Submit Copy To Appropriate District State of New Mexico Office HOBBS OF Drgy, Minerals and Natural Resources	Form C-103 October 13, 2009
1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Ave., Artesia, NM 88 P 0 5 299 CONSERVATION DIVISION District III 1220 South St. Francis Dr.	WELL API NO. 30-025-33696 5. Indicate Type of Lease STATE FEE x
1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM RECEIVED 87505	6. State Oil & Gas Lease No.
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.)	 7. Lease Name or Unit Agreement Name W A Weir 8. Well Number 13
1. Type of Well: Oil Well x Gas Well 2. Name of Operator	9. OGRID Number
Apache Corp.	
3. Address of Operator P O box Drawer D Monument NM 88265	10. Pool name or Wildcat Monument Abo
4. Well Location	
Unit LetterC:_330feet from theN line and1650feet from the	
Wline	
Section 35 Township 19S Range 36E	NMPM Lea County
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: SUBS PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRII	— — — —
PULL OR ALTER CASING	
OTHER: OTHER: TA we	I bore
 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. 	
9/3/13	· · · ·
Top perf @ 7015 MIRLI wire line and set CIDD. 6028' with 25 ', of compart on top. I and the hole with perform	fluid toot to 540 mai fan 22 minutar
MIRU wire line and set CIBP 6938' with 35 ' of cement on top. Load the hole with packer fluid, test to 540 psi for 32 minutes, And record psi on a chart. Apache requests a TA status for this well.	
This Approval of Temporary _15 - 2018 Abandonment Expires	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
Ω	
SIGNATURE	DATE9/5/13
Type or print name Jim Ellison E-mail address: _JD.Ellison@apa For State Use Only	checcorp.com_ PHONE:
APPROVED BY: Complex TITLE DIST. MAR	DATE 9-9-2013
Conditions of Approval (if any):	SEP 0 9 2013

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