Oklahoma Corporation Commission Oil & Gas Conservation Division Post Office Box 52000

Oklahoma City, Oklahoma 73152-2000

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Rule	165:	10-3-	25

1. API No.: 35009216860000
2. OTC Prod. Unit No.: 009119444
3. Date of Application: March 20, 2013

4. Application For (check one)

- X A. Commingled Completion in the Wellbore (165:10-3-39)
 - B. Commingled Completion at the Surface (165: 10-3-39)
 - C. Multiple (Dual) Completion (165: 10-3-36)
 - D. Downhole Multiple Choke Assembly (165: 10-3-37)

Yes

X No

5. Operator Information

APACHE CORPOR	ATION				OTC/OCC No. 6778	1
6120 S YALE AVE S	STE 1500					7
TULSA, OK 74136-4	4224				A 70	-
Phone	9184914900				10 10	1
Fax	9184914869				11 14	
6. Lease Name/We	II No. MORSE 3-13					
7 Location within	Sec (1// 1// 1// 1//)	N2 S2 NIMA SEA	Soc 13	Two 11N Par	22W County BECKHAM	

The Following Facts	s are Submitted			1 2	
Name of common source	of supply	DES MOINES	Top and bottom of pay se	ction (perforations)	15036 - 15045
Type of production (oil or gas)		Gas Method of production (lowing or art. lift) Flowing	
Latest test data by zone (oil, gas, and water)	0 OBD, 421 MCFD, 3 WBD	Wellhead or bottomhole p	ressure	200
Spacing O	rder	Increa	sed Density	Location	Exception
Order Number Unit Size		Order Number	er Unit Size	Order Number	Unit Size
131148	640	536242	7		
Name of common source	of supply	ATOKA Gas	Top and bottom of pay se Method of production (flo	,	15244 - 15399 Flowing
Name of common source Type of production (oil or	of supply	ATOKA		wing or art. lift)	
Name of common source Type of production (oil or Latest test data by zone (of supply r gas) oil, gas, and water)	ATOKA Gas 0 OBD, 421 MCFD, 3 WBD	Method of production (flo	wing or art. lift)	Flowing

9. List all the operators with mailing addresses within 1/2 mile, producing from the above listed zones.

If 4A, 4B, or 4D above, and size of units under 8G above are not the same, have the different allocations been addressed?

APACHE CORPORATION

April 01, 2013 1 of 2

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Oklahoma City, Oklahoma 73152-2000 Rule 165: 10-3-25

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0. The operators listed above have been notified and furnished a copy of this application. If no, an affidavit of mailing must be	X Yes	No	
led no later than five (5) days after submission of this application.			

11. Classification of well (see OAC 165:10-13-2): Gas

12. A	ttac	h the	Fo	lowing
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A. Correlation log section (porosity, resistivity, or gamma ray) with top and bottom of perforated intervals marked. B. Diagrammatic sketch of the proposed completion of the well.		5	N	Ų.
C. Plat showing the location of all wells within 1/2 mile producing from the zones listed above.		AGOS		
D. If 4B, 4C, or 4D above, a Form 1024, Packer Setting Report, and a Form 1025 Packer Leakage Test.		-	3	Α.
E. If 4A, 4B, or 4D above, and size of units under 8G above are not the same, have the different allocations been addressed?	ds.	Yes	X No	4

I herby certify that I am authorized to submit this application which was prepared by me or under my supervision. The facts and proposals made herein are true, correct, and complete to the best of my knowledge and belief.

Jill Bilby	Engineering Tech	918-491-5362
Signature	Title	Phone (AC/NO)

240

April 01, 2013 2 of 2