Form 3160-5 (April2004)

(Instructions on page 2)

UNITEDSTATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-HORRS

FORMAPPROVED OM B No. 1004-0137 Expires: March 31, 2007

L	DUKEAU OF LAIND MANAGEMENT		5. Lease Se	erial No.			
SUNDRY	NOTICES AND REPORTS C	NMNM-	90161				
Do not use th	is form for proposals to drill or ell. Use Form 3160-3 (APD) for s	to re-enter an	6. If Indian	, Allottee or Tribe Name			
	PLICATE - Other instructions o	n reverse side.	7. If Unit	or CA/Agreement, Name and/or No.			
1. Type of Well X Oil Well	8. Well Na	8. Well Name and No.					
2. NameofOperator				Hawk B-1 #3			
Apache Corporation	9. API We						
3a. Address	30-025-	-09909					
6120 S Yale Ave, Suite 1		nd Pool, or Exploratory Area					
4. Location of Well (Footage, Sec	<u> </u>	Eunice; Blinebry-Tubb-Drinkard, North					
660 FNL & 1980 FWL UL C, Sec 9, T 21S, R 37	'E		11. County or Parish, State Lea County, New Mexico				
12. CHECK A	PPROPRIATE BOX(ES)TO INDICATE	E NATURE OF NOTICE, I	REPORT, OI	R OTHER DATA			
TYPEOF SUBMISSION		TYPE OF ACTION					
	Acidize Deepen	Production (St	tart/Resume)	Water Shut-Off			
☐ Notice of Intent	AlterCasing Fracture	Treat Reclamation		Well Integrity			
X Subsequent Report	Casing Repair New Con	struction Recomplete		X Other Well Record			
	Change Plans Plugand	Abandon Temporarily A	bandon.				
Final Abandonment Notice	Convert to Injection Plug Back	k 🔲 Water Disposa	ıl				
	OCD, Apache is correcting Pool of the in accordance with R-12538, effort		e; Blinebry-	France Weld			
14 Thombus add shoots 6				Constable -			
14. I hereby certify that the foregamme (Printed/Typed)	going is true and correct	1					
Sophie Mackay		Title Engineering Te					
Signature Sophi	e Mackay	Date 03/28/2007		D FOR RECORD			
	THIS SPACE FOR FEDERAL	. OR STATE OFFICE	USE	DFORKE			
Approved by	no Illellians		CCEPT				
certify that the applicant holds lega which would entitle the applicant		lease Office	\ \ '	PR 5			
States any false, fictitious or fraud	tle 43 U.S.C. Section 1212, make it a crime for a	ny person knowingly and willfull matter within its jurisdiction	yto make to an	y department or anche of the United			

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Avenue, 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 OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505

Form C-102 Revised October 12, 2005

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

30	API Number 0-025-09909)	² Pool Code ³ Pool Name 22900 Eunice; Blinebry-Tubb-Drinkard, North							
	rty Code 427		⁵ Property Name ⁶ Well Num HAWK B 1 03				Well Number 03			
	ID No. 73		8 Operator Name 9 E Apache Corporation				⁹ Elevation GR			
				10	Surface Loc	ation				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line		Count
C	9	21.0S	37E _		660	N	1980	w	Lea	
			11 Bottor	n Hole Lo	ocation If Di	fferent From S	Surface			

UL or lot no.

Section Township

Range

Lot Idn

Feet from the

North/South line

Feet from the

East/West line

County

12 Dedicated Acres
40

13 Joint or Infill

14 Consolidation Code

15 Order No.

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

16	17 OPER ATOR GERTIEICATION
	¹⁷ OPERATOR CERTIFICATION
	I hereby certify that the information contained herein is true and complete to
	the best of my knowledge and belief, and that this organization either owns a
	working interest or unleased mineral interest in the land including the
	proposed bottom hole location or has a right to drill this well at this location
	pursuant to a contract with an owner of such a mineral or working interest, or
	to a voluntary pooling agreement or a compulsory pooling order heretofore
	entered by the division.
'	
	Joshie Mackey 3/23/2007 Signature Date
	Signature / Date
	0
	Sophie Mackay
	Printed Name
	10
	¹⁸ SURVEYOR CERTIFICATION
	I hereby certify that the well location shown on this plat was plotted
	from field notes of actual surveys made by me or under my
	supervision, and that the same is true and correct to the best of my
	belief.
	Date of Survey
	Signature and Seal of Professional Surveyor:
	Certificate Number
	Certificate Number