

|   |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
|---|---|---|---|-------------|-----------------------|--|--|---|--|---------------------------------------|--|--|--|---|---|---|--|--|--------------|--|--|--|
| <b>District I</b><br>1625 N. French Dr., Hobbs, NM 88240<br>Phone:(575) 393-6161 Fax:(575) 393-0720<br><b>District II</b><br>811 S. First St., Artesia, NM 88210<br>Phone:(575) 748-1283 Fax:(575) 748-9720<br><b>District III</b><br>1000 Rio Brazos Rd., Aztec, NM 87410<br>Phone:(505) 334-6178 Fax:(505) 334-6170<br><b>District IV</b><br>1220 S. St Francis Dr., Santa Fe, NM 87505<br>Phone:(505) 476-3470 Fax:(505) 476-3462  | <b>State of New Mexico</b><br><b>Energy, Minerals and Natural Resources</b><br><b>Oil Conservation Division</b><br><b>1220 S. St Francis Dr.</b><br><b>Santa Fe, NM 87505</b> | Form C-103<br>August 1, 2011<br>Permit 173863                   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
|   |   | WELL API NUMBER<br>30-025-40849                                 |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
|   |   | 5. Indicate Type of Lease<br>P                                  |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
|   |   | 6. State Oil & Gas Lease No.                                    |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)   |   | 7. Lease Name or Unit Agreement Name<br>NORTHEAST DRINKARD UNIT |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| 1. Type of Well:<br>O   |   | 8. Well Number<br>263   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| 2. Name of Operator<br>APACHE CORP  |   | 9. OGRID Number<br>873  |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| 3. Address of Operator<br>303 Veterans Airpark Lane, Suite 3000, Midland, TX 79705  |   | 10. Pool name or Wildcat  |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| 4. Well Location<br>Unit Letter <u>6</u> : <u>3345</u> feet from the <u>N</u> line and feet <u>1620</u> from the <u>W</u> line<br>Section <u>3</u> Township <u>21S</u> Range <u>37E</u> NMPM County <u>Lea</u>  |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3473 GR  |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>  |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____   |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| <table style="width: 100%; border: none;"> <tr> <td colspan="2" style="text-align: center;">NOTICE OF INTENTION TO:</td> <td colspan="2" style="text-align: center;">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> <td>REMEDIAL WORK <input type="checkbox"/></td> <td>ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON <input type="checkbox"/></td> <td>CHANGE OF PLANS <input type="checkbox"/></td> <td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>MULTIPLE COMPL <input type="checkbox"/></td> <td>CASING/CEMENT JOB <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="2">Other: _____</td> <td colspan="2">Other: <u>Spud</u> <input checked="" type="checkbox"/></td> </tr> </table> |   |   | NOTICE OF INTENTION TO:                   |             | SUBSEQUENT REPORT OF: |  | PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTER CASING <input type="checkbox"/> | TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE OF PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> |  | Other: _____ |  | Other: <u>Spud</u> <input checked="" type="checkbox"/> |  |
| NOTICE OF INTENTION TO:   |   | SUBSEQUENT REPORT OF:   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| PERFORM REMEDIAL WORK <input type="checkbox"/>  | PLUG AND ABANDON <input type="checkbox"/>   | REMEDIAL WORK <input type="checkbox"/>                          | ALTER CASING <input type="checkbox"/>     |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| TEMPORARILY ABANDON <input type="checkbox"/>  | CHANGE OF PLANS <input type="checkbox"/>  | COMMENCE DRILLING OPNS. <input type="checkbox"/>                | PLUG AND ABANDON <input type="checkbox"/> |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| PULL OR ALTER CASING <input type="checkbox"/>   | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>                      |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| Other: _____  |   | Other: <u>Spud</u> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.<br><br>9/19/2013 Spudded well.   |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> .   |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">SIGNATURE _____</td> <td style="width: 25%;">TITLE _____</td> <td style="width: 25%;">DATE _____</td> <td style="width: 25%;"></td> </tr> <tr> <td>Type or print name _____</td> <td>E-mail address _____</td> <td>Telephone No. _____</td> <td></td> </tr> </table>  |   |   | SIGNATURE _____                           | TITLE _____ | DATE _____            |  | Type or print name _____                       | E-mail address _____                      | Telephone No. _____                    |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| SIGNATURE _____   | TITLE _____   | DATE _____  |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| Type or print name _____  | E-mail address _____  | Telephone No. _____   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| For State Use Only:   |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |
| APPROVED BY: <u>Paul Kautz</u> TITLE <u>Geologist</u> DATE <u>9/23/2013</u>   |   |   |   |             |                       |  |  |   |  |                                       |  |  |  |   |   |   |  |  |              |  |  |  |

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**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

Comments  
  
Permit 173863

**NOTICESPUD COMMENTS**

|  |                            |
|--|----------------------------|
| Operator:<br>APACHE CORP<br>303 Veterans Airpark Lane<br>Midland, TX 79705 | OGRID:<br>873              |
|  | Permit Number:<br>173863   |
|  | Permit Type:<br>NoticeSpud |

**Comments**

| Created By | Comment | Comment Date |
|------------|---------|--------------|
|------------|---------|--------------|

There are no Comments for this Permit