Submit 1 Copy To Appropriate District	State of New Me	xico_]	Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natur	ral Reources		ed July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	25°	ا ر	WELL API NO. 30-025-09910	<u> </u>
811 S. First St., Artesia, NM 88210	OIL CONSERVATION	DIMISION F	5. Indicate Type of Lease	
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Fran	gik Dr.	STATE FEE	
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87	303 LEV	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505		CEIL		
	ICES AND REPORTS ON W 🔼 👀		7. Lease Name or Unit Agree	ment Name
	OSALS TO DRILL OR TO DEEPEN ON PLU ICATION FOR PERMIT" (FORM C-101) FO		West Blinebry Drinkard Unit (V	VBDU) / 37346
1. Type of Well: Oil Well	Gas Well Other Injection		8. Well Number 035	
Name of Operator Apache Corporation			9. OGRID Number 873	-
3. Address of Operator			10. Pool name or Wildcat	
303 Veterans Airpark Lane, Suite 1	000 Midland, TX 79705		Eunice; B-T-D, North [22900]	
4. Well Location	1980 feet from the South	660	a a West	
Om Letter	leet from the	line and 660	feet from the West	line
Section 09	Township 21S Ra	nge 37E	NMPM County	Lea
	3496' GL	KKB, KI, GK, etc.)		
			100000000000000000000000000000000000000	
12. Check	Appropriate Box to Indicate Na	ature of Notice, F	Report or Other Data	
NOTICE OF IN	STENTION TO:	CLIDS	SEQUENT REPORT OF	
NOTICE OF INTENTION TO: SUBS			_	 CASING □
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL		
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT		_
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM		OTHER: ANNUAL	TESTING	— 🗇
OTHER:	pleted operations. (Clearly state all p			estimated date
	ork). SEE RULE 19.15.7.14 NMAC			
proposed completion or recompletion.				
Anache performed the required testing	og for this well 5/24/2018, witnessed h	w the OCD Passing	chart attached	
Apache performed the required testing for this well 5/24/2018, witnessed by the OCD. Passing chart attached.				
Spud Date: 3/26/1948	Rig Release Dat	te: 4/29/1948		
I hereby certify that the information	above is true and complete to the be	est of my knowledge	and belief.	
Λ 1.	1			
SIGNATURE Keesa fis	hor TITLE Sr. Staf	f Reg Analyst	DATE_7/12/20	18
Type or print name Reesa Fisher	E-mail address	. Reesa.Fisher@apac	hecorp.com PHONE: (432) 818-1062
For State Use Only			7	/
)	Jan M.	ee~ DATE 7/17	1/10
APPROVED BY: John X	TITLE one	Liance Ofice Supervisor	DATE <u>///</u>	
Conditions of Approval (if any):	•	Supervisor		

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