

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., 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 & Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

HOBBS OCD
DEC 16 2019
RECEIVED

Submit one copy to appropriate District Office

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Apache Corporation 303 Veterans Airpark Lane Suite 1000 Midland TX 79705		² OGRID Number 873
		³ Reason for Filing Code/ Effective Date NW / 11/20/2019
⁴ API Number 30-025-45769	⁵ Pool Name Triste Draw; Bone Spring	⁶ Pool Code 96603
⁷ Property Code 325016	⁸ Property Name Ghost Rider 22 15 Federal Com	⁹ Well Number 202H

II. ¹⁰Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
P	22	24S	32E		400	South	736	East	Lea

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	15	24S	32E		2584	South	990	East	Lea
¹² Lse Code F	¹³ Producing Method Code P	¹⁴ Gas Connection Date 11/20/2019	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
214984	Plains Marketing LP PO Box 4648 Houston TX 77210-4648	O
195739	Plains Pipeline LP	O
320009	Enlink Midstream Operating LP	G

IV. Well Completion Data

²¹ Spud Date	²² Ready Date	²³ TD	²⁴ PBTB	²⁵ Perforations	²⁶ DHC, MC
5/22/2019	11/20/2019	18,595	18,595	11,113-18,470	
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17-1/2"	13-3/8"	1094'	920 sx Class C		
12-1/4"	9-5/8"	6976'	1355 sx Class C		
8-1/2"	5-1/2"	18,595'	2960 sx Class C; 1900 sx Class H		
Tubing	2-7/8"	10,493'			

V. Well Test Data

³¹ Date New Oil	³² Gas Delivery Date	³³ Test Date	³⁴ Test Length	³⁵ Tbg. Pressure	³⁶ Csg. Pressure
11/20/2019	11/20/2019	11/25/2019	24		
³⁷ Choke Size	³⁸ Oil	³⁹ Water	⁴⁰ Gas	⁴¹ Test Method	
	1128	4233	1776	P	

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Reesa Fisher

Printed name:
Reesa Fisher

Title:
Sr Staff Reg Analyst

E-mail Address:
Reesa.Fisher@apachecorp.com

Date:
12/13/2019

Phone:
432-818-1062

OIL CONSERVATION DIVISION

Approved by:

P. M. [Signature]

Title:

L.M.

Approval Date:

12/16/2019

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.

5. Lease Serial No.
NMLC062269A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
GHOST RIDER 22-15 FEDERAL COM 202H

9. API Well No.
30-025-45645

10. Field and Pool or Exploratory Area
TRISTE DRAW; BONE SPRING

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

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

3a. Address
303 VETERANS AIRPARK LANE
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 22 T24S R32E SESE 400FSL 676FEL

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 Production Start-up
	<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 recompleat 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 recompleat 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 completed this well, as follows: (RR 8/8/2019)

- 09/22/2019 MIRU Complete Frac Fleet & assoc. equip.
- 09/23/2019-10/04/2019 Pressure test csg. Perf & Frac w/42 stages 11,113-18,500.
- Total Sand 15,269,590#
- Total Acid 640 BBL
- 10/04/2019 RDMO WO DOPS
- 10/24/2019-10/25/2019 Drill Out Plugs. Turn over to Production.
- 10/31/2019 MIRU WL Set packer @ 10,483. RDMO
- 11/07/2019 Rack pipe - prep to run prod.
- 11/08/2019 RIH w/184 jts 2-7/8 L-80 tbg.

14. I hereby certify that the foregoing is true and correct.
**Electronic Submission #495708 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 12/13/2019

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.

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Additional data for EC transaction #495708 that would not fit on the form

32. Additional remarks, continued

11/09/2019 SD due to high wind.

11/10/2019 Cont RIH w/129 jts 2-7/8 L-80 tbg w/EOT @ 10,493. Circ pkr fluid to surf.

11/11/2019 Pressure test csg to 500# for 30 min - tested good. RDMO

Needed Temp Facility Approval while WO Battery to be completed.

Approval Received 11/15/2019

12/05/2019 Submitted First Flow Sundry.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMLC062269A

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No.
GHOST RIDER 22 15 FEDERAL COM 202H

1a. Type of Well Oil Well Gas Well Dry Other

b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.
Other _____

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

3. Address 303 VETERANS AIRPARK LANE SUITE 1000
MIDLAND, TX 79705 3a. Phone No. (include area code)
Ph: 432-818-1062

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
At surface Sec 22 T24S R32E Mer SESE 400FSL 736FEL
At top prod interval reported below Sec 22 T24S R32E Mer SESE 400FSL 736FEL
At total depth Sec 15 T24S R32E Mer NESE 2584FSL 990FEL

9. API Well No.
30-025-45769

10. Field and Pool, or Exploratory
TRISTE DRAW; BONE SPRING

11. Sec., T., R., M., or Block and Survey
or Area Sec 22 T24S R32E Mer

12. County or Parish
LEA COUNTY

13. State
NM

14. Date Spudded
05/22/2019

15. Date T.D. Reached
08/08/2019

16. Date Completed
 D & A Ready to Prod.
11/20/2019

17. Elevations (DF, KB, RT, GL)*
3590 GL

18. Total Depth: MD 18595
TVD

19. Plug Back T.D.: MD 18595
TVD

20. Depth Bridge Plug Set: MD
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
NONE

22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit analysis)
Directional Survey? No Yes (Submit analysis)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J-55	54.0	1094			920		0	
12.250	9.625 HCL-80	40.0	6976			1355		0	✓
8.500	5.500 P-110RY	20.0	18595			4860		0	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	10493							

25. Producing Intervals

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	8791	18595	11113 TO 18470	0.300	420	PRODUCING
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
11113 TO 18500	15,269,590# PROPANT 640 BBL ACID

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
11/20/2019	11/22/2019	24	→	1128.0	1776.0	4233.0			GAS LIFT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→					POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #495706 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
QUATERNARY RUSTLER (T/SALT) BASE OF SALT DELAWARE SAND BONE SPRING	0 1050 4867 4867 8791	1050 4867 4867 8791	ALLUVIUM SALT SALT SANDSTONE MIXED CARBONATE O/G	QUATERNARY RUSTLER BASE SALT DELAWARE BONE SPRING	0 1050 4867 4867 8791

32. Additional remarks (include plugging procedure):

33. Circle enclosed attachments:

- 1. Electrical/Mechanical Logs (1 full set req'd.)
- 2. Geologic Report
- 3. DST Report
- 4. Directional Survey
- 5. Sundry Notice for plugging and cement verification
- 6. Core Analysis
- 7 Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #495706 Verified by the BLM Well Information System.
 For APACHE CORPORATION, sent to the Hobbs**

Name (please print) REESA FISHER Title SR STAFF REGULATORY ANALYST

Signature (Electronic Submission) Date 12/13/2019

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.

**** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ****