

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

Form C-103
 Revised July 18, 2013

WELL API NO. 30-025-33696
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. N/A
7. Lease Name or Unit Agreement Name W A Weir (302375)
8. Well Number 013
9. OGRID Number 873
10. Pool name or Wildcat Monument; Abo (46970)

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSING 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, Suite 3000 Midland, TX 79705

4. Well Location
 Unit Letter C : 330 feet from the North line and 1650 feet from the West line
 Section 35 Township 19S Range 36E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3639' GR

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"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <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 type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Perf Upper Abo <input checked="" type="checkbox"/>
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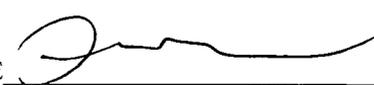
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Apache did the following to this well:

08/26/2013 MIRU. Set CIBP @ 7240'. Dump 3 sx cmt on top of CIBP.
 08/27/2013 Test to 500# - good test. Perf Upper Abo @ 7015'-19', 7051'-56', 7073'-79', 7124'-28', 7133'-39' w/ 2 SPF, 50 holes.
 08/28/2013 Spot 3 bbls of acid. Acidize w/ 2500 gals 15% HCl Abo blend.
 08/29/2013 -08/30/2013 Swab testing. No oil or gas.
 09/03/2013 Set CIBP @ 6938', dump 35' cmt. Requested TA status.
 09/05/2013 OCD approved TA to 09/15/2018.

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  TITLE Regulatory Tech II DATE 01/17/2014

Type or print name Fatima Vasquez E-mail address: Fatima.Vasquez@apachecorp.com PHONE: (432) 818-1015

For State Use Only

Accepted for Record Only

APPROVED BY: _____ TITLE _____ DATE 2/18/2014

Conditions of Approval (if any):

FEB 18 2014