Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	October 13, 2009
1625 N. French Dr., Hobbs, NM 88240	c.O	WELL API NO. 30-025- 35197
District II 1301 W. Grand Ave., Artesia, NM 88210	O OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87 <u>District IV</u> 1220 S. St. Francis Dr. Santa R. VM	1220 South St. Francis Dr.	STATE FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa N. NM	Santa Fe, NM 87505	
87505 SUNDRY NOTICE	SACO REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOS	O DRILL OR TO DEEPEN OR PLUG BACK TO A TON FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name of Chit rigidement Name
	TON FOR PERMIT" (FORM C-101) FOR SUCH	North Monument G/SA Unit Blk. 14
PROPOSALS.) 1. Type of Well: Oil Well Ga	as Well Other Injection well.	8. Well Number 20 # 298
2. Name of Operator	Swen Guier Injection wen.	9. OGRID Number 873
Apache Corp.		y. Company
3. Address of Operator		10. Pool name or Wildcat
P O box Drawer D Monument NM 88	265	North Monument G/SA
4. Well Location		
Unit Letter D: 1310 feet from the line and 1250 feet from the line		
Section 36 Township 95 Range 36E NMPM Lea County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
		BSEQUENT REPORT OF: RK
<u> </u>	— I	RILLING OPNS. P AND A
	MULTIPLE COMPL CASING/CEME	
DOWNHOLE COMMINGLE	NOLTIFLE COMPL	11 20B
DOWN TOLE COMMINAGE		
OTHER:	☐ OTHER:	5 year pressure test
12 D 1		and a simulation of the state o
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 of recompletion.		
Move in Maclaskey pump truck to perform pressure test on casing. Pressured the casing to 505psi & recorded the test on a chart for 32		
minutes with a final psi.of 500		
Spud Date:	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
(0.1)		
$\frac{1}{2} \frac{1}{2} \frac{1}$		
SIGNATURE		
Type or print nameJim Ellison	E mail address: ID Ellison @s	pacheccorp.com_ PHONE:575-441-7734
For State Use Only	E-man addressJD.Emson@a	pachecorp.com_rmores5/5-441-//54
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APPROVED BY: Kerry Forther TITLE Compliance Officer & DATE 7-31-18 Conditions of Approval (if the):		
Conditions of Approval (if Thy):		

