District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone:(575) 749, 1932 Fax:(575) 749, 0730

State of New Mexico Energy, Minerals and Natural Resources

Form C-103 August 1, 2011

	Permit 158913
WELL API NUMBER	
30-015-40468	
5. Indicate Type of Lease	
F	
6. State Oil & Gas Lease N	ło.

DATE 12/5/2012

Phone:(575) 748-1283 Fax:(575) 748-9720		30-015-40468 5. Indicate Type of Lease F 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name							
				(DO NOT USE THIS FORM FOR PROPOS				RAVEN FEDERAL	COM
				A DIFFRENT RESERVIOR. USE "APPLIC PROPOSALS.)	CATION FOR PERMIT"	(FORM C-101) F	OR SUCH	8. Well Number	
				1. Type of Well:O				012H	
				2. Name of Operator				9. OGRID Number	
				APACHE CORP			873		
3. Address of Operator		100000		10. Pool name or Wildcat					
303 Veterans Airpark Lan	e, Suite 3000, Midland,	TX 79705							
4. Well Location									
Unit Letter E : 2088 feet from	m the N tine an	nd 220	feet from the	W line					
Section 8 Township	17S F	ange 31E	NMPM	Eddy Count	y				
Pit or Below-grade Tank Application ☐ or Closu Pit Type Depth to Groundwater_ Pit Liner Thickness: mil B	sre 🗆		Distance from	N. 1.					
			•						
12. Check Appropriate Box to Indicate Nature of Notice, Report NOTICE OF INTENTION TO: SUBSEOUE				T REPORT OF:					
PERFORM REMEDIAL WORK D PLU		REMEDIAL WO		☐ ALTER CASING					
TEMPORARILY ABANDON CHA	NGE OF PLANS	COMMENCE D	RILLING OPNS	. DLUG AND ABAN	DON [
PULL OR ALTER CASING MUI	LTIPLE COMPL	CASING/CEMEN	NT JOB						
Other:		Other: Spud			\bowtie				
<u> </u>									
 Describe proposed or completed operations. (C work.) SEE RULE 1103. For Multiple Completio 					roposed				
10.000000000000000000000000000000000000									
12/3/2012 Spudded well.									
I harshy cartify that the information above is tope a	nd complete to the hart of an	Imagelades and 5-13	of I forther contife.	that are nit as halam med to t	le han				

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-grad been/will be constructed or closed according to NMOCD guidelines \square , a general permit \square or an (attached) alternative OCD-approved plan \square .

SIGNATURE Electronically Signed TITLE

DATE 12/5/201 DATE 12/5/2012 Type or print name Bobby Smith E-mail address bobby.smith@apachecorp.com Telephone No. 432-818-1020 For State Use Only:
APPROVED BY: Randy Dade

TITLE District Supervisor