PAGE 1 OF Z

Submit 3 Copies To Appropriate District Office State of	of New Mexico	Form C-103	
<u>District I</u> Energy, Minera			
1625 N French Dr , Hobbs, NM 88240 District II HOBBS OCT	DIATION DIVIGIONI	WELL API NO. 30-025-06997	
1301 W Grand Ave, Artesia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease STATE FEE	
1000 Dio Progon Dd. Arton NM 98410 - AAA	District IV 1220 South St. Francis Dr. 1220 South St. Francis Dr. Santa Fe, NM 87505		
District IV 1220 S St Francis Dr , Santa Fe, NM Santa	re, NIVI 8/303	6. State Oil & Gas Lease No.	
87505			
SUNDR RECTIVEES AND REPORTS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO D DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (F	EEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Owen "B"	
PROPOSALS)	ORW C-101) TOR SOCI	8. Well Number	
1. Type of Well: Oil Well Gas Well Other		2	
2. Name of Operator Apache Corporation		9. OGRID Number 873	
3. Address of Operator		10. Pool name or Wildcat	
303 Veterans Airpark Lane, Ste. 3000, Midland TX 79705		Tubb O&G (Gas), Drinkard	
4. Well Location			
Unit Letter L : 1980 feet from t	he South line and	420feet from theWestline	
Section 34 Township	21-S. Range 37-E	NMPM Lea County	
2 11. Elevation (Show	whether DB RKB RT GR, etc.		
Pit or Below-grade Tank Application (For pit or below-grade tank c		ed)	
Pit Location: UL L Sect 34 Twp 21S Rng 37E Pit type 5	SteelDepth to Groundwater_	Distance from nearest fresh water well	
Distance from nearest surface water Below-grade Tank	Location ULSectTw	rpRng;	
1980 feet from the South line and 420 feet from the We	<u>st</u> line		
CONDITIONS TOOK Appropriate Box to	Indicate Nature of Notice	Report or Other Data	
CONDITIONS OF PA APPROVAL: Appropriate Box to plugging of the Well Bore. Liability under bond is Surface Inspection."	SUE	SSEQUENT REPORT OF:	
OCD Harman Well Bore Liability Approve	~~□ REMEDIAL WOR	RK ALTERING CASING	
Surface In-	as to COMMENCE DE		
retained until surface restoration is completed. Surface Inspection".	COMMENCE DE	RILLING OPNS.□ PLUG AND ☑ ABANDONMENT	
OCD Hobbs office needs C-103 "Check Off List for Pull OR AL. —	Or CASING TEST A		
OTHER:	OTHER:		
13. Describe proposed or completed operations. (Clear			
of starting any proposed work). SEE RULE 1103 or recompletion.	i		
2/24/12 Notify Macky Brown of P&A intent @ 1pm. 2/27/12 MIRU intent. Spot 70 sks class 2/29/12 RIH did not tag plug. Notify N	J RIH w/2 3/8 tubing to 3754' open end	led. 2/28/12 Tag @ 6582' Notify Mark (OCD) of plug	
CIBP @ 5975' 3/1/12 RIH w/2 3/8 W.S. tag CIBP @ 5975'. Notify	 Mark (OCD) with intent to spot 83 sks 	class "C". Load hole test casing to 500PSI. Spot 83	
sks class "C" circulate hole w/73 bbls MLF. Tag plug @ 4977'. 3/2 w/WL truck. Notify Mark (OCD) sqz 110 sks class "C". 3/5/12 RIH	l tag plug @ 3460 POOH to 2122' RUV	VL truck RIH perforate @ 2418' POOH w/WL truck.	
QU pump est inj rate. Could not sqz. POOH LD packer RIH open having to dig to find conductor pipe.	ended to 2468'. Notify Mark (OCD) Sp	ot 25 sks class "C" cmt. Rig down pulling unit due to	
I hereby certify that the information above is true and com			
grade tank has been/will be constructed or closed according to NMO	CD guidelines 🔲, a general permit 🗀	or an (attached) afternative OCD-approved plan	
SIGNATURE / / //	TITLEManager	DATE 3/14/12	
Type or print name Jimmy Bagley	E-mail address:	Telephone No. 432-561-8600	
(This space for State use)		•	
APPPROVED BY	TITLE STATE	DATE 3-20-20/	
Conditions of approval, if any:			
/ /		,	

Submit 3 Copies To Appropriate District Offfice Engl	State of New Mexico gy, Minerals and Natural Resour	res	Form C-103 March 4, 2004	
District I 1625 N French Dr , Hobbs, NM 88240	by, witherthe and Matural Resour	WELL API NO.		
District H	CONSERVATION DIVISIO		30-025-06997	
District III	1220 South St. Francis Dr.	5. Indicate Type		
1000 Rio Brazos Rd , Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE 6. State Oil & Ga		
1220 S St Francis Dr, Santa Fe, NM	· · · · · · · · · · · · · · · · · · ·	o. State on & da	s Lease No.	
87505	PEDODES ON WELLS	7 1 1	TI 'A A	
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		1,	Unit Agreement Name	
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Pit or Below-grade Tank Application (For pit or below			,	
Pit Location: ULSect 34 Twp 21S Rng 37			arest fresh water well	
Distance from nearest surface waterBelow	-grade Tank Location ULSect	TwpRng;		
feet from the South line and 420 feet f	rom the vyest line			
		•		
12. Check Appropria	te Box to Indicate Nature of N	Notice, Report or Other	Data	
NOTICE OF INTENTIO		SUBSEQUENT RE	_	
PERFORM REMEDIAL WORK PLUG A	ND ABANDON 🗖 📗 REMEDIA	AL WORK	ALTERING CASING [
TEMPORARILY ABANDON CHANG	E PLANS 🗆 COMMEN	ICE DRILLING OPNS.	PLUG AND ABANDOMMENT	
PULL OR ALTER CASING MULTIP		TEST AND JOB	ABANDOMNENT	
OTHER:	☐ OTHER.			
13. Describe proposed or completed opera	tions. (Clearly state all pertinent de	tails, and give pertinent date	es, including estimated date	
of starting any proposed work). SEE or recompletion.	RULE 1103. For Multiple Completi	ons: Attach wellbore diagra	am of proposed completion	
Continuation of Dates: 3/6/12 Move rig out of the	e way and assist Roustahout gang and b	ackhoo 3/7/12 Crano not availe	phlo uptil 3/0/12	
3/8/12 Shut down due to bad weather 3/9/12 S	tand by for crane Move rig to Apache of	fice. 3/12/12 RIH tag plug @ 21		
RIH to 979' RU wireline RIH perforate @ 1315' 3/13/12 RIH tag plug @ 1149' PU to 100' RU V	POOH w/WL truck. Sqz 100 sks class "C /L truck BIH perforate @ 190' POOH w/V	" displace to 1215'. /Litruck Soz 190 sks "C" from:	190' to surface. Circulate	
cement behind all casings. Rig down all P&A e	quipment Cut off W	H, anchors, a	clean 100. 4	
install dry hole	marker.	, , ,		
I hereby certify that the information above is tr grade tank has been/will be constructed or closed accor	ue and complete to the best of my ki	nowledge and belief. I furthe	er certify that any pit or below-	
grade talk has been will be consultated of crosed according	unig to two CD guidennes [4, a general p	ermit 🔲 or an (attached) aftern	ative OCD-approved plan	
SIGNATURE / / / / /	TITLE_ Manag	er	_DATE3/14/12	
Type or print name Jimmy Bagley	E-mail address:	Τe	elephone No. 432-561-8600	
(This space for State use)				
	/			
APPPROVED BY Truske	TITLE STAF	f MGZ	DATE 3-20-2017	
Conditions of approval, if any:	= 1.771			