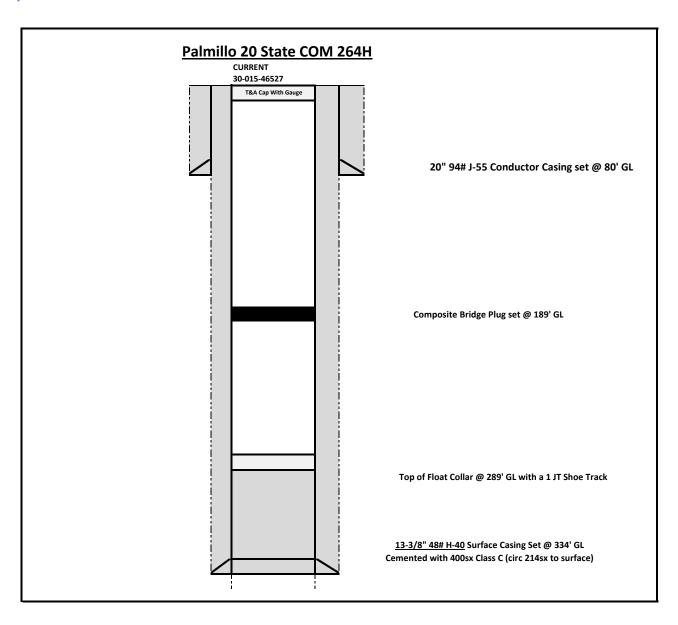
Given by Copy Po Repropriate Disting: 24 AM Office	State of New Mexico	Form C-1831 o				
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.				
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505	5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.				
1220 S. St. Francis Dr., Santa Fe, NM 87505						
	AND REPORTS ON WELLS TO DRILL OR TO DEEPEN OR PLUG BACK TO A N FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name				
1. Type of Well: Oil Well Gas	Well Other	8. Well Number				
2. Name of Operator		9. OGRID Number				
3. Address of Operator		10. Pool name or Wildcat				
4. Well Location						
Unit Letter::	feet from the line and	feet from theline				
Section	Township Range	NMPM County				
11.	Elevation (Show whether DR, RKB, RT, GR, et	cc.)				
DOWNHOLE COMMINGLE	LTIPLE COMPL CASING/CEME	RILLING OPNS. P AND A D				
PULL OR ALTER CASING MUDOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or completed	OTHER: operations. (Clearly state all pertinent details, a SEE RULE 19.15.7.14 NMAC. For Multiple C	NT JOB				
PULL OR ALTER CASING MUDOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or completed of starting any proposed work).	OTHER: operations. (Clearly state all pertinent details, a SEE RULE 19.15.7.14 NMAC. For Multiple C	NT JOB				
PULL OR ALTER CASING	OTHER: operations. (Clearly state all pertinent details, a SEE RULE 19.15.7.14 NMAC. For Multiple Cetion. Rig Release Date:	and give pertinent dates, including estimated date completions: Attach wellbore diagram of				
PULL OR ALTER CASING	OTHER: operations. (Clearly state all pertinent details, a SEE RULE 19.15.7.14 NMAC. For Multiple Cetion. Rig Release Date:	and give pertinent dates, including estimated date completions: Attach wellbore diagram of				
PULL OR ALTER CASING	OTHER: operations. (Clearly state all pertinent details, a SEE RULE 19.15.7.14 NMAC. For Multiple Cetion. Rig Release Date:	and give pertinent dates, including estimated date completions: Attach wellbore diagram of dige and belief.				
PULL OR ALTER CASING	Coperations. (Clearly state all pertinent details, a SEE RULE 19.15.7.14 NMAC. For Multiple Cetion. Rig Release Date: e is true and complete to the best of my knowled. TITLE	and give pertinent dates, including estimated date completions: Attach wellbore diagram of dige and belief.				
PULL OR ALTER CASING	Coperations. (Clearly state all pertinent details, a SEE RULE 19.15.7.14 NMAC. For Multiple Cetion. Rig Release Date: e is true and complete to the best of my knowled. TITLE	and give pertinent dates, including estimated date completions: Attach wellbore diagram of dige and belief.				



Received by OCD: 9/27/2021 8:09:24 AM

State of New Mexico Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham Governor

Sarah Cottrell Propst Cabinet Secretary

Todd E. Leahy, JD, PhD Deputy Secretary Adrienne Sandoval, Division Director Oil Conservation Division



Date:	8-17-21	
API#	30-015-46527	

A Mechanical Integrity Test (M.I.T.) was performed on,	Well Palmillo	20 State	Com	264	H
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___M.I.T. is successful, the original chart has been retained by the Operator on site. Send a legible scan of the chart with an attached Original C-103 Form indicating reason for the test, via post mail to District NMOCD field office. A scanned image will appear online via NMOCD website, www.emnrd.state.nm.us/ocd/OCDOnline.htm 7 to 10 days after postdating.

_____ M.I.T. is unsuccessful, the original chart is returned to the Operator. Repairs will be made; Operator is to schedule for a re-test within a 90-day period. If this is a test of a repaired well currently in non-compliance, all dates and requirements of the original are still in effect.

No expectation of extension should be construed because of this test.

M.I.T. for Temporary Abandonment, shall include a detailed description on Form C-103, including the location of the CIBP and any other tubular goods in the well including the Operator's request for TA status timeline.

M.I.T. is successful, after the secondary request of a scheduled M.I.T. is performed. Therefore, Operator has within a 30-day period from the M.I.T. to submit a current C-103 along with a legible scan of the Chart, including a detailed description of the repair(s). Only after receipt of the C-103 will the non-compliance be closed.

____M.I.T.is successful, Initial of an injection well, you must submit a form C-103 to NMOCD within 30 days. A C-103 form must include a detailed description of the work performed on this well Including the position of the packer, tubing Information, the date of first Injection, the tubing pressure and Injection volume.

Please contact me for verification to ensure documentation requirements are in place prior to injection process.

If I can be of additional assistance, please feel free to contact me at (575) 748-1283 ext.103

Thank You,

Dan Smolik, Compliance Officer EMNRD-O.C.D. District II – Artesia, NM Rochey Morales APA 8-17-21 Released to Imaging: 10/7/2021 10:01:09 AM



Pressure Recorder Calibration Certificate

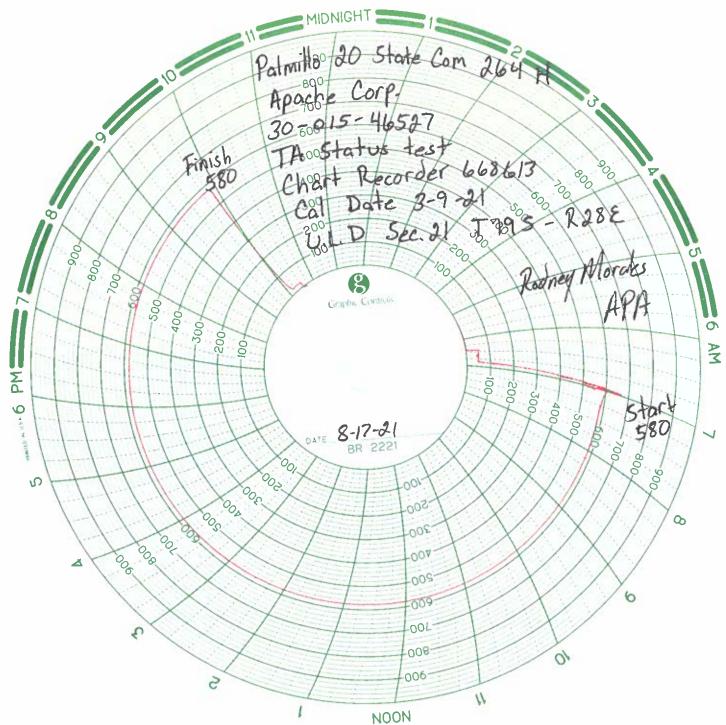
Company Name:	Apache					**		Certificate #:	668613	_3921
Recorder		прионе								
Type:			/let	tco			Serial #: 668613			613
Pressure Range 1:	0-1000#							Accuracy: +/- 0.2% PSIG		
Pressure Range 2:		NA						Accuracy:	+/- 0.29	% PSIG
Temperature Range:	NA						Accuracy:	N.	A	
	Pressure Pen 1						and the state of t	Temperature Pen	Settlick PARKE	
Increasing	Pressure (AND DESCRIPTION OF THE PARTY OF	27.30	Decreasing	g Pressure	(PSIG)		Control of the Control of the Control	perature Test	THE RESERVE OF THE PARTY OF THE
Applied Pressure	Indicated Pressure	Error %	ancero.	Applied Pressure	Indicated Pressure	Error %		Applied Temperature	Indicated Temperature	Error %
0	0	0		800	800	0		0	0	0
100	100	0		600	600	0		0	0	0
300	300	0		400	400	0		0	0	0

Pressure Pen 2							
Increasing	Pressure (PSIG)		Decreasing Pressure (PSIG)			
Applied Pressure	Indicated Pressure	Error %		Applied Pressure	Indicated Pressure	Error %	
0	0	0		0	0	0	
0	0	0		0	0	0	
0	0	0		0	0	0	
> 0	0	0		0	0	0	
0	0	0		0	0	0	
0	0	0		0	0	0	

C

is is to certify that this instrument has been inspected and calibrated using a certified 10,000 psi Crystal Gauge.

Slibrated By: Chris Villaneuva Received by QCD:

The Pression of the Pression 3-9-2021 

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) 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 51935

CONDITIONS

Operator:	OGRID:
APACHE CORPORATION	873
303 Veterans Airpark Ln	Action Number:
Midland, TX 79705	51935
	Action Type:
	[C-103] NOI Temporary Abandonment (C-103I)

CONDITIONS

Created By	Condition	Condition Date		
jagarcia	None	10/7/2021		