

Submit 1 Copy To Appropriate District Office.

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised August 1, 2011

HOBS OGD 11 JUN 19 2013 OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		WELL API NO. 30-015-02616
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Apache Corporation		6. State Oil & Gas Lease No. 647-320,647-363,647-368
3. Address of Operator 303 Veterans Airpark Lane, Ste 3000, Midland TX 79705		7. Lease Name or Unit Agreement Name Empire Abo Unit "J"
4. Well Location Unit Letter <u>H</u> : <u>1650</u> feet from the <u>N</u> line and <u>990</u> feet from the <u>E</u> line Section <u>6</u> Township <u>18S</u> Range <u>28E</u> NMPM <u>Eddy</u> County <u>Eddy</u>		8. Well Number <u>24</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3663 GR</u>		9. OGRID Number 873
		10. Pool name or Wildcat Empire Abo

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1) 6/4/13 Notified (OCD) of Miru

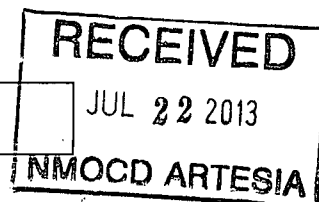
2) 6/5/13 RIH Tag CIBP @ 6220' pump 150 bbls mlf. Spot 55x class c cmt woc 4 hrs RIH tag toc @ 5732' POH to 3550'.

3) 6/6/13 Load well press test csg to 1000 psi ok spot 25 x class c @ 3550' woc 4 hrs ri h tag toc @ 3290' POH to 2125' load well spot 50x class c cmt

4) 6/7/13 RIH tag TOC @ 1555' POH perf @ 1300' couldn't pump into perfs RIH to 1350' load well spot 25x class c cmt woc 4 hrs. RIH tag toc @ 1135' POH to 800' load well spot 80x class c cmt to surf Rig down all P & A equip, cutoff well head, anchors and clean location, Installed dry hole marker.

Spud Date:

Rig Release Date:



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Jimmy Bagley

TITLE

Sunset Well Service
Manager

DATE 6/7/13

Type or print name

Jimmy Bagley

E-mail address:

PHONE: 432-561-8600

For State Use Only

APPROVED BY:

RDade

TITLE *Dir R Spenser*

DATE *July 23, 2013*

Conditions of Approval (if any):

mm