

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

HOBBS OCD
 JAN 31 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-06035	<input checked="" type="checkbox"/>
5. Indicate Type of Lease STATE FEE	<input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name V. Laughlin	<input checked="" type="checkbox"/>
8. Well Number 2	<input checked="" type="checkbox"/>
9. OGRID Number 873	<input checked="" type="checkbox"/>
10. Pool name or Wildcat Eumont Yates 7 Rvrs/Qn	<input checked="" type="checkbox"/>

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 PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Apache Corporation

3. Address of Operator
303 Veterans Airpark Lane, Ste 3000, Midland TX 79705

4. Well Location
 Unit Letter C : 660 feet from the N line and 1980 feet from the West line
 Section 9 Township 20-S Range 37E NMPM Lea County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3560' DF

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Whitaker
 1/23/13 Notify (OCD) Mark with of MIRU RIH tag @ 2720'
 1/24/13 Circulated well w/ 97 bbls MLF. Pressure test casing to 1000psi RIH Perforate @ 2492', Couldn't Pump into perf RIH to 2542' spot 75x class "c"
 1/25/13 RIH tag TOC @ 2084' PUH to 950' perf @ 1275' sqz 50x class "c" and displace to 1175' WOC 4 hrs RIH tag TOC @ 1130' PUH perf @ 286' sqz 200 x class "c" from 286' to surf. Cmt was circ behind all casings. Cutoff well head, anchors, clean location, Install Dry hole marker.

Spud Date:

Rig Release Date:

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us/ocd.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Jimmy Bagley* TITLE Sunset Well Service DATE 1/25/13
 Type or print name Jimmy Bagley E-mail address: _____ PHONE: 432-561-8600

For State Use Only
 APPROVED BY: *Mark Whitaker* TITLE Compliance Officer DATE 02-01-2013
 Conditions of Approval (if any): _____