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1220 S. St. Francis Dr., Santa Fe, NM 87505

APR 14 2010
HOBSOCD

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
June 19, 2008

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| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | WELL API NO. 30-025-26990 |
| 1. Type of Well: <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: Injection well | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator Apache Corporation | | 6. State Oil & Gas Lease No. NA |
| 3. Address of Operator 6120 S Yale Ave, Suite 1500 Tulsa, OK 74136 | | 7. Lease Name or Unit Agreement Name Northeast Drinkard Unit |
| 4. Well Location Unit Letter I : 3330 feet from the North line and 467 feet from the East line Section 4 Township 21S Range 37E NMPM County Lea | | 8. Well Number 202 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3452' GR | | 9. OGRID Number 873 |
| | | 10. Pool name or Wildcat Eunice; Blinebry-Tubb-Drinkard, North |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

| | | | |
|--|--|--|--|
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> | | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> | |
| OTHER: <input type="checkbox"/> | | OTHER: MIT test <input checked="" type="checkbox"/> | |

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Unitized Injection Interval: 5530' - 6680'

The following well failed an MIT test 1/8/2010.

3/18/10 The MIT failed due to fluid on the casing. Apache tied a vacuum truck on them and bled the fluid off. Packer @ 5605'. The well was retested and passed MIT test, notified NMOCD of test.

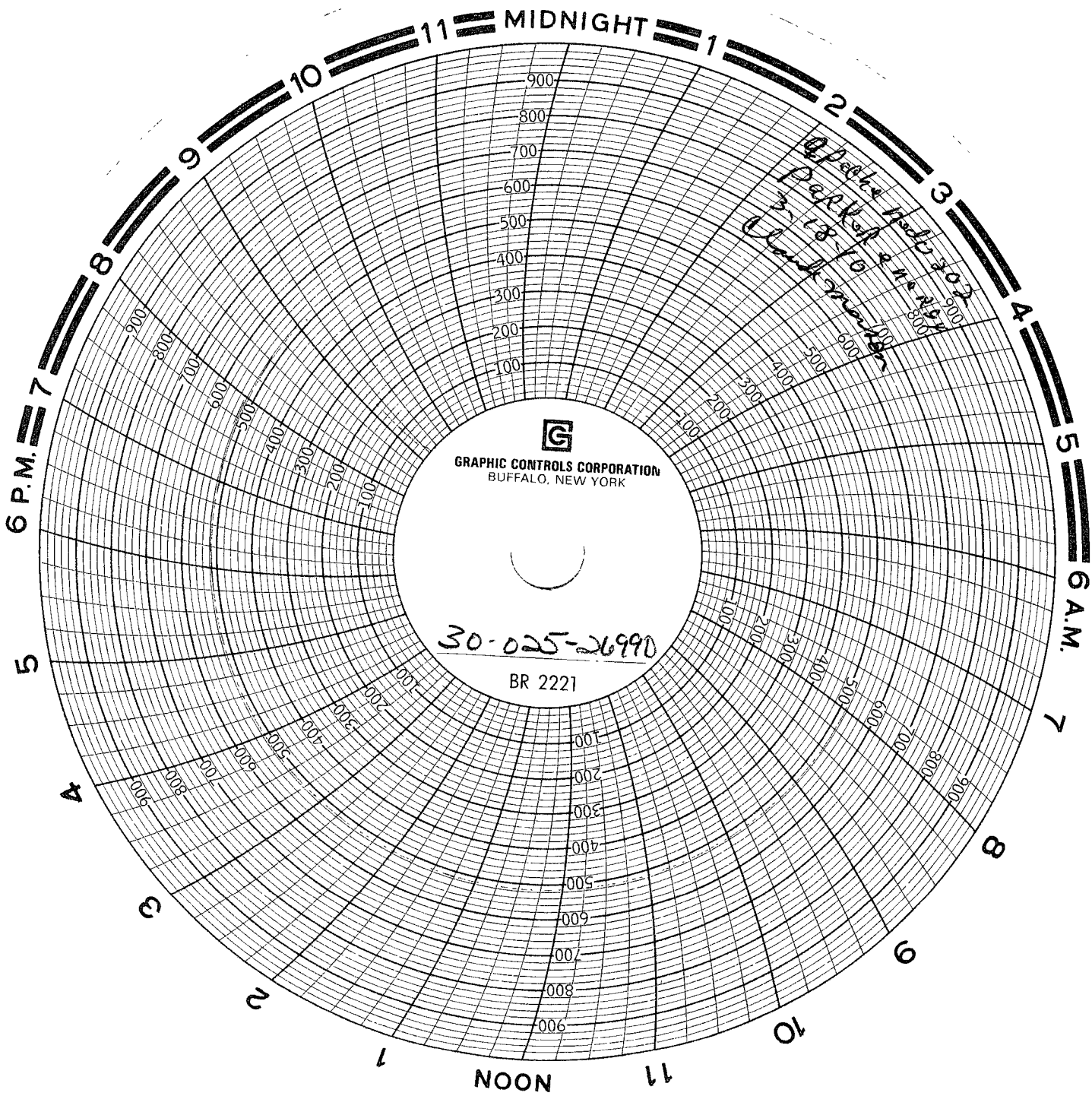
Spud Date: Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Amber Cooke TITLE Engineering Tech DATE 04/08/2010

Type or print name Amber Cooke E-mail address: amber.cooke@apachecorp.com PHONE: 918.491.4968
For State Use Only

APPROVED BY: [Signature] TITLE STAFF MGR DATE 4-8-10
Conditions of Approval (if any):




GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

30-025-26990

BR 2221

Parker Model 302
Parker 10-10
Clark 2000