

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 July 18, 2013

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

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection Well <input type="checkbox"/>		WELL API NO. 30-025-06446
2. Name of Operator Apache Corporation		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 303 Veterans Airpark Lane, Suite 1000 Midland, TX 79705		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>A</u> : <u>660</u> feet from the <u>North</u> line and <u>660</u> feet from the <u>East</u> line Section <u>10</u> Township <u>21S</u> Range <u>37E</u> NMPM County <u>Lea</u>		7. Lease Name or Unit Agreement Name Northeast Drinkard Unit (NEDU) / 22503
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3452' DF		8. Well Number <u>408</u> 9. OGRID Number 873
10. Pool name or Wildcat Eunice; B-T-D, North (22900)		

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

<b>NOTICE OF INTENTION TO:</b> 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"/>		<b>SUBSEQUENT REPORT OF:</b> 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: ANNUAL MIT PRESSURE TEST <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 performed a pressure re-test on 9/17/2015; see chart attached. ✓

Spud Date: 3/28/1957

Rig Release Date: 4/1/1957

*mw*  
*BP*

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

SIGNATURE Reesa Fisher TITLE Sr. Staff Reg Analyst DATE 9/30/2015

Type or print name Reesa Fisher E-mail address: Reesa.Fisher@apachecorp.com PHONE: (432) 818-1062

**For State Use Only**

APPROVED BY: Bill Sordemann TITLE Staff Manager DATE 10/3/15

Conditions of Approval (if any):

OCT 07 2015

PRINTED IN U.S.A.

6 PM

MIDNIGHT

6 AM

NOON

Graphic Controls

9-17-15

DATE BR 2221

PKR 5651  
Point 5736

*Handwritten notes:*  
10/13/15  
10/13/15  
10/13/15

*Handwritten notes:*  
APACIFIC COAST  
KIDNEY  
30 025  
JULIA  
POST

