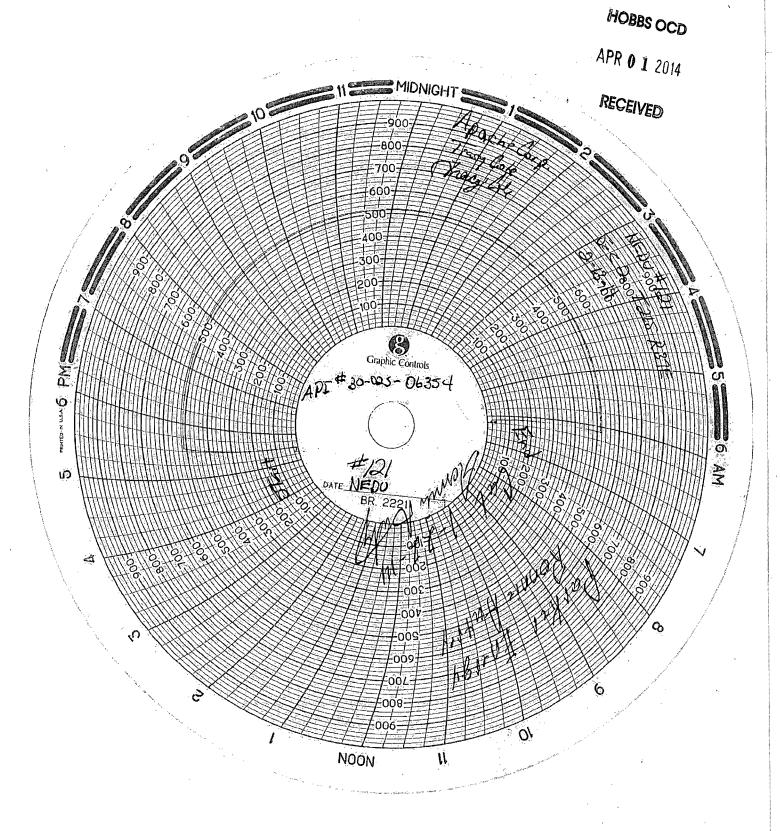
	Submit I Copy To Appropriate DisCBBS OCD State of New Mexico Office District I - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88349 District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 8745 CEIVED District IV - (505) 476-3460 Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS			WELL API NO. 30-025-06354 5. Indicate Type of STATE 6. State Oil & Gas B-1732	FEE	
	(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.)				Jnit (NEDU) / 22503	
		Type of Well: Oil Well Gas Well Other Injection Well Name of Operator				
Apache Corporation				9. OGRID Number 873		
	· ·			10. Pool name or V Eunice; B-T-D, North	T I	
	4. Well Location	ell/Location				
	Unit Letter G / Lot 15 : 2220 feet from the North line and 2307 feet from the East line					
	Section 02 Township 21S Range 37E NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.)					
	January Control of the Control of th	3508' GL			Andrews of the second	
	12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
	NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABAN TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING MULTIPLE COME DOWNHOLE COMMINGLE	NDON	SUBS REMEDIAL WORK COMMENCE DRII CASING/CEMENT	LLING OPNS. 🗌 🛚 F	ORT OF: ALTERING CASING D PAND A D	
	CLOSED-LOOP SYSTEM OTHER:	п	OTHER: ANNUAL	I MP	[7]	
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.						
Anacha tested this wall 2/13/2014 for the required annual LIIC testing. See short attached						
Apache tested this well 2/13/2014 for the required annual UIC testing. See chart attached.						
	Spud Date: 4/7/1954	Rig Release Da	te: 5/6/1954			
	Spud Date: 4/7/1954	rag release De	3/0/ (954			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
SIGNATURE ROSS Lishor TITLE Sr. Staff Reg Analyst DATE 3/31/2014					2/21/2014	
	SIGNATURE TOOSE HISTOR				TE 3/3 1/20 14	
	Type or print name Reesa Fisher For State Use Only	_ E-mail address	Reesa.Fisher@apa	echecorp.com PHC	NE: (432) 818-1062	
	APPROVED BY: Bill Seanch	_TITLE	taff Wan	<u>bg ←</u> DAT	E <u>47-/4</u>	
Conditions of Approval (if any): Bellevanule Och 4-1-14 Accepted for Record Only						

Accepted for Record Only APR 07 2014



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