Submit 1 Copy To Appropriate District	State of New M		Form C-103	
Office District I	Energy, Minerals and Natural Resources		October 13, 2009	
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-025-34163	
1301 W. Grand Ave., Artesia, NM 88210		OIL CONSERVATION DIVISION		
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FE	EE 🛛
District IV	Santa Fe, NM 8	7505	6. State Oil & Gas Lease N	0.
1220 S. St. Francis Dr., Santa Fe, NM 87505				
	ICES AND REPORTS ON WELLS		7. Lease Name or Unit Agr	eement Name
	SALS TO DRILL OR TO DEEPEN OR PL CATION FOR PERMIT" (FORM C-101) F			
PROPOSALS.)	_ H0	<b>DBBS OCD</b>	J H Williams 8. Well Number 2	
1. Type of Well: Oil Well	Gas Well Other			/
2. Name of Operator	/	AUG 1 6 2016	9. OGRID Number 000990	8721
Apache Corp. 3. Address of Operator		100 1 0 2010	10. Pool name or Wildcat	SKAGGS
P O box Drawer D Monument NM	88265	ECEIVED	(DRINKARD) & MONUM	
4. Well Location				
Unit Letter P :	470feet from theS_	line and	feet from the	Eline
Section 34	Township 19S	Range 37E	NMPM Le	/
	11. Elevation (Show whether DR			u county .
	3569 GR			
PERFORM REMEDIAL WORK       PLUG AND ABANDON       REMEDIAL WORK         TEMPORARILY ABANDON       CHANGE PLANS       COMMENCE DRILLING         PULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB			LLING OPNS. P AND A	DF: G CASING □ □
DOWNHOLE COMMINGLE				
071155	-			_
OTHER:	bleted operations. (Clearly state all		well bore	
	ork). SEE RULE 19.15.7.14 NMA			
<ol> <li>SET CIBP @ 6340. DUME</li> <li>LOAD CSG W/ PKR FLU</li> </ol>	S. NU-BOP. POOH W/ TBG P BAIL 35' CMT ON CIBP. ID & TEST 550#. EFORE TESTING & CHART REC	ORD	ndition of Approval: not CD Hobbs office 24 hou	
		prior	of running MIT Test &	Chart
Set CIBP, RBP or Packer within		Prior	VI I WITHING MALL LOSE OF	
perfs or open hole Pressure test to	500 psi for 30 minutes with			
a pressure drop of not great	ater than 10% over a			
30 minute p				
Spud Date:	Rig Release D	ate:		
É .		Contraction of the		
I hereby certify that the information	above is true and complete to the b	est of my knowledge	e and belief.	
1				
SIGNATURE ON Su	TITLE SPI	DIMPER	DATE8/16/16	
			0/10/10	
Type or print nameJOEL SISK_	E-mail addres	ss: _joel.sisk@apac	heccorp.com_ PHONE:575	5-441-0793
For State Use Only	il re	1		1 1
APPROVED BY: Makey	Brown TITLE De	ST. SUD	2UISOLDATE B.	116/201
Conditions of Approval (if any):	IIILE I		DATE OATE	
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			F	