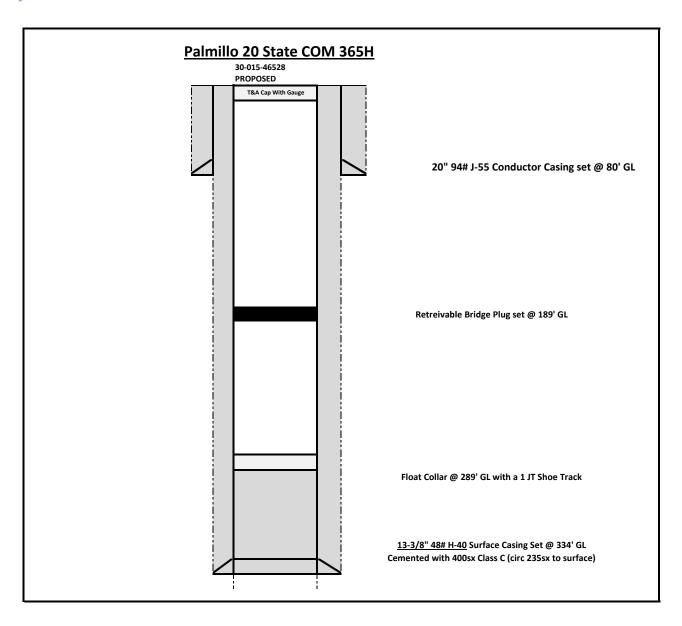
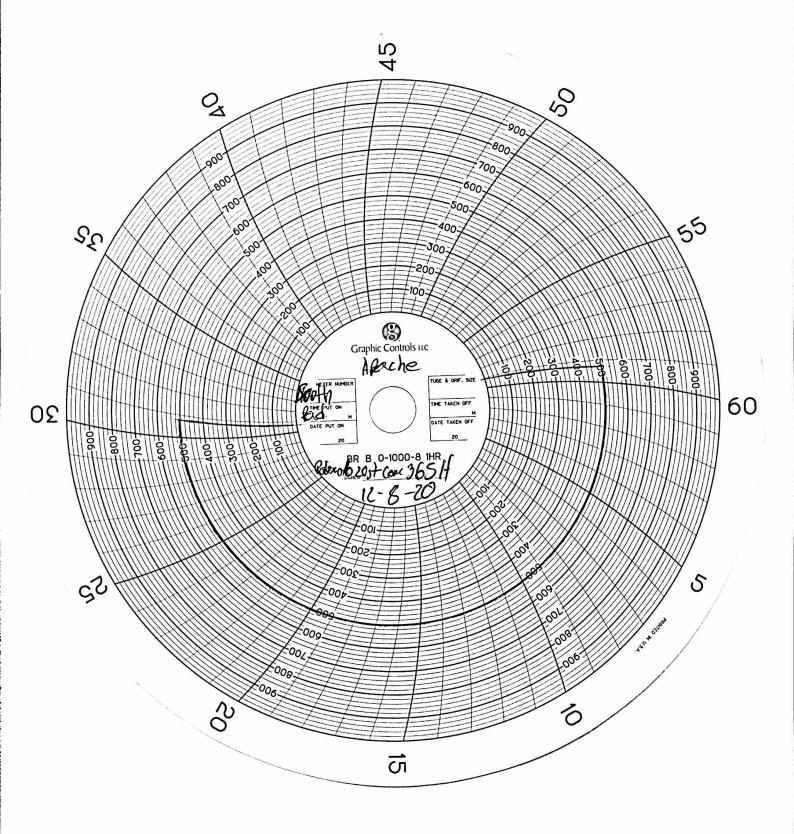
| circul by Opy Po Appropriate 29 st. 1c; 29  | State of Ne  | ew Mexico  |                                      | Fo  | orm C-103 <sup>1</sup> |
|---|--|--|--------------------------------------|---|------------------------|
| Office<br><u>District I</u> – (575) 393-6161<br>1625 N. French Dr., Hobbs, NM 88240   | Energy, Minerals and Natural Resources   |  | WELL AP                              | Revised                                     | July 18, 2013          |
| <u>District II</u> – (575) 748-1283   | OIL CONSERVATION DIVISION  |  | WEEE THE                             | 11.0.                                       |                        |
| 811 S. First St., Artesia, NM 88210<br>District III – (505) 334-6178  | 1220 South S   |  |                                      | Type of Lease                               |                        |
| 1000 Rio Brazos Rd., Aztec, NM 87410  |  |  |                                      | ATE FEE                                     |                        |
| <u>District IV</u> – (505) 476-3460<br>1220 S. St. Francis Dr., Santa Fe, NM<br>87505   | Santa Fe, NM 87505   |  | 6. State Oil & Gas Lease No.         |   |                        |
| 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   |  |  | 7. Lease Name or Unit Agreement Name |   |                        |
| PROPOSALS.)  1. Type of Well: Oil Well  | Gas Well Other   |  | 8. Well Nu                           | umber                                       |                        |
| 2. Name of Operator   |  |  | 9. OGRID                             | Number                                      |                        |
| 3. Address of Operator  |  |  | 10. Pool n                           | ame or Wildcat                              |                        |
| 4. Well Location  |  |  |                                      |   |                        |
| Unit Letter:  | feet from the  | line and   | f                                    | eet from the                                | line                   |
| Section   | Township   | Range  | NMPM                                 | County                                      |                        |
|   | 11. Elevation (Show wheth  | her DR, RKB, RT, GR, etc   | c.)                                  |   |                        |
|   |  |  |                                      |   |                        |
| 12. Check   | Appropriate Box to Indic   | cate Nature of Notice  | Report or 0                          | Other Data                                  |                        |
|   | 11 1   | į  |                                      |   |                        |
|   |  |  |                                      | T REPORT OF:                                |                        |
|   | RK ALTERING CASING   |  |                                      |   |                        |
|   | _  |  |                                      |   |                        |
| TEMPORARILY ABANDON   | CHANGE PLANS   |  |                                      | =   | Ш                      |
| PULL OR ALTER CASING  | CHANGE PLANS [] MULTIPLE COMPL [   |  |                                      | S. P AND A                                  | Ц                      |
| TEMPORARILY ABANDON DULL OR ALTER CASING DOWNHOLE COMMINGLE   | CHANGE PLANS [  MULTIPLE COMPL [   |  |                                      | =   |                        |
| TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM  | CHANGE PLANS [  MULTIPLE COMPL [   |  |                                      | =   |                        |
| TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:  13. Describe proposed or comp  | CHANGE PLANS  MULTIPLE COMPL   | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a  | NT JOB  nd give pertine              | ent dates, including e                      | stimated date          |
| TEMPORARILY ABANDON   | CHANGE PLANS  MULTIPLE COMPL   pleted operations. (Clearly statement). SEE RULE 19.15.7.14   | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a  | NT JOB  nd give pertine              | ent dates, including e                      | sstimated date         |
| TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:  13. Describe proposed or comp  | CHANGE PLANS  MULTIPLE COMPL   pleted operations. (Clearly statement). SEE RULE 19.15.7.14   | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a  | NT JOB  nd give pertine              | ent dates, including e                      | sstimated date         |
| TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:  13. Describe proposed or compost of starting any proposed w  | CHANGE PLANS  MULTIPLE COMPL   pleted operations. (Clearly statement). SEE RULE 19.15.7.14   | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a  | NT JOB  nd give pertine              | ent dates, including e                      |                        |
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| TEMPORARILY ABANDON   | CHANGE PLANS    MULTIPLE COMPL   | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a NMAC. For Multiple C   | NT JOB  nd give pertine              | ent dates, including e                      | stimated date          |
| TEMPORARILY ABANDON   | CHANGE PLANS    MULTIPLE COMPL   | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a  | NT JOB  nd give pertine              | ent dates, including e                      | stimated date          |
| TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:  13. Describe proposed or com of starting any proposed w proposed completion or re-   | CHANGE PLANS    MULTIPLE COMPL   | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a NMAC. For Multiple C   | NT JOB  nd give pertine              | ent dates, including e                      | stimated date          |
| TEMPORARILY ABANDON   | CHANGE PLANS    MULTIPLE COMPL   pleted operations. (Clearly state of the completion.    Rig Relations   Rig R | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a NMAC. For Multiple Co  | nd give pertine ompletions: A        | ent dates, including e                      | stimated date          |
| TEMPORARILY ABANDON   | CHANGE PLANS    MULTIPLE COMPL   pleted operations. (Clearly state of the completion.    Rig Relations   Rig R | COMMENCE DI CASING/CEMEI  OTHER: ate all pertinent details, a NMAC. For Multiple Co  | nd give pertine ompletions: A        | ent dates, including e                      | stimated date          |
| TEMPORARILY ABANDON   | CHANGE PLANS  MULTIPLE COMPL  pleted operations. (Clearly states or Cork). SEE RULE 19.15.7.14 completion.  Rig Release above is true and complete to the comp | COMMENCE DE CASING/CEMENT OTHER: Tate all pertinent details, a NMAC. For Multiple Comment of the | nd give pertine ompletions: A        | ent dates, including e                      | estimated date am of   |
| PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:  13. Describe proposed or compost starting any proposed we proposed completion or recommendate.  pud Date:  hereby certify that the information IGNATURE alicia fulls | CHANGE PLANS  MULTIPLE COMPL  pleted operations. (Clearly state of the completion.)  Rig Release above is true and complete to the completion.   | COMMENCE DE CASING/CEMENT OTHER: ate all pertinent details, a NMAC. For Multiple Comment of the  | nd give pertine ompletions: A        | ent dates, including extrach wellbore diagr | estimated date am of   |
| TEMPORARILY ABANDON   | CHANGE PLANS  MULTIPLE COMPL  pleted operations. (Clearly state of the completion.)  Rig Release above is true and complete to the completion.   | COMMENCE DE CASING/CEMENT OTHER: ate all pertinent details, a NMAC. For Multiple Comment of the  | nd give pertine ompletions: A        | ent dates, including extrach wellbore diagr | estimated date am of   |
| TEMPORARILY ABANDON   | Rig Release TITLE  CHANGE PLANS  MULTIPLE COMPL  []  []  []  []  []  []  []  []  []  [   | COMMENCE DE CASING/CEMENT OTHER:  ate all pertinent details, a NMAC. For Multiple Comment of the best of my knowled address:   | nd give pertine ompletions: A        | ent dates, including e ttach wellbore diagr | estimated date am of   |





<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720

811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720

District III
1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

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**

CONDITIONS

Action 12490

## **CONDITIONS OF APPROVAL**

| Operator | :                  |                         | OGRID: | Action Number: | Action Type: |
|----------|--------------------|-------------------------|--------|----------------|--------------|
|          | APACHE CORPORATION | 303 Veterans Airpark Ln | 873    | 12490          | C-103Z       |
| #1000    | Midland, TX79705   |                         |        |                |              |

| OCD Reviewer | Condition |
|--------------|-----------|
| ksimmons     | None      |