<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone:(505) 393-6161 Fax:(505) 393-0720	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr.		Form C-103 Permit102330
District II			WELL API NUMBER 30-025-39069
1301 W. Grand Ave., Artesia, NM 88210			
Phone:(505) 748-1283 Fax:(505) 748-9720 District III			
1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 District IV	Santa l	Fe, NM 87505	5. Indicate Type of Lease S
1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462			6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO			Lease Name or Unit Agreement Name NORTH MONUMENT G/SA
A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH UNIT			
PROPOSALS.) 1. Type of Well:O			8. Wett Number 376
Name of Operator APA	CHE CORP		9. OGRID Number 873
3. Address of Operator 6120 S. YALE , , SUITE 1500 TULSA , OK 74136			10. Pool name or Wildcat
4. Well Location			
Unit Letter P : 1300 feet from	n the S line a	nd 1300 feet from the	E tine
Section 25 Township	19S I	Range 36E NMPM	Lea County
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3628 GR Pit or Below-grade Tank Application or Closure Pit Type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION PERFORM REMEDIAL WORK PLU	ON TO: G AND ABANDON	REMEDIAL WORK	NT REPORT OF: ALTER CASING
	NGE OF PLANS	COMMENCE DRILLING OPN	
PULL OR ALTER CASING MUL	TIPLE COMPL	CASING/CEMENT JOB	Γ
Other:		Other: Spud	×
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.			
9/14/2009 Spudded well.			
SPUD WELL 9/14/09 @ 20:45			
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 , a general permit or an (attached) alternative OCD-approved plan .			
SIGNATURE Electronically Signed TITLE Engineering Tech DATE 9/16/2009			
Type or print name Lana Williams E-mail address lana.williams@apachecorp.com Telephone No. 918-491-4900			

TITLE Geologist

DATE 9/16/2009

For State Use Only:
APPROVED BY: Paul Kautz