

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240
FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injection	5. Lease Designation and Serial No. NM-2512
2. Name of Operator Apache Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 2000 Post Oak Blvd., Suite 100, Houston, Texas 77056-4400 / 713-296-6000	7. If Unit or CA, Agreement Designation Northeast Drinkard Unit # 405
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FNL & 1980' FEL, Unit B, Sec. 10, T-21S, R-37E	8. Well Name and No. 30-025-06450
	9. API Well No. 30-025-06450
	10. Field and Pool, or Exploratory Area Eunice N., Blinberry-Tubb-Drinkard
	11. County or Parish, State Lea County, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Convert to Injection</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form)

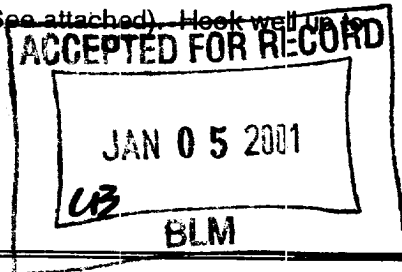
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

10/9/00 MIRU. Pull out of hole w/ production equipment.

10/10/00 Run in hole w/ bit & scraper. Tag PBTD @ 6716'. Pull out of hole w/ bit & scraper. Run in hole w/ packer & set @ 5530'. Test casing to 500# for 15 minutes. Pull out of hole.

10/11/00 Run in hole w/ 2-3/8" polylined tubing & packer, set packer @ 5537'. Load backside.

10/12/00 Pressure test casing to 500# for 30 minutes - tested OK. (See attached). Hook well up on injection system. Put on injection.



14. I hereby certify that the foregoing is true and correct

Signed Debra J. Anderson Title Sr. Engineering Technician Date 11/27/00

(This space for Federal or State office use)

Approved by _____ Title _____ Date DEC 05 2000

Conditions of approval, if any:

Title 18 U.S. C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side