Submit 2 Conter To Appropriate District			E C 102		
Submit 3 Copies To Appropriate District State of New Mexico		(Form C-103 June 19, 2008		
District I Energy, Minerals and Natural Resources 1625 N French Dr., Hobbs, NM 88240 District II		WELL API NO.			
1301 W Grand Aug. Artonia NM 88210 OIL CONSERVATION DIVISION		30-025-06130 V			
District III	St. Francis Dr.	5. Indicate Type of Lease STATE X FEE			
District IV Santa Fe,	NM 87505	6. State Oil & Gas Lease No.			
1220 S St Francis Dr , Santa Fe, NM 87505		B-2406			
SUNDRY NOFFICES AND REPORTS ON WELLS		7. Lease Name or Unit	Agreement Name		
(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		Wood "A" State			
PROPOSALS)		8. Well Number 0002			
1. Type of Well: ⊠Oil/Well □ Gas Well □ Other: 2. Name of Operator /		9. OGRID Number			
Apache Corporation		873			
3. Address of Operator	10. Pool name or Wildcat				
303 Veterans Airpark Lane, Suite 3000 Midland, TX 79705		Eunice; Monument G/SA	. (23000)		
4. Well Location Unit Letter F : 1980 feet from the N	orth line and 161	50 feet from the	West line		
Unit Letter F : 1980 feet from the N Section 16 Township 20S	orth line and <u>168</u> Range 37E		inty Lea		
	ther DR, RKB, RT, GR, etc.				
3645' GL					
12. Check Appropriate Box to Indi	cate Nature of Notice,	Report or Other Data			
NOTICE OF INTENTION TO:	SUE	SEQUENT REPOR	T OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING					
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A					
OTHER:	OTHER: Well Sig		×		
 Describe proposed or completed operations. (Clearly s of starting any proposed work). SEE RULE 1103. For 					
or recompletion.	Multiple Completions: A	mach wendore diagram of	proposed completion		
The well sign for Wood A State #2 was installed Tuesday, November 13, 2012.					
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Spud Date: 02/21/1937 Rig Rei	lease Date:				
I hereby certify that the information above is true and complete	to the best of my knowleds	ge and belief.			
SIGNATURE	Regulatory Tech I	DATE_*	11/14/2012		
Type or print name Fatima Vasquez E-mail	address: Fatima.Vasquez@a	pachecorp com PHONE:	(432) 818-1015		
For State Use Only					
APPROVED BY: Dama TITLE DET MOR DATE //-(9-20/2					
Conditions of Approval (if any):					
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			1 9 2012		

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