

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

Form C-103
 Revised August 1, 2011

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.)		WELL API NO. 30-025-05975
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Apache Corporation		6. State Oil & Gas Lease No.
3. Address of Operator 303 Veterans Airpark Lane, Ste 3000, Midland TX 79705		7. Lease Name or Unit Agreement Name Bertha J. Barber
4. Well Location Unit Letter <u>P</u> : <u>330</u> feet from the <u>S</u> line and <u>330</u> feet from the <u>E</u> line Section <u>7</u> Township <u>20S</u> Range <u>37E</u> NMPM <u>Lea</u> County <u>Lea</u>		8. Well Number <u>5</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3554' GL</u>		9. OGRID Number <u>873</u>
10. Pool name or Wildcat Eunice Monument: Grayburg/SA		10. Pool name or Wildcat Eunice Monument: Grayburg/SA

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

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

1/28/13 MIRU RIH tag toc @ 2887' 1/29/13 Pressure test csg to 1000[#] psi Circ well w/115 bbls mlf
 PUH perforated @ 2543' Couldn't pump into perms.
 1/30/13 RIH to 2593' spot 65 x class "c". 1/31/13 RIH tag toc @ 2227' PUH perf @ 1125' sqz 50x class "c"
 displace to 900', woc 4 hrs, rih tag toc @ 870' PUH perf @ 301' sqz 140x class "c" frm 301' to surf, cmt
 was circ behind all csg Rig down all P # A equip Cutoff wellhead, anchors, clean location. Install Dry hole
 marker.

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.cmnrd.state.nm.us/ocd.

Spud Date:

Rig Release Date:

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 Manager DATE 1-31-13
 Type or print name Jimmy Bagley E-mail address: _____ PHONE: 432-561-8600

For State Use Only
 APPROVED BY: Maah White TITLE Compliance Officer DATE 02-08-2013
 Conditions of Approval (if any):

P.M.
 FEB 11 2013 Chm