Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I	Mingrals and Natural Resources	October 13, 2009
Dictrict II	•	WELL API NO. 30-025-34327
1301 W. Grand Avc., Artesia, NM 88210 JUL C	IL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	SOCO South St. Flancis Dr.	STATE FEE 6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	, J J J J J J J J J J J J J J J J J J J	6. State Off & Gas Lease No.
SUNDRY NOTICES AN	D REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DIFFERENT RESERVOIR. USE "APPLICATION I PROPOSALS.)		Bertha Barber
1. Type of Well: Oil Well Gas We	il 🗌	8. Well Number 18
2. Name of Operator Apache Corp.		9. OGRID Number
3. Address of Operator		10. Pool name or Wildcat
P O box Drawer D Monument NM 88265		Tubb
4. Well Location		
	6feet from theSouth line	and663feet from the
West line Section 5	Township 20S Range 37	E NMPM Lea County
3 11. El	evation (Show whether DR, RKB, BT, GR, atc.	ground Injection Control Program Manual
12 Charl Annua	11.6 C.	Packer shall be set within or less than 100
12. Check Approp.	riate Box to indicate Nature of Northe	Report or Other Data he uppermost injection perfs or open hole.
NOTICE OF INTENT		SSEQUENT REPORT OF:
= /	AND ABANDON REMEDIAL WOR	
	IGE PLANS ☐ COMMENCE DR IPLE COMPL ☐ CASING/CEMEN	ILLING OPNS. PAND A
DOWNHOLE COMMINGLE	— · · · · · · · · · · · · · · · · · ·	_
_		feet of the uppermost injection perfs or
OTHER: 13 Describe proposed or completed on	erations. (Clearly state all pertinent details an	d give pertinent dates, including estimated date
of starting any proposed work). SE proposed completion or recompletion	E RULE 19.15.7.14 NMAC. Formula in the company of t	Per Undergrößund in beetion Control Progr
Intend to MIRU and POOH with 178 jts. of 2 Dump bail 35' of cement on top of the CIBP 30 minutes and record on a chart.	2 7/8 tubing and sub pump. MIRU wire line true. RIH with tubing and circulate with packer fl	uck and set a CIBP + or - 5650' uid. Will pressure test the casing to 500 psi for
Condition of Approval: notify	The	Oil Conservation Division
OCD Hobbs office 24 hours		T BE NOTIFIED 24 Hours
•	Duin 4	o the beginning of operations
prior of running MIT Test & Ch	AFL .	or operations
Spud Date:	Rig Release Date:	
		•
I hereby certify that the information above is	true and complete to the best of my knowledg	e and belief.
	,	
SIGNATURE	TITLE Instrument Tech	DATE 6-29-12
Type or print name Jim Ellison For State Use Only	E-mail address: _JD.Ellison@apa	acheccorp.com_ PHONE:
8//	/	
APPROVED BY: Conditions of Approval (if any):	TITLE THE NE	DATE 7-9-2012
		JUL 0 9 2012
		JUL US