Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103	
State of New Mexico Office District I 1625 N. French Dr., Hoth OBBS District II		October 13, 2009		
1625 N. French Dr., Hother Office 100			WELL API NO.	
District II 1301 W Grand Ave Artesia NM 88210 001 CONSERVATION DIVISION			30-025-33568	
District III OCT 1301 W. Grand Ave., Artesia, NM 88310 2018 OIL CONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type	
1000 Rio Brazos Rd., Aztec, NM 87410			STATE	FEE
District IV 1220 S. St. Francis Dr., Santa FCEIVED 87505			6. State Oil & Ga	is Lease No.
87505				
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or	r Unit Agreement Name
(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.)			State V	
1. Type of Well: Oil Well Gas Well			8. Well Number 7	
2. Name of Operator			9. OGRID Number 873	
Apache Corp.				
3. Address of Operator			10. Pool name or Wildcat	
P O box Drawer D Monument NM 88265			Eumont Yates 7RQ	
4. Well Location				
Unit LetterB:660feet from theN line and1880feet from the				
E line				
Section 36	Township 19S	Range 36E	NMPM	Lea County
	. Elevation (Show whether DR,			Eca County
THE PERSON OF TH	. Die vation (Show whether DR,	, KKD, K1, GK, C/C.	,	
CONTRACTOR OF THE PROPERTY OF				
12 Check Appr	conrigte Roy to Indicate N	ature of Notice	Report or Other	Data
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 WOR				ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL			ILLING OPNS.	P AND A
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT			Т ЈОВ 🔲	
DOWNHOLE COMMINGLE				
			_	
OTHER: Extend TA status		OTHER:		
13 Describe proposed or completed	operations (Clearly state all t	l pertinent details, an	d give pertinent date	es including estimated date
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.				
Lead and the second a				
Plan to move in a pump truck. Pressure test the casing to 500 psi and chart the pressure for 32 minutes.				
Condition of Approval: notify				
				.
OCD Hobbs office 24 hours				
		prior of re	unning MIT Tes	t & Chart
Spud Date:	Rig Release Da	ate:		
L				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
$\alpha \sim 2$				
(1)9//			_	ATE 10-2-18
SIGNATURE (C)		strument Tech	D	ATE 10-2910
Type or print nameJim Ellison E-mail address: _JD.Ellison@apacheccorp.com_ PHONE:				
For State Use Only				
APPROVED BY: VOLUME TITLE AUI DATE 10/3/2018				
Conditions of Approval (if any):				