Submit 3 Copies To Appropriate District							form C-103
Office State of New Mexico District I Energy, Minerals and Natural Resources				June 19, 2008			
1625 N. French Dr., Hobbs, NM 88240 OBBS OCD				30-025-04247			
District II 1301 W. Grand Ave., Artesia, NM 88210 District III JUL 20 2011				5. Indicate Type of Lease			
Disrtict III JUL 2 0 2011 1000 Rio Brazos Rd. Aztec, NM 87410 1220 South St. Francis Dr.				STATE 🗹 🛛 🖊			
District IV Santa Fe, NM 87505				6. State Oil & Gas Lease NO.			
1220 S. St. Francis Dr., Santa Fe, NMBEGEIVED				B-1385			
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Agreement Name			
(DON NOT USE THIS FORM FOR PROPOSALS TO DRILL OR DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH				State "M"			
PROPOSALS.)				8. Well Number			
1. Type of Well: Oil Well Gas Well Other				2 9. OGRID Numer			
2. Name of Operator Apache Corporation				U. OUND	87	3 /	
3. Address of Operator				10. Pool Name Eunice Monument; Grayburg/SA			
303 Veterans Airpark Lane, Ste. 3000, Midland, TX 79705						nt, Grayi	
Unit Letter J	: 1980 feet from the	S	line and	1980	feet from th	E	line Lea
Section 13	Township 20S 1. Elevation (Show whether I	Range DR, RKB,RT,	36E GR, etc.)	NMPM		ounty	Lea
		556' DF			، <u>، قب</u> ريميدً		1 , 1
12. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data							
NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
				EDRILLING	GOPNS.	<u> </u>	
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CE		3.[
DOWNHOLE COMMINGLE			ALTERING P AND A	CASING	L F	-	
OTHER:					L L	1	
13. Describe proposed or completed or	perations. (Clearly state all p	pertinent deta	ails, and give	pertinent da	ates, includin	g estimate	d date of
starting any proposed work.) SEE RULE 1103. For Multiple Completions: Attach wellbore diagram or proposed completion or recompletion.							
Apache Corporation proposes to P&A the above mentioned well by the attached procedure.							
The Oil Conservation Division Must be notified							
24 hours prior to the beginning of plugging operations.							
Spud Date:		Rig Releas	se Daté:	1	- 1		
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	, and complete to the best of m	(knowledge er	ad ballof				
I hereby certify that the information above is true	and complete to the best of my	/ knowledge ar	la bellet.				
SIGNATURE <u>OULM</u>	n Burka TITLE	Recla	mation For	reman	DATE _	7/1	9/11
Type or print name Guinn	Burks E-mail add.	guinn.bur	ks@apache	corp.com	PHONE:	432-5	56-9143
For State Use Only	IR.	1	al.`	011.	.	7/2	Ilzou
APPROVED BY: Conditions of Approval (if any):	MANN TOLE	<u> </u>	mance	X HALL	PATE _		· wi
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