Submit 1 Copy To Appropriate District				Form C-103	
Office DistrictY		ew Mexico d Natural Resources	WELL API NO.	vised November 3, 2011	
1625 N. French Dr.,Hobbs, NM 88240	Energy, willicials an	a Matara Mesources	30-025-	24651	
<u>District II</u> 811 S. First St., Artesia, NM 88210	OIL CONSERV	ATION DIVISION	5. Indicate Type of Leas		
Disrtict III	4000 O - N- 1	HOBBS OCD			
1000 Rio Brazos Rd. Aztec, NM 87410 District IV	1220 South S Santa Fe		6. State Oil & Gas Lease		
1220 S. St. Francis Dr., Santa Fe, NM	oana ro,	JAN 21 2020	AO-2614		
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit	Agreement Name		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR DEEPEN DE COMPANY DE LA			McDonald WN State (306617)		
A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			8. Well Number		
1. Type of Well: Oil Well Gas Well Other			23		
2. Name of Operator			9. OGRID Number		
Apache Corporation / 3. Address of Operator			10. Pool Name	3	
303 Veterans Airpark Lane, Ste. 3000, Midland, TX 70705			Jalmat;Tan-Yates 7Rvrs(Gas)(79240)		
4. Well Location					
Unit Letter C : Section 15	660 / feet from the Township 22S	N line and Range 36E	1980 feet from the NMPM C	W line ounty Lea	
	Elevation (Show whether		THIN IN	ounty <u>Lou</u>	
3548' GL					
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 WORK ALTERING CASING					
TEMPORARILY ABANDON CHAI	NGE PLANS	COMMENCE DRILLING OF	<u>=</u>	☑	
PULL OR ALTER CASING	TIPLE COMPL	CASING/CEMENT JOB	Ш		
OTHER:	Ė	✓ Location is r	andy for OCD inspection a	Hor D&A	
✓ All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.					
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the					
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER / QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. ALL INFORMATION HAS BEEN WELDED OR					
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.					
The location has been leveled as nearly as possible to the original ground contour and has been cleared of all junk, trash, flow lines and					
other production equipment.					
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with					
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed					
from the lease and well location. All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have					
to be removed.)					
All other environmental concrens have been addressed as per OCD rules. V Pipelines and flow lines have been abandoned in accordance with 19.15.9.714.B(4)(b) NMAC. All fluids have been removed from					
non-retrieved flow lines and pipelines.					
When all work has been completed, return this form to the appropriate District office to schedule an inspection.					
When all work has been completed, retain this form to the appropriate bistness of the seriodate an inspection.					
SIGNATURE Sum Ru	ulo TITLE	Sr. Reclamation Fo	reman DATE	1/15/20	
TYPE OR PRINT NAME Guinn Bu	urks E-MAIL	guinn.burks@apached		432-556-9143	
For State Use Only		^			
APPROVED BY:	Inter TITLE	CUA	DATE	4-13-20	
Conditions of Approval (if any):	1.1.2				