

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

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

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

Form C-103
Permit126619

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| <p align="center">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.)</p> | | <p>WELL API NUMBER 30-025-39958</p> |
| <p>1. Type of Well: O</p> | | <p>5. Indicate Type of Lease P</p> |
| <p>2. Name of Operator APACHE CORP</p> | | <p>6. State Oil & Gas Lease No.</p> |
| <p>3. Address of Operator 303 Veterans Airpark Lane, Suite 3000, Midland, TX 79705</p> | | <p>7. Lease Name or Unit Agreement Name WEST BLINEBRY DRINKARD UNIT</p> |
| <p>4. Well Location Unit Letter <u>P</u> : <u>1310</u> feet from the <u>S</u> line and <u>120</u> feet from the <u>E</u> line Section <u>17</u> Township <u>21S</u> Range <u>37E</u> NMPM Lea County</p> | | <p>8. Well Number 126</p> |
| <p>11. Elevation (Show whether DR, KB, BT, GR, etc.) 3461 GR</p> | | <p>9. OGRID Number 873</p> |
| <p>Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/></p> <p>Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____</p> <p>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____</p> | | |

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| <p align="center">12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data</p> | |
| <p align="center">NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>Other: _____</p> | <p align="center">SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>Other: <u>Spud</u> <input checked="" type="checkbox"/></p> |

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.

1/11/2011 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 ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE _____ DATE 2/1/2011

Type or print name Bobby Smith E-mail address bobby.smith@apachecorp.com Telephone No. 432-818-1020

For State Use Only:

APPROVED BY: Paul Kautz TITLE Geologist DATE 2/2/2011