Submit 1 Copy To Appropriate District Office	State of New Mexico			Form C-103	
District I - (575) 393-6161			WELL API NO.	Revised July 18, 2013	
	District III - (505) 334-6178 1220 South St. Francis Dr.		30-025-42240		
811 S. First St., Artesia, NM 88210			5. Indicate Type of Lease		
District III - (505) 334-6178			STATE	FEE 🛛	
<u>District IV</u> - (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lea		
1220 S. St. Francis Dr., Santa Fe, NM					
87505 SUNDRY NOTI	7. Lease Name or Uni	Agreement Name			
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			NORTHEAST DRINK		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)					
1. Type of Well: Oil Well Gas Well Other			8. Well Number		
2. Name of Operator			9. OGRID Number		
Apache Corporation				873	
3. Address of Operator			10. Pool name or Wildcat		
303 VETERANS AIRPARK LANE, MIDLAND TX 79705			EUNICE; BLI-TU-DR, NORTH		
4. Well Location					
L. of No_10: 1960 feet from the SOUTH line and 2510 feet from the EAST line					
Section 10 Township 21S Range 37E NMPM County LEA					
11. Elevation (Show whether DR, RKB, RT, GR, etc.)					
3448.82					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ÂLTERING CASING [
page page page page page page page page				7T	
PULL OR ALTER CASING					
DOWNHOLE COMMINGLE					
CLOSED-LOOP SYSTEM		OTHER OF	DDEOTED DI AT	ΚŻ	
OTHER:	eted operations (Clearly state all r		RRECTED PLAT	luding estimated date	
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 WISHES TO SUBMIT CORRECTED PLAT SHOWING UL J INSTEAD OF LOT NO. 10					
AI ACILL WIGHLE TO BU	JMIT CORRECTED LEAT BITO	ING OL J ING I IZ	AD OF EOT NO.		
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Spud Date:	Rig Release Dat	e:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
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SIGNATURE Merholle Con	TITLE)c/	Tech	DATE	1-6-15	
1 / /	7	, , ,			
Type or print name Michelle Cooper E-mail address: Michelle, cooper & speches PHONE: 432-818-1168 APPROVED BY: TITLE Petroleum Engineer DATE 01/07/15					
For State Use Unly					
APPROVED BY: DATE 01/87/1C					
Conditions of Approval (if any):				-///	