Form 3160-4 (August 2007) INITED STATES OCD-HOIDES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT HOBBSOCC WELL COMPLETION OR RECOMPLETION REPORT AND LOG WELL COMPLETION OR RECOMPLETION REPORT AND LOG Net Lasse Strial No. NM 90161 Ia. Type of Well Other Dry Other S. Lease Strial No. NM 90161 Ia. Type of Completion: New Well Bork Over Deepen Phug Back Duff. Resvr., 7. Unit or CA Agreement Name and No. WBDU 2. Name of Operator Apache Corporation 0. ther Converted to Injection 918.491.4968 30-025-09909 3. Address Bits 05 Yels Ave, sure 1500 Tube, Order Control Clearly and in accordance with Federal requirements)* 10. Field and Pool or Exploratory Unit C, 660' FNL & 1980' FWL At surface See 9, T21S, R37E 11. See, T. R. M. on Block and Survey or Arcas See 7, 172S, R37E At top prod. interval reported below 12. County or Parish 13. Date T.D. Reached 16. Date Completed 11/23/2009 17. Elevations (DF, R&B, RT, GL)* 14 Date Spudded 15. Date T.D. Reached 16. Date Completed 11/23/2009 17. Elevations (DF, R&B, RT, GL)* 14 Date Spudded 15. Date T.D. Reached 16. Date Completed 11/23/2009 17. Elevations (DF, R&B, RT, GL)* 14 Date Spudded 15. Dat	Form 3160-	4								RE	C	Sina							
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BUREAU OF LAND MANAGEMENT HOBBSOCC Expires: July 31, 2010 WELL COMPLETION OR RECOMPLETION REPORT AND LOG Network of the second se				DE				ERIOR		MAR	1	0 201	0						
WELL COMPLETION OR RECOMPLETION REPORT AND LOG 5. Lease Serial No. NM 90161 In Type of Well b. Type of Completion: Other b. Type of Completion: Wew Well Work Over Deepen Plug Back Diff. Resvr., Other: Converted to Injection 2. Name of Operator 8. Lease Name and Well No. Apache Corporation 8. Lease Name and Well No. 3. Address 6120 S Yale Ave, Suite 1500 138. Phone No. (include area code) g 718.491.4968 30-025-09909 4. Location of Well (Report location clearly and in accordance with Federal requirements)* 10. Field and Pool or Exploratory Link: Surface Sec 9, 721S, R37E 10. Field and Pool or Exploratory At top prod. interval reported below 12. County or Parish 13 State Leas 13. Date T.D. Reached 16. Date Completed 11/23/2009 17. Elevations (DF, RKB, RT, GL)* 14 Date Spudded 15. Date T.D. Reached 16. Date Completed 11/23/2009 17. Elevations (DF, RKB, RT, GL)* 18 Total Depth: MD 6782' 19. Plug Back T.D.; MD 6726' 20. Depth Bridge Plug Set; MD TVD 21. Type Electing & Other Mechanical Logs Run (Submit copy of ea				BUR	EAU OF	LAND MAI	NAG	EMENT		HOB	B	SOC	n						
b. Type of Completion: New Well Work Over Deepen Plug Back Diff. Resvr., NA 7. Unit or CA Agreement Name and No. WBDU 8. Lease Name and Well No. WBDU 2. Name of Operator 8. Lease Name and Well No. West Blinebry Drinkard Unit #34 3. Address sit20 \$ Yale Ave, Suite 1500 3a. Phone No. (include area code) 9. AFF Well No. 3. Address of 20 \$ Yale Ave, Suite 1500 3a. Phone No. (include area code) 9. AFF Well No. 3. Address of 20 \$ Yale Ave, Suite 1500 3a. Phone No. (include area code) 9. AFF Well No. 4. Location of Well (Report location clearly and in accordance with Federal requirements)* 10. Field and Pool or Exploratory Unit C, 660' FNL & 1980' FWL At surface Sec 9, T21S, R37E 10. Field and Pool or Exploratory At top prod. interval reported below 12. County or Parish 13 State 14 Date Spudded 15. Date T.D. Reached 16. Date Completed 11/23/2009 17. Elevations (DF, RKB, RT, GL)* 3488' 18 Total Depth: MD 6782' 19. Plug Back T.D.; MD 6726' TVD TVD TVD 20. Depth Bridge Plug Set: MD TVD 21. Type Electric & Other Mechanical Logs Run (Submit copy of each) 22. Was well cored? No<		W	ELL C	OMPLET	ION OR F	RECOMPLE	TION		AND L	OG			5. L						
Other: Converted to Injection 7. Unit or CA Agreement Name and No. WBDU 2. Name of Operator 8. Lease Name and Well No. West Blinebry Drinkard Unit #34 3. Address 6120 S Vale Ave, Suite 1500 Tubia, OK 74136 918.491.4968 4. Location of Well (<i>Report lacation clearly and in accordance with Federal requirements</i>)* 9. AFI Well No 30-025-09909 Unit C, 660' FNL & 1980' FWL At surface Sec 9, T21S, R37E 10. Field and Pool or Exploratory Eunice; Blinebry-Tubb-Drinkard, North 14. Date Spudded 15. Date T.D. Reached 16. Date Completed 11/23/2009 18. Total Depth: MD 6782' TVD 19. Plug Back T.D.: MD 6726' 12. Type Electric & Other Mechanical Logs Run (Submit copy of each) 22. Was well cored? 23. Casing and Liner Record (<i>Report all strings set in well</i>) Botom (MD) Hole Size Size/Grade Wt. (#/ft.) Hole Size Size/Grade Wt. (#/ft.)				ul Well										Indiar	n, Allottee o	r Trib	e Name		
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		Size/Gi	rade	wt. (#/n.)	10p (MD)	Bollom (MD		Depth	Туре	of Cemen	ıt	(BBI	-)	00	ment top	+	Aniou		
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									<u> </u>						<u> </u>				
24. Tubing Record Size Depth Set (MD) Packer Depth (MD) Size Depth Set (MD) Packer Depth (MD)			Set (MD) Packer D	epth (MD)	Size	D	Pepth Set (MD)	Packer	Depth (MI))	Size		Dej	pth Set (MD)	Packer	Depth ((MD)
2-3/8" 5719' 5740' 25. Producing Intervals 26. Perforation Record				5740'			26	Perforation	Record			-							
Formation Top Bottom Perforated Interval Size No. Holes Perf. Status		Formatio			Тор	Bottom		Perforated In			S	ize	No. H	loles		P	erf. Statu	S	
A) Blinebry 5776' - 6065' Injecting B) Drinkard 6510' - 6721' Injecting							- <u> </u> -												,
B) Drinkard 6510' - 6721' Injecting C)	Unikar	<u>a</u>					- 65	010 - 6721							Injecting	2			
D)																			
27. Acid, Fracture, Treatment, Cement Squeeze, etc. Depth Interval Amount and Type of Materi Test did not reach 500 psi. Retest				Cement Squee:	ze, etc.				Amount	and Type (of M	ateri T	oct di	d no	t roach	500	nci R	atact	the
5776' - 6065' Acidized w/3k gals 15% HCl wellbore and notify the BLM 575-3																			
6510' - 6721' Acidized w/3k gals 15% HCl 3612 a minimum of 24 hrs before l	6510' - 672	21'		Acidiz	ed w/3k ga	Is 15% HCI									•				
will be done.			· · · · · · · · · · · · · · · · · · ·							<u> </u>					will be	dor	ne.		
28. Production - Interval A Date First Test Date Hours Test Dil Gas Water Dil Gravity Gas Production Method				Test	Dil	Gas	Water	Oil Grav	nty	Gas		Produ	ction M	ethod					
Produced Tested Production BBL MCF BBL Corr. API Gravity	Produced		Tested	Production			BBL			Gravit	у			201					
Choke Tbg. Press. Csg. 24 Hr. Oil Gas Water Gas/Oil Well Status ACCEPTED FOR RECO Size Flwg. Press. Rate BBL MCF BBL Ratio	-									Well S	tatus	5	- A(jiji	PIED	FC	RR	<u>-CO</u>	RD
Size Flwg, Press, Rate BBL MCF BBL Ratio			r 1693.		DDL											<u></u>		Ţ	
28a. Production - Interval B MAR 3 7()1()			_			L		l	·····						MAR	3	2010		
Date First Test Date Hours Test Oil Gas Water Oil Gravity Gas Production Method // Chris Walls		l'est Date									у	Produ	ctibn Me	ethod	/s/ Ch	ris	Mai		
BUREAU OF LAND MANAGEMENT													É	SURE	AU OF LA	ND N	ANAGE	S J MENT	
Choke Tbg. Press. Csg. 24 Hr. Oil Gas Water Gas/O11 Well Status LCARLSBAD FIELD OFFICE Size Flwg. Press, Rate BBL MCF BBL Ratio SI	Size F	Flwg.							_	Well S	tatus	3	L		HKL2RAD	FIEL	<u>D OFFI</u>	CE	

*(See instructions and spaces for additional data on page 2)

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Gas Gravıty	Production Method	

28h Prod	uction - Inte	rval C							
	Test Date		Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oıl BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
28c. Produ	uction - Inte	rval D							
Date First Produced	Test Date	Hours Tested	Test Production	Oıl 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 (Solid, used for fuel, vented, etc.)

how all important zo acluding depth interv ecoveries.	ones of por al tested,	rosity and contents t cushion used, time t	hereof: Cored intervals and all drill-stem tests, sool open, flowing and shut-in pressures and		
			Descriptions, Contents, etc.		Тор
Formation	Тор	Bottom		Name	Meas. Depth

- _-

32. Additional remarks (include plugging procedure):			Bureau of Lar Fr	ten nanagement cerven EB 0 5 2010 carlsbau ried ornice carlsbau ried ornice
33. Indicate which items have been attached by placing a check	in the appropriate boxes:			
Electrical/Mechanical Logs (1 full set req'd.)	Geologic Report	DST Report	Directional Survey	
Sundry Notice for plugging and cement verification	Core Analysis	Other:		
34. I hereby certify that the foregoing and attached information	is complete and correct as de	termined from all availab	le records (see attached instructions)*	
Name (please print) Amper Cooke	Title	Engineering Tech		
Signature	Date	02/04/2010		
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, false, fictitious or fraudulent statements or representations as to	make it a crime for any perso any matter within its jurisdic	n knowingly and willfully tion.	y to make to any department or agency	of the United States any