

Submit 1 Copy To Appropriate District Office  
District I - (505) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (505) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Pecos Rd., Artesia, NM 88210  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised August 1, 2011

WELL API NO. 30-015-21626
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Empire Abo Unit "J"
8. Well Number 231
9. OGRID Number 873
10. Pool name or Wildcat Empire Abo
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3664'KB

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Apache Corporation	
3. Address of Operator 303 Veterans Airpark Lane, Ste 3000, Midland TX 79705	
4. Well Location Unit Letter G : 1361 feet from the N line and 2531 feet from the East line Section 6 Township 18S Range 28E NMPM Eddy County Eddy	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3664'KB	

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.

6/25/13 Notify OCD of MIR u.  
6/26/13 RIH set CIBP @ 5600' RIH to 5600', test csg to 1000psi ok circ well w/134 bbls mlf to Surf.  
6/27/13 Spot 25x class c cmt @ 5600' PWH to 4454' spot 25x class c woc 4 hrs, RIH tag toc @ 4192' PWH to 3310' spot 25x class c PWH to 2045'  
6/28/13 Spot 25x class c cmt @ 2045' woc 4 hrs RIH tag toc @ 1735' PWH perf @ 1210' couldn't pump into perms press up to 1500' psi RIH to 1260' spot 40x of class c cmt.  
7/1/13 RIH tag toc @ 835' PWH perf @ 160' couldn't pump into perms, press up to 1500' psi attempted to pump down 8 5/8" surf pump 2 bbls and press up to 1500 psi RIH w/ 2 3/8" tbg to 210' mix & pump 25 x class c to surf. Rig down all P & A equip, cut off well head, anchors 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 7/2/2013

Type or print name

Jimmy Bagley

E-mail address:

*sunsetwellservice@yahoo.com*

PHONE:

432-561-8600

For State Use Only

APPROVED BY:

*Dis-IT Spewer*

TITLE

*Dis-IT Spewer*

DATE

*July 28, 2013*

Conditions of Approval (if any):

*W*