Office Office	State of New Mexi			Form C-103 March 4, 2004
District I	Energy, Minerals and Natura	al Resources	WELL API NO.	March 4, 2004
1625 N. French Dr., Hobbs, NM 88240	OH CONGEDUATION DIVISION		1	0-025-37322
District II  1301 W. Grand Ave. Artesia NM 88310	OIL CONSERVATION DIVISION		5. Indicate Type of	
1301 W. Grand Ave., Artesia, NM 88210 District III			STATE Z	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 875	05	6. State Oil & Gas	Lease No.
District IV				
1220 S. St. Francis Dr., Santa Fe, NM 87505				
	ES AND REPORTS ON WELLS		7. Lease Name or	Unit Agreement 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				OWEN B
SUCH PROPOSALS.)			8. Well Number	
1. Type of Well:				
Oil Well Gas Well Other			O OCDID North	11
2. Name of Operator APACHE CORPORATION			9. OGRID Number	873
3. Address of Operator			10. Pool name or V	
6120 S. YALE, STE. 1500			EUNICE; SAN AN	
TULSA, OK 74136-4224				Y; GRAYBURG 50350
4. Well Location			-	
Unit Letter N :	990 feet from the	S line and	1650 feet fro	om the <u>W</u> line
	ship 21S Range 37I			y LEA
	11. Elevation (Show whether DR			garaga garaga daga
The state of the s	3443'	GR	TO THE STATE OF	<b>的现在分词 化自然系统 化多数分类</b>
Pit or Below-grade Tank Application (For pi	t or below-grade tank closures, a form	C-144 must be attache	<u>d)</u>	
Pit Location: ULSectTwp	Rng Pit type De	epth to Groundwater	Distance from n	earest fresh water well
Distance from nearest surface water		Sect1wp	, Kng ;	
feet from theline and	feet from theline			
12. Check Appropriate Box to Indicate Nat	ture of Notice. Report or Other Data			
•••	<u>-</u>		U DOCOLICAT DEC	ODT OF
NOTICE OF INTE PERFORM REMEDIAL WORK ☐ I		REMEDIAL WOR	SUBSEQUENT REF	ORT OF: ALTERING CASING
FENFONIN NEINEDIAL WORK	FLOG AND ABANDON [	REWIEDIAL WOR	<b>Т</b>	ALTENING CASING [
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS.	PLUG AND
	51 % H G E 1 E 1 H G	0011111121101212111	ZZ10 01 110.	ABANDONMENT
PULL OR ALTER CASING   I	MULTIPLE	CASING TEST AN	ND 🗆	
	COMPLETION	CEMENT JOB		
OTHER:		OTHER: ADDIT	IONAL INFORMAT	ION
13. Describe proposed or completed operation	tions. (Clearly state all pertinent details,	and give pertinent dates,	, including estimated da	te-of-starting any proposed work). SEE
RULE 1103. For Multiple Completion	ons: Attach wellbore diagram of proposed	d completion or recompl	etion. $\frac{1}{202}$	22232
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SURFACE CASING AMOUNT-	290 TYPE-CLASS C	TOP OF C	EMENT-0	
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			cement of the control	99780
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 NMOCD g	uidennes ∐, a general permit ∐ or an •	ı (attacned) alternative	OCD-approved plan	<b>-</b> ¹· , /
SIGNATURE Sana William	70 TITLE SR. I	DEPT. CLERK		DATE 11/14/05
				• /
Type or print name LANA WILLIAMS	E-mail address: lana.williams@a	pachecorp.com	Tele	phone No. 918-491-4980
om:				
(This space for State use)			,	
APPPROVED BY	TITUS CYDOL EHM FA	יטואנינים די	ATE	
Conditions of approval, if any	""PETROLEUM EN	WHITEHT D		0.0000
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