

Submit 1 Copy To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., 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 and Natural Resources

Form C-103
October 13, 2009

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

WELL API NO. 30-025-04141
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Monument G/SA Unit Blk. 19
8. Well Number 6
9. OGRID Number 873
10. Pool name or Wildcat Eunice Monument G/SA

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 ☐

2. Name of Operator
Apache Corp.

3. Address of Operator
P O box Drawer D Monument NM 88265

4. Well Location
Unit Letter F: 1980 feet from the N line and 1980 feet from the W line
Section 1 Township 20S Range 36E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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"/>			
OTHER: <input type="checkbox"/>		OTHER: TA Test <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.

- 1 RU Macklaskey truck. Hook up chart recorder.
- 2 Pressure up casing to 580# for 38 min. End pressure 575#.
- 3 Record test on chart. Bleed pressure to 0.
- 4 Request TA extension.

FINAL TA STATUS- EXTENSION
Approval of TA EXPIRES: 3-20-21
Well needs to be PLUGGED OR RETURNED
to PRODUCTION
BY THE DATE STATED ABOVE: X 7

Spud Date:

Rig Release Date:

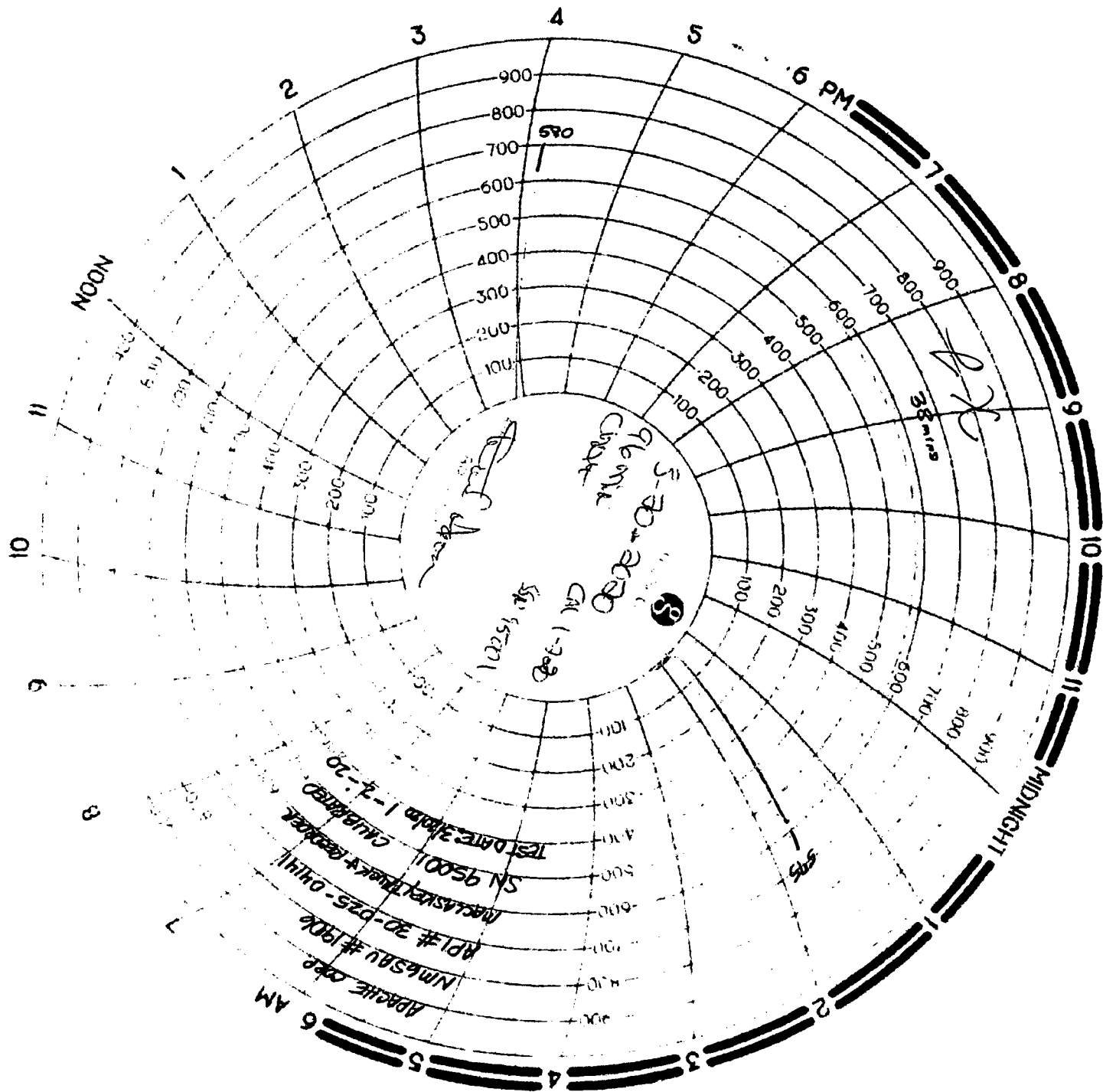
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE KPR TITLE Meter Tech DATE 3/20/2020

Type or print name Kevin Parker E-mail address: kevin.parker@apacheccorp.com PHONE: 575-441-5171

For State Use Only

APPROVED BY: Kevin Parker TITLE 3-20-2 DATE 3-27-20
Conditions of Approval (if any): CO A



Blindwell
1625 N French Dr., Hobbs, NM 88340
Phone: (575) 393-6151 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name APACHE CORP.	API Number 30-025-04141
Property Name NMQSAU	Well No. # 1906

Surface Location

UL - Lot F	Section 1	Township 20S	Range 36E	Feet from 1980	NS Line N	Feet from 1980	E/W Line W	County LEA
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Well Status

TA'D WELL <input checked="" type="radio"/> YES <input type="radio"/> NO	SHUT-IN <input checked="" type="radio"/> YES <input type="radio"/> NO	INJ <input type="radio"/> INJ <input type="radio"/> SWD	PRODUCER <input checked="" type="radio"/> OIL <input type="radio"/> GAS	DATE 3/20/2020
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Cmg	(E) Tubing
Pressure	Ø	300 psi	N/A	Ø	N/A
Flow Characteristics					
Puff	Y / (N)	Y / (N)	Y / N	(Y) N	CO2 WTR GAS Type of fluid injected for waterflood & others
Steady Flow	Y / (N)	Y / (N)	Y / N	Y / (N)	
Surges	Y / (N)	Y / (N)	Y / N	Y / (N)	
Down to nothing	Y / (N)	(Y) / N	Y / N	(Y) N	
Gas or Oil	Y / (N)	Y / (N)	Y / N	Y / (N)	
Water	Y / (N)	Y / (N)	Y / N	Y / (N)	

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

Signature KPL	OIL CONSERVATION DIVISION
Printed name: KEVIN PARKER	Entered into RBDMS
Title METER TECH	Re-test
E-mail Address: kevin.parker@apachecorp.com	27
Date: 3/20/2020	Phone: (575) 441-5171
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM