

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

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 S. St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

SUNDRY NOTICES AND REPORTS ON WELL (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.)		WELL API NO. 30-025-06375
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Apache Corporation		6. State Oil & Gas Lease No. B0-9745-0004
3. Address of Operator 303 Veterans Airpark Lane, Suite 1000 Midland, TX 79705		7. Lease Name or Unit Agreement Name Northeast Drinkard Unit (NEDU) / 22503
4. Well Location Unit Letter <u>K</u> : <u>1980</u> feet from the <u>South</u> line and <u>1880</u> feet from the <u>West</u> line Section <u>02</u> Township <u>21S</u> Range <u>37E</u> NMPM County <u>Lea</u>		8. Well Number <u>315</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3490' GL		9. OGRID Number 873
		10. Pool name or Wildcat Eunice; B-T-D, North (22900)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: RE-TEST POST FAILURE <input checked="" type="checkbox"/>	

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.

After failing an MIT, the following was performed:

5/23/2018 MIRUWL Tag fill @ 6235'. Tubing tested good; casing lost pressure. Pull blanking plug, RDMO slickline.  
5/24/2018 MIRUSU MIRURU Rel pkr & POOH. Noticed ~25 jts w/bad seal in pins & collars.  
5/25/2018 RBP tested good; csg tested good.  
5/29/2018 POOH LD WS, RBP, pkr. WO Injection Packer  
5/30/2018 TTIH w/new Inj Pkr - landed pkr @ 5698'. EOT @ 5719' (2-7/8" J-55). Csg tested good.  
5/31/2018 Circ pkr fluid; failed OCD test. Leave well SI.

7/06/2018 MIRU WL RIH w/blanking plug; tbg held pressure. Found & fixed communication between prod csg & surf csg. SI  
7/27/2018 OCD witnessed passing MIT; chart attached. RTI

Spud Date:

11/1/1951

Rig Release Date:

11/28/1951

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Reesa Fisher*

TITLE Sr. Staff Reg Analyst

DATE 8/14/2018

Type or print name Reesa Fisher

E-mail address: Reesa.Fisher@apachecorp.com

PHONE: (432) 818-1062

For State Use Only

APPROVED BY:

*Mailey Brown*

TITLE

*AO/E*

DATE 8/20/2018

Conditions of Approval (if any):

RBDMS- CHART - ✓

