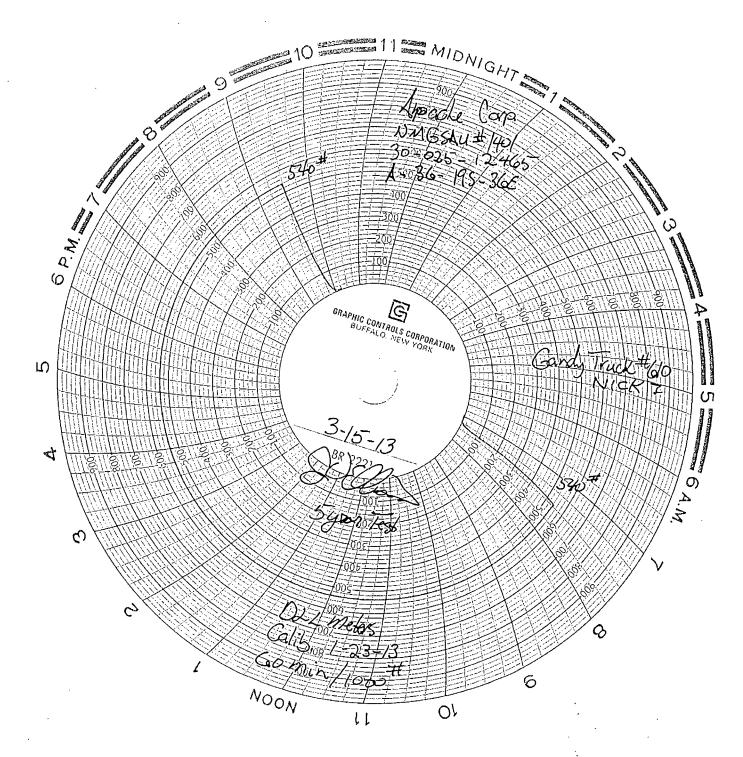
Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103 October 13, 2009		
District 1 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.		
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-12465 5. Indicate Type of Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEI		
District IV	Santa re, NM 8/303				
1220 S. St. Francis Dr., Santa Fe, NM 87505					
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agree	ement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			North Monument G/SA Unit	North Monument G/SA Unit Blk. 14	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Øther Injection well.			8. Well Number 1		
2. Name of Operator			9. OGRID Number 873	9. OGRID Number 873	
Apache Corp. 3. Address of Operator			10. Pool name or Wildcat		
P O box Drawer D Monument NM	1 88265		Eunice Monument G/SA	į	
4. Well Location					
Unit LetterA	_:330feet from the _	N line and	d 330 feet from the	e	
Eline	m	100 B 1	CD 10101		
Section 36	Township 11. Elevation (Show wheth		6E NMPM Lea	County	
	Elevation (Show when				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF IN	NTENTION TO:	SU	BSEQUENT REPORT O	F:	
PERFORM REMEDIAL WORK		1		CASING	
TEMPORARILY ABANDON DULL OR ALTER CASING			RILLING OPNS. P AND A	Ц	
PULL OR ALTER CASING DOWNHOLE COMMINGLE	-	J CASING/CEIVIE	MIJOB L		
_			_		
OTHER:		OTHER:	5 year pressure test		
			and give pertinent dates, includin		
of starting any proposed w proposed completion or re		NMAC. For Multiple C	Completions: Attach wellbore dia	gram of	
proposed completion of re	completion.				
Maria in Cambridge and marrows	the medical and about Can 22 wi	untar Ctarting agreemen	5.10 H and Englanders 5.10 H		
Move in Gandy truck and pressure	the casing and chart for 32 mil	nutes. Starting pressure	540 # and finale pressure 540#		
			HOBBS OCD		
			APR 0 3 2013		
			RECEIVED		
					
Spud Date:	Rig Rele	ase Date:			
		.1)	1 11 11 6		
I hereby certify that the information	above is true and complete to	the best of my knowled	dge and belief.		
000) _		•	フルニュコ	
SIGNATURE TITLE Instrument Tech DATE 3-15-13					
Type or print nameJim Ellison E-mail address: _JD.Ellison@apacheccorp.com PHONE:					
For State Use Only		2-7		/	
APPROVED BY	<i>' </i>	11.5T ans		/ 1	
Conditions of Approval (it any):	TITLE	UN. MER	DATE 9-14	-ZOLT 1	
11 7 77	TITLE	USI. MEJE	DATE 14	1-2013	
	TITLE	USI. MAJE	MAY 2.1 2073	1-2013 h	



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