

Railroad Commission of Texas

Oil And Gas Division

Form P-8

Request for Clearance of Storage Tanks

Prior to Potential Test

Reference No. 47276

1. Operator's Name and Address (Exactly as shown on Form P-5 Organization Report) APACHE CORPORATION ATTN REGULATORY STE 3000 303 VETERANS AIRPARK LN MIDLAND, TX 79705-0000		3. RRC District No. 7C
2. RRC Operator Number: <u>027200</u>		4. County of Well Site REAGAN
6. Field Name (Wildcat or exactly as shown on RRC records) SPRABERRY (TREND AREA)		7. Drilling Permit No. 841722
9. Lease Name UNIVERSITY 25W		8. Rule 37 Case No.
12. Drilling completed on <u>12/08/2018</u>		13. Completion report--Form W-2 or G-1--will be filed on <u>02/15/2019</u>
14. Oil or condensate gatherer's name and address MEDALLION OPERATING COMPANY, LLC 909 LAKE CAROLYN PKWY STE 1600 IRVING, TX 75039 (972) 746-4401		15. Authorization to transport oil or condensate (mark one) <input checked="" type="checkbox"/> Form P-4 attached <input checked="" type="checkbox"/> Form P-4 Filed on <u>12/21/2018</u>
16. This request is for <u>30000</u> barrels of <input checked="" type="checkbox"/> crude oil OR <input type="checkbox"/> condensate		17. Amount of oil/condensate in tanks <u>1000</u> barrels on <u>01/29/2019</u>
18. Storage capacity in bbls. Tank battery <u>3000</u> Test tanks <u>0</u> Total <u>3000</u>		
19. Previous request for clearance. Amount _____ barrels granted on _____		
20. Reason for current request for clearance (explain briefly) Request is for clearance prior to completion being filed.		
Sherene Starr _____ Name of operator's representative		SR. REGULATORY ANALYST _____ Title of person
(432) 818-1023 _____ Telephone		01/29/2019 _____ Date
RRC District Office Action		
Status: Approved	Barrels recommended <u>30000</u>	RRC Staff _____ _____ Date

12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G)

a. Change of: operator oil or condensate gatherer gas gatherer gas purchaser gas purchaser system code
 field name from _____
 lease name from _____

OR

b. New RRC Number for: oil lease gas well other well (specify) _____ Due to: new completion or recompletion reclass oil to gas reclass gas to oil
 consolidation, unitization, or subdivision (oil lease only)

13. Authorized GAS WELL GAS or CASINGHEAD GAS Gatherer(s) and/or Purchaser(s). (See instruction G).

Gatherer	Purchaser	Name of GAS WELL GAS or CASINGHEAD GAS Gatherer(s) or Purchaser(s) As Indicated in Columns to the Left (Attach an additional sheet in same format if more space is needed)	Purchaser's RRC Assigned System Code	Percent of Take	Full-well stream
X	X	CONGENT MIDSTREAM LOGISTICS, LLC (166219)	0001	100	

14. Authorized OIL or CONDENSATE Gatherer(s). (See instruction G).

Name of OIL or CONDENSATE Gatherer(s) - List Highest Volume Gatherer First (Attach an additional sheet in same format if more space is needed)	Percent of Take	RRC USE ONLY	
MEDALLION OPERATING COMPANY, LLC (558336)	100	Reviewer's initials _____	Approval date: _____

15. PREVIOUS OPERATOR CERTIFICATION FOR CHANGE OF OPERATOR P-4 FILING. Being the PREVIOUS OPERATOR, I certify that operating responsibility for the well(s) designated in this filing, located on the subject lease has been transferred in its entirety to the above named Current Operator. I understand, as Previous Operator, that designation of the above named operator as Current Operator is not effective until this certificate is approved by the Commission.

Name of Previous Operator _____

Signature _____

Name (print) _____

Authorized Employee of previous operator

Authorized agent of previous operator (see instruction G)

Title _____

Date _____

Phone with area code _____

16. CURRENT OPERATOR CERTIFICATION. By signing this certificate as the Current Operator, I certify that all statements on this form are true and correct and I acknowledge responsibility for the regulatory compliance of the subject lease including plugging of well(s) pursuant to Rule 14. I further acknowledge that I assume responsibility for the physical operation, control, and proper plugging of each well designated in this filing. I also acknowledge that I will remain designated as the Current Operator until a new certificate designating a new Current Operator is approved by the Commission.

SHERENE STARR

Sherene Starr

Name (print) _____

Signature _____

REGULATORY ANALYST

Authorized Employee of current operator

Authorized agent of current operator (see instruction G)

Title _____

sherene.starr@apachecorp.com

12/21/18

(432) 818-1023

E-mail Address (optional) _____

Date _____

Phone with area code _____