

Submit a Copy To Appropriate District Office  
 District I – (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II – (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III – (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV – (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| WELL API NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 6. State Oil & Gas Lease No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 7. Lease Name or Unit Agreement Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| 8. Well Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| 9. OGRID Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| 10. Pool name or Wildcat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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.)<br>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/><br>2. Name of Operator<br>3. Address of Operator<br>4. Well Location<br>Unit Letter _____: _____ feet from the _____ line and _____ feet from the _____ line<br>Section _____ Township _____ Range _____ NMPM _____ County _____<br>11. Elevation (Show whether DR, RKB, RT, GR, etc.) |  |

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

| NOTICE OF INTENTION TO:                        | SUBSEQUENT REPORT OF:                            |
|------------------------------------------------|--------------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>           |
| TEMPORARILY ABANDON <input type="checkbox"/>   | ALTERING CASING <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| DOWNHOLE COMMINGLE <input type="checkbox"/>    | P AND A <input type="checkbox"/>                 |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>    | CASING/CEMENT JOB <input type="checkbox"/>       |
| OTHER: <input type="checkbox"/>                | OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

**Condition of Approval: notify  
 OCD Hobbs office 24 hours  
 prior of running MIT Test & Chart**

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 alicia fulton TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_

**For State Use Only**

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 9/18/23  
 Conditions of Appro'

**30-025-05664**  
**NMGSAU #012**



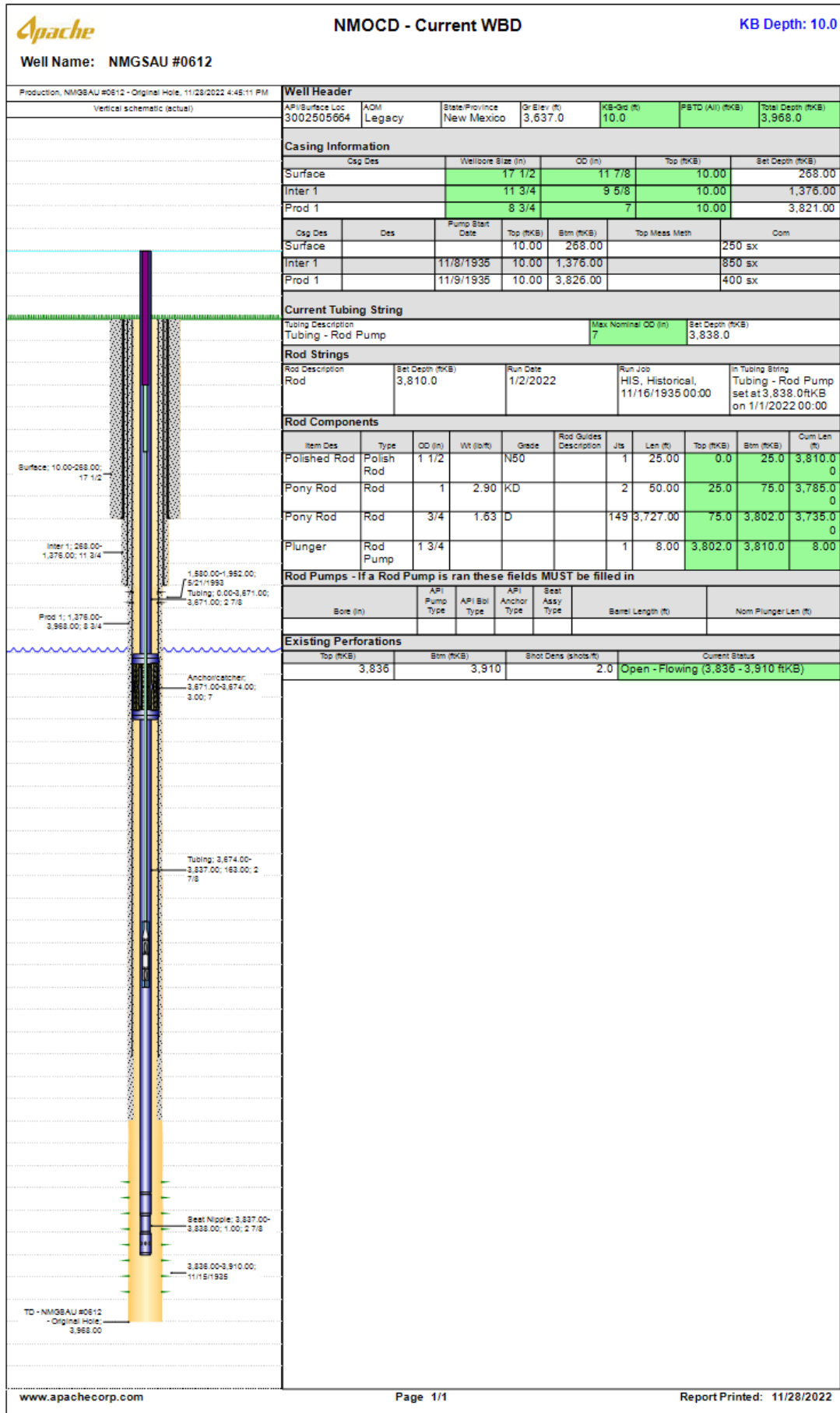
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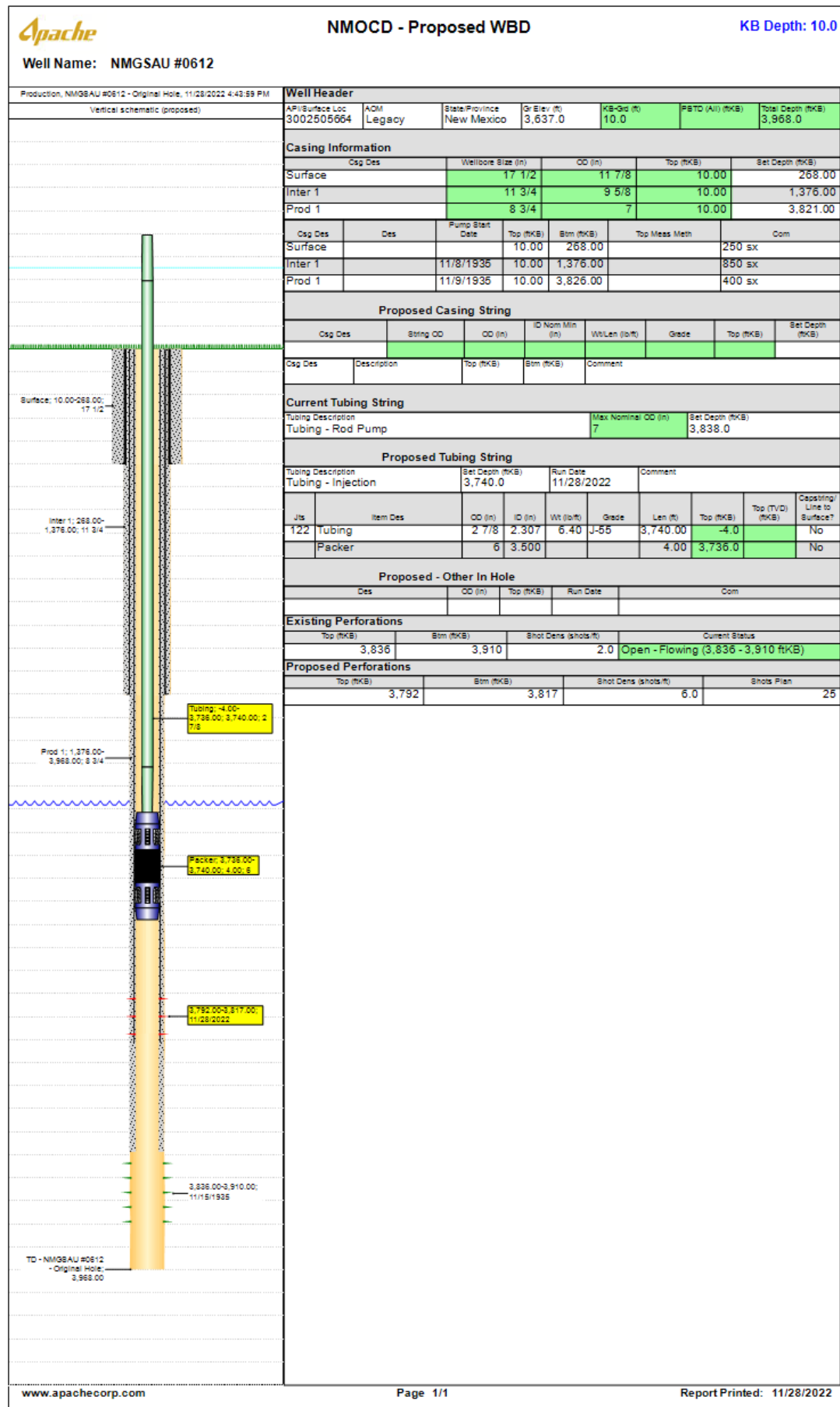
**DATE:** 11/28/2022  
**FROM:** Mauricio Monzon  
**SUBJECT:** NMGSAU # 612  
Monument, Lea County, NM

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**Work Procedure/Objective**

1. MIRU Service Unit
2. Release TAC and POOH laying down rods, tbg string and TAC
3. RIH w/ 6-1/8" bit and clean to TD @ 3,968'
4. POOH w/ bit
5. Add Perfs 3,792 – 3,817' (6 SPF)
6. RIH w/ sonic hammer and acidize open hole with 7,000 gallons of 15% HCL
7. Lay down rental equipment
8. Pick up injection packer and tbg
9. Set packer @ 3,740'
10. Notify NMOCD 24 hrs prior to running MIT
11. Commence water injection as per the injection permit allowable pressure and rate

**Figure 1 – Current Wellbore Diagram**

**Figure 2 – Proposed Wellbore Diagram**

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**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS

Action 202653

CONDITIONS

|                                                                                 |                                               |
|---------------------------------------------------------------------------------|-----------------------------------------------|
| Operator:<br>APACHE CORPORATION<br>303 Veterans Airpark Ln<br>Midland, TX 79705 | OGRID:<br>873                                 |
|                                                                                 | Action Number:<br>202653                      |
|                                                                                 | Action Type:<br>[C-103] NOI Workover (C-103G) |

CONDITIONS

|            |                  |                |
|------------|------------------|----------------|
| Created By | Condition        | Condition Date |
| kfortner   | Run PWOT MIT/BHT | 9/18/2023      |