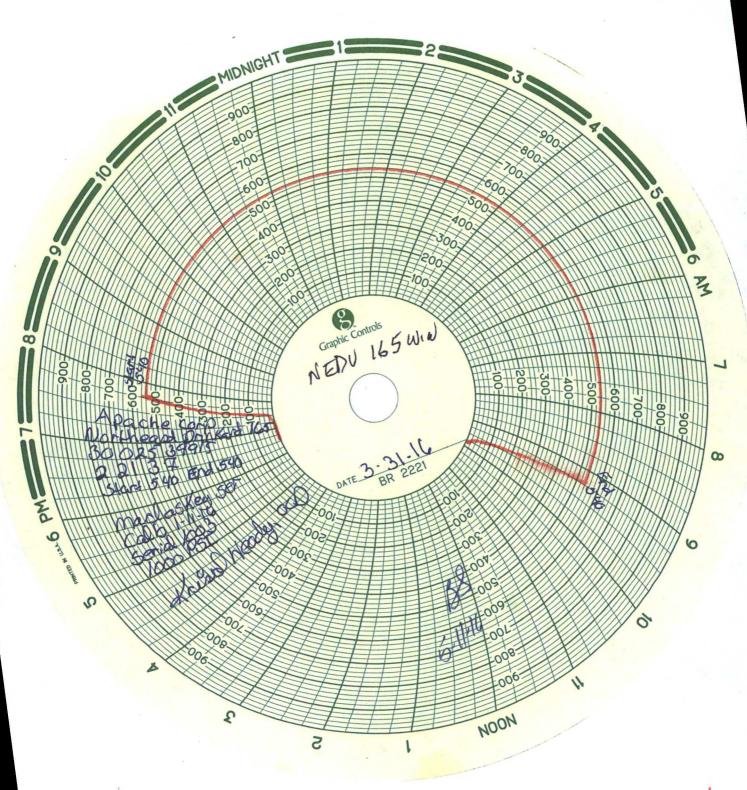
Submit 1 Copy To Appropriate District Office	State of Nev		Form C-103	
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVAT		30-025-39915	-
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE FEE	1
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lease No. B0-9745-0004	
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or 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.)			Northeast Drinkard Unit (NEDU) / 22503	-
1. Type of Well: Oil Well Gas Well Other Injection Well CO			8. Well Number 165	-
2. Name of Operator Apache Corporation		повре сер	9. OGRID Number 873	-
3. Address of Operator		APR 11 2016	10. Pool name or Wildcat	\exists
303 Veterans Airpark Lane, Suite 1 4. Well Location		DE0511/5D	Eunice; B-T-D, North (22900)	\dashv
Unit Letter D / Lot 5	feet from the Nor	th RECEIVED	feet from the West line	
Section 2	Township 21S	Range 37E	NMPM County Lea	1
	11. Elevation (Show whether	er DR, RKB, RT, GR, etc., 14' GL		
	040	- OL		
12. Check	Appropriate Box to Indica	ate Nature of Notice,	Report or Other Data	
NOTICE OF II	NTENTION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK			_	
TEMPORARILY ABANDON			_	
DOWNHOLE COMMINGLE		o tonto o ciner		
CLOSED-LOOP SYSTEM OTHER:	_	OTHER: ANNIIA	L MIT PRESSURE TEST	
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.				
proposed completion or recompletion.				
Apache performed a pressure test on 3/31/2016; see passing chart attached.				
Spud Date: 11/15/2010	Rig Relea	ase Date: 11/21/2010		
I hereby certify that the information	above is true and complete to	the best of my knowledge	e and belief.	_
0 1	/			
SIGNATURE KILLS ISSUE TITLE Sr. Staff Reg Analyst			DATE 4/6/2016	_
Type or print name Reesa Fisher	E-mail a	ddress: Reesa.Fisher@apa	checorp.com PHONE: (432) 818-1062	
For State Use Only				
APPROVED BY: Bill Son	marral TITLE	Staff Mars	ge DATE 5-11-16	
Conditions of Approval (if any):				



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