

1625 N. French Dr., Hobbs, NM 88240
Phone: (505) 393-6161 Fax: (505) 393-0720

State of New Mexico
Energy, Minerals and Natural Resources

District II

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

1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

WELL API NUMBER	30-025-39674
5. Indicate Type of Lease	F
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	EAST BLINEBRY DRINKARD UNIT
8. Well Number	080
9. OGRID Number	873
10. Pool name or Wildcat	

E _____ line
Lea _____ County

from nearest surface water _____

Material _____

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: O				
2. Name of Operator APACHE CORP				
3. Address of Operator 6120 S. YALE, SUITE 1500, TULSA, OK 74136				
4. Well Location				
Unit Letter	A	:	10	feet from the N line and 1310 feet from the
Section	14	Township	21S	Range 37E NMPN

11. Elevation (Show whether DR, KB, BT, GR, etc.)	3425 GR
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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 TO:

PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐
TEMPORARILY ABANDON	☐	CHANGE OF PLANS	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐
Other: _____			

SUBSEQUENT REPORT OF:

REMEDIAL WORK	☐	ALTER CASING	☐
COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDON	☐
CASING/CEMENT JOB	☐		
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.

3/19/2010 Spudded well.

SPUDDED WELL 3/19/10 @ 18:00

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 NMOC guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Engineering Tech DATE 3/22/2010

Type or print name Lana Williams E-mail address lana.williams@apachecorp.com Telephone No. 918-491-4900

For State Use Only:

APPROVED BY: Paul Kautz TITLE Geologist DATE 3/22/2010