

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED  
OMB NO. 1004-0137  
Expires: March 31, 2007

1a. Type of Well ☐ Oil Well ☐ Gas Well ☐ Dry ☒ Other Injector **R-12394**  
b. Type of Completion ☐ New Well ☐ Work Over ☐ Deepen ☐ Plug Back ☐ Diff. Resvr.,  
Other Convert to Injector

2. Name of Operator  
Apache Corporation

3. Address  
6120 South Yale, Suite 1500 Tulsa OK 74136-4224

3.a Phone No. (Include area code)  
(918)491-5362

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*

At Surface Unit C, Sec 12, 330' FNL & 1980' FWL, T 21S, R 37E

At top prod. interval reported below

At total depth

14. Date Spudded  
01/29/1954

15. Date T.D. Reached

16. Date Completed  
☐ D & A ☒ Ready to Prod.  
08/11/2006

18. Total Depth: MD 6030'  
TVD

19. Plug Back T.D.: MD 6025'  
TVD

20. Depth Bridge Plug Set: MD  
TVD

21. Type of Electric & Other Mechanical Logs Run (Submit copy of each)

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

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 Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
	10-3/4"		0	242'		250		50' circ	
	7-5/8"		0	3149'		1570			
	5-1/2"		0	6030'		485			

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2-3/8"	5785'	5767'						

25. Producing Intervals

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Blinebry			5796-5840, 5874-5912'		336	Open
B)			5953,60,70,79,85 &		6	Open
C)			5996'			
D)						

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

Depth Interval	Amount and Type of Material
5953 - 5996'	Acidize with 500 gals 28% HCl.
5796 - 5996'	Acidize with 3000 gals 15% HCl.

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
			→						
Choice Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→						

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	
			→						

(See Instructions and spaces for additional data on page 2)

GWW

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	

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	

Show all important zones or 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.

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth

33. Indicate which itmes have been attached by placing a check in the appropriate boxes:

- |   |  |                                     |   |
|---|--|-------------------------------------|---|
| <input type="checkbox"/> Electrical/Mechanical Logs (1 full set req'd.)     | <input type="checkbox"/> Geological Report | <input type="checkbox"/> DST Report | <input type="checkbox"/> Directional Survey |
| <input type="checkbox"/> Sundry Notice for plugging and cement verification | <input type="checkbox"/> Core Analysis     | <input type="checkbox"/> Other      |   |

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

Name (please print) Elaine Linton Title Engineering Technician

Signature Elaine Hunter Date 04/03/2007

Title 18 U.S.C. Section 101 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 and false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.