Submit I Copy To Appropriate District Office	State of New Mexico			Form C-		
District I - (575) 393-6161	Energy, Minerals and Natural Resources		WELL API	Revised July 18, 2	2013	
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> - (575) 748-1283	OH CONGERMATION DIVIDION		30-025-2			
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	OIL CONSERVATION DIVISION		5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE			
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505		6. State Oil & Gas Lease No.			
87505			A0-2614			
SUNDRY NOTI	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PL		1	ame or Unit Agreement Nan		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			South Eunio	South Eunice 7 Rivers Qu Unit [306622]		
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other Injection		8. Well Number 433			
2. Name of Operator			9. OGRID Number			
Apache Corporation			873			
Address of Operator Solution Address of Operator Solution Solution Solution Address of Operator	JUN 2 3 20°)		10. Pool name or Wildcat Eunice; SR-Q, South (24130)			
4. Well Location			<u> </u>	(24130)		
Unit Letter G:	1980 feet from the North	ECEline and 2	310 _{fe}	eet from theli	ine	
Section 25		ange 36E	NMPM	County Lea		
	11. Elevation (Show whether DR					
	3442' GL					
10 61 1 4						
12. Check A	Appropriate Box to Indicate N	lature of Notice,	Report or C	Other Data		
NOTICE OF IN	TENTION TO:	SUB	SEQUENT	T REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				☐ ALTERING CASING		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR				=		
PULL OR ALTER CASING				Ш		
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM						
OTHER:		OTHER: MIT			₽	
	eted operations. (Clearly state all				date	
	rk). SEE RULE 19.15.7.14 NMA	C. For Multiple Co	mpletions: At	tach wellbore diagram of		
proposed completion or reco	mpiedon.					
Apache tested this well in conjunction v	with the Bradenhead test on 6/4/20	20; copy of chart att	ached.			
		_				
Spud Date: 11/4/1963	Rig Release Da	nte: 11/13/1963				
11/4/1903		11/10/1000				
<u> </u>						
I hereby certify that the information a	bove is true and complete to the b	est of my knowledg	e and belief.			
SIGNATURE Kiloso Ji	Shor TITLE Sr. Sta	ff Reg Analyst		DATE 6/11/2020		
Type or print name Reesa Fisher	E-mail addres	S: Reesa.Fisher@apa	achecorp.com	PHONE: (432) 818-1062	<u> </u>	
For State Use Only	11 -		Δ	10-	_	
APPROVED BY: Kerry	fut_ TITLE	0	H	DATE 6-73-	20	
Conditions of Approval (if any):	***************************************					

