Form 3160-5 (April2004)

## UNITEDSTATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

1	BUREAU OF LAND MANAGEMENT		5. Lease Serial No.
SUNDRY	LC-065525-B		
Do not use the abandoned we	6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRI	7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well X Oil Well	Gas Well Other		East Blinebry Drinkard Unit #9
	8. Well Name and No.		
2. NameofOperator Apache Corporation	9. API Well No.		
3a. Address	3b. PhoneN	lo.(include area code)	30-025-34937
6120 S Yale Ave, Suite 1	10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Se	c., T., R., M., or Survey Description)		Eunice; Blinebry-Tubb-Drinkard, North
990 FSL & 2480 FWL UL V, Sec 1, T 21S, R 37	'E		11. County or Parish, State Lea County, New Mexico
12. CHECK AI	PPROPRIATE BOX(ES)TO INDICATE	NATURE OF NOTIC	E, REPORT, OR OTHER DATA
TYPE OF SUBMISSION		TYPE OF ACTION	٧
	Acidize Deepen	Production	n (Start/Resume) Water Shut-Off
Notice of Intent	☐ AlterCasing ☐ FractureT	reat Reclamati	on Well Integrity
X Subsequent Report	Casing Repair New Con	struction Recomple	te X Other Well Record
	Change Plans Plug and A	Abandon Temporari	ily Abandon
Final Abandonment Notice	Convert to Injection Plug Back	Water Disp	oosal
	OCD, Apache is correcting Pool (s in accordance with R-12538, effo		nice; Blinebry-Tubb-Drinkard, North)
			A STATE OF THE STA
14. I hereby certify that the fore	going is true and correct		
Name (Printed/Typed) Sophie Mackay		Title Engineering	Tech
Signature Soshie	2 Markay	Date 03/28/2007	
270/00-	THIS SPACE FOR FEDERAL	OR STATE OFFI	CE USE
- //	1. 1.0		ACCEPTED FOR RECORD
	attached. Approval of this notice does not warral or equitable title to those rights in the subject to conduct operations thereon.		APR 5
Title 18 U.S.C. Section 1001 and Tit		ny person knowingly and wi matter within its jurisdiction	
(Instructions on page 2)	PETROLEUM ENGINEER		

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

		WE	<u>LL LOCA</u>	TION A	<u>ND ACREA</u>	GE DEDICA	TION PLAT			
<sup>1</sup> API Number			<sup>2</sup> I	<sup>2</sup> Pool Code <sup>3</sup> Pool Name			2			
30-025-34937				22900 Eunice; Blinebry-Tubb-Drinkard,						
<sup>4</sup> Property Code				<sup>5</sup> Property Name					<sup>6</sup> Well Number	
35023			EAST BLINEBRY DRINKARD UNIT						09	
7 OGRI	<sup>7</sup> OGRID No.			<sup>8</sup> Operator Name					<sup>9</sup> Elevation	
87	873 Apache Corporation						3516 GR			
<sup>10</sup> Surface Location										
UL or lot no.	Section	l'ownship	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line		County
V	1	21.0S	37E		990	S	2480	W	Lea	
11 Bottom Hole Location If Different From Surface										
UL or lot no.	Section	Cownship	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line		County
Dedicated Acres    13   Joint or Infill   14   Consolidation Code   15   Order No.    40     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	<sup>17</sup> 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 hottom hole locat
	1
	Signature Lackay 3/23/2007 Date Date
	Signature Date
	<i></i>
	Sophie Mackay
	Printed Name
	18
	<sup>18</sup> 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:
	organicate and ocur of Professional Surveyor.
/ [	
	Certificate Number