Submit 1 Copy To Appropriate District Office <u>District I</u>	State of New Mexico Energy, Minerals and Natural Resources	Form C-103 October 13, 2009		
District IV	OIL CONSERVATION DIVISION BS 01220 South St. Francis Dr. Santa Fe, NM 87505 2 9 2017	WELL API NO. 30-025-05760 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.		
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA" PROPOSALS.)	7. Lease Name or Unit Agreement Name North Monument G/SA Unit Blk. 15			
1. Type of Well: Oil Well 🔲 G	8. Well Number 8			
2. Name of Operator Apache Corp.	9. OGRID Number 873			
3. Address of Operator	10. Pool name or Wildcat			
P O box Drawer D Monument NM 88	North Monument G/SA			
4. Well Location				
Unit LetterH:	1980feet from theN line and _	660feet from the		
Eline				
Section 31	Township 19S Range 37E	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:		SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL W	ORK 🗌	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE	DRILLING OPNS.	P AND A
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEM	ENT JOB	
DOWNHOLE COMMINGLE					
OTHER:			OTHER:	Run casing patch	

 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.

Perfs 3763' - 3817' & OH 3827' - 3905'

POOH with injection equip. RIH with RBP & PKR & found leak @ 2443'. Spotted 50 sks of cement over leak & attempted to squeeze The leak. Drilled out the cement and had no change in the leak. Ran in the hole with a 30' casing patch and set at 2428' – 2458' Pressure tested the patch and it held. RIH with injection equipment, loaded the casing with packer fluid, and tested to 550 psi for 32 minutes. The end pressure was 550# with no pressure loss during the test. Return the well to injection.

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
Type or print name

