| Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPL! PROPOSALS.) 1. Type of Well: Oil Well 2 2. Name of Operator | Energy, Minerals ar OIL CONSERVA 1220 South S Santa Fe, ICES AND REPORTS ON | N OR PLUG BACK TO A | Form C-103 Revised July 18, 2013 WELL API NO. 30-025-42271 5. Indicate Type of Lease STATE \Box FEE \boxtimes 6. State Oil & Gas Lease No. 22503 7. Lease Name or Unit Agreement Name NORTHEAST DRINKARD UNIT 8. Well Number 370 9. OGRID Number |
|--|---|----------------------|---|
| Apache Corporation | 1 | MAR 1 4 2016 | 873 |
| 3. Address of Operator 303 Veterans Airpark Lane, Ste 10 | 000, Midland, TX 79705 | RECEIVED | 10. Pool name or Wildcat EUNICE; BLI-TU-DR, N |
| 4. Well Location | | | |
| Unit Letter N: 57 feet from the SOUTH line and 2320 feet from the WEST line | | | |
| Section 3 Township 21S Range 37E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | |
| 3446' GR | | | |
| | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | |
| NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: | CHANGE PLANS | SUB REMEDIAL WORK | LLING OPNS. P AND A |
| 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. | | | |
| APACHE REQUEST TO WITHDRAW PERMIT. | | | |
| | | | |
| | | | |
| 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: Join John TITLE: DRLG TECH DATE: 3)9/16 | | | |
| Type or print name: Sorina L Flores E-mail address: sorina.flores@apachecorp.com PHONE: 432-818-1167 For State Use Only Image: State Use Only Image: State Use Only Image: State Use Only | | | |
| APPROVED BY: | | | |

MAR 1 5 2016

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