					DATE
TA'D Well YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ <input type="radio"/> SWD	PRODUCER <input type="radio"/> OIL <input type="radio"/> GAS	6/7/19	

OBSERVED DATA

	(A) Surf Interm	(B) Interm (1)	(C) Interm (2)	(D) Prod Casing	(E) Tubing
Pressure	<u> </u>	<u> </u>	<u> </u>	0	2140
Flow Characteristics					NOT RDS
Full	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y <input type="radio"/> N	CO2 _____
Steady Flow	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y <input type="radio"/> N	WTR _____
Surges	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y <input type="radio"/> N	GAS _____
Down to nothing	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y <input type="radio"/> N	If applicable type
Gas or Oil	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y <input type="radio"/> N	fluid injected for
Water	Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y <input type="radio"/> N	Waterflood

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

Post workover test
(JR) Macclaskley
ser # 50071501800
Cal 4/22/19

Signature:		OIL CONSERVATION DIVISION	
Printed name		Entered into RBDMS	
Title:		Re-test X	
E-mail Address			
Date: 6/7/19	Phone		
Witness KERRY FORTNER-OCD 399-3221			