

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED
OMB NO. 1004-1037
Expires: November 30, 2000

1a. Type of Well:
 Oil Well Gas Well Dry Other
 b. Type of Completion:
 New Well Workover Deepen Plug Back Diff. Resvr.
 Other Return TA'd Well to Production & Downhole Commingle

2. Name of Operator
Apache Corporation

3. Address
2000 Post Oak Blvd, Ste. 100, Houston, Texas 77056-4400

3a. Phone No. (include area code)
713-296-6000

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
 At surface 660' FNL & 1980' FWL, Unit C
 At top prod. interval reported below
 At total depth

10. Field and Pool, or Exploratory
Blinebry Oil & Gas / Tubb Oil & Gas

11. Sec., T., R., M., or Block and Survey or Area
Sec. 9, T-21S, R-37E

12. County or Parish 13. State
Lea NM

14. Date Spudded
15. Date T.D. Reached
16. Date Completed
 D & A Ready to Produce
 11/06/01 3486' GL

18. Total Depth: MD 6782 19. Plug Back T.D.: MD 6375 20. Depth Bridge Plug Set: MD 6375
 TVD TVD TVD

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

22. Was well cored? No Yes (Submit analysis)
 Was DST run? No Yes (Submit report)
 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 Sk. & Type of Cement	Shury Vol. (BBL)	Cement Top*	Amount Pulled
15-1/2	13	48#	0	206		200	-	Surface	
12-1/4	9-5/8	36#	0	2779		500		1625' (TS)	
8-3/4	7	23#	0	6781		500		3550' (TS)	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2-7/8	6351							

25. Producing Intervals 26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf Status
Blinebry			5776 - 6065	-	78	Producing
Tubb			6230 - 6350	-	240	Producing

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

Depth Interval	Amount and Type of Material
5776 - 6350	Acidize w/ 5000 gals 15% HCL
6230 - 6350	Acidize w/ 5000 gals 15% HCL

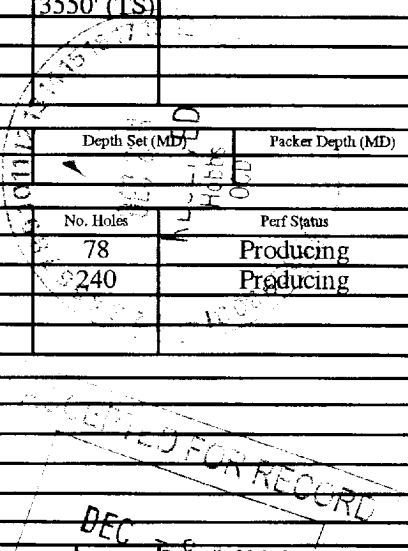
28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
11/6/01	11/24/2001	24	→	3	12	20	36.4		Pumping
Choke Size	Tubing Pressure Flwg. SI	Casing Pressure	24 Hour Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→				4000		Producing

28a. 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
11/6/2001	11/24/2001	24	→	2	3	10	36.4		Pumping
Choke Size	Tubing Pressure Flwg. SI	Casing Pressure	24 Hour Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→				1500		Producing

(See instructions and spaces for additional data on reverse side)



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28b. Production - Interval C

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	Tubing Pressure Flwg. SI	Casing Pressure	24 Hour Rate →	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	

28c. Production - Interval D

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	Tubing Pressure Flwg. SI	Casing Pressure	24 Hour Rate →	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

Sold

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of 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.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, Etc.	Name	Top Measured Depth

32. Additional remarks (include plugging procedure):

33. Mark enclosed attachments:

- Electrical/Mechanical Logs (1 full set req'd.)
 Geologic Report
 DST Report
 Directional Survey
 Sundry Notice / Plugging / Cement Verification
 Core Analysis
 Other NM-OCD C-104

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)~~ Debra J. Anderson

Title Sr. Engineering Technician

Signature *Debra J. Anderson*

Date 11/28/2001