Submit 3 Copies To Appropriate District	State of New Mexico			rm C-103
Office District I	Energy, Minerals and Natural Resources		March 4, 2004	
1625 N. French Dr., Hobbs, NM 88240	,		WELL API NO.	
District II	OIL CONSERVATION DIVISION		30-025-36796	
1301 W. Grand Ave., Artesia, NM 88210			7. Indicate Type of Lease	
District III	District III 1000 Rio Brazos Rd., Aztec, NM 87410 HOBBS, NM 88240		STATE FEE 7. State Oil & Gas Lease No.	
District IV		7. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM				i
87505				
	ES AND REPORTS ON WELLS		Lease Name or Unit Agreeme	nt 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			HESTER 12	
SUCH PROPOSALS.)			8. Well Number	
Type of Well: Oil Well			_	
			9. OGRID Number	
2. Name of Operator			9. OGRID Number 873	
APACHE CORPORATION 3. Address of Operator			10. Pool name or Wildcat	
J. Addicas of Operator			BLINEBRY OIL & GAS (OIL) 6660	
6120 S. YALE, STE. 1500			DRINKARD 19190 HOUSE: ABO 33210	
TULSA, OK 74136			TUBB OIL & GAS (OIL) 60240	
4. Well Location				
Unit Letter P : 990 feet from the S line and 990 feet from the E line				
Section 12 Township 20S Range 38E NMPM County LEA				
	11. Elevation (Show whether DR			
3565				
Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)				
Pit Location: ULSectTwpRngPit typeDepth to GroundwaterDistance from nearest fresh water well				
Distance from nearest surface water Below-grade Tank Location ULSectTwpRng;				
feet from theline andfeet from theline				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
• • •	<u>-</u>			
NOTICE OF INTE			UBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	C ALTERING CASI	NG 🔲
TEMPORARY VARANCON T	0.40.			g
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRII		_ 🗆
PULL OR ALTER CASING	MULTIPLE	CASING TEST AN	ABANDONMENT	l .
	COMPLETION	CEMENT JOB		
	OOM LETION	OLIVILIA OOD		
OTHER: 1 YEAR EXTN.	×	OTHER:		
13 Describe proposed or completed opera	tions (Clearly state all pertinent details	and give pertinent dates	including estimated date of starting any propo	sed work) SEF
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
WE DECKIEST A ONE VE	AD EVERNICION FOR	THE ADOM	T TOTAL CICILA CITE AT	יד דוי
WE REQUEST A ONE YEAR EXTENSION FOR THE ABOVE MENTIONED WELL. THE				
PREVIOUS PERMIT FOR THIS WELL EXPIRED 8/3/2005. PERMIT # 1291.				
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		<i>C</i> .	0/0/01	
		> V D L	rpz 8/3/1/10	
I hereby certify that the information above is true	e and complete to the best of my knowled	ge and belief. I further	certify that any pit or below-grade tank has	been/will be
constructed or closed according to NMQCD guidelines , a general permit or an (attached) alternative QCD approved plan .				
SIGNATURE HANG MILLAMO TITLE SR. DEPT. CLERK DATE 9/26/05				
Type or print name LANA WILLIAMS E-mail address: lana.williams@apachecorp.com Telephone No. 918-491-4980				
(This space for State use)				
APPPROVED BY Conditions of approval, if any:	TITLE DESIGNATION ENG	SINE PATE	SEP 2 7 2005	
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