Submit 1 Copy To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised July 18, 2013 District I - (575) 393-6161 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 30-025-06437 OIL CONSERV 811 S. First St., Artesia, NM 88210 5. Indicate Type of Lease 1220 Sanh District III - (505) 334-6178 STATE FEE \square 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87 6. State Oil & Gas Lease No. District IV - (505) 476-3460 200 S. St. Francis Dr., Santa Fe, NM
87505

SUNDRY NOTICES AND REPORTS ON WARD OF THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name West Blinebry Drinkard Unit (WBDU) / 37346 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 032 1. Type of Well: Oil Well Gas Well Other Injection 2. Name of Operator 9. OGRID Number Apache Corporation 873 3. Address of Operator 10. Pool name or Wildcat 303 Veterans Airpark Lane, Suite 1000 Midland, TX 79705 Eunice: B-T-D. North [22900] 4. Well Location 1980 feet from the West feet from the North line and 1980 Unit Letter line Section 09 Township 21S Range 37E **NMPM** County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3492' GL 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 ALTERING CASING [COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON CHANGE PLANS** P AND A \Box PULL OR ALTER CASING \Box MULTIPLE COMPL \Box CASING/CEMENT JOB DOWNHOLE COMMINGLE \Box CLOSED-LOOP SYSTEM OTHER: ANNUAL TESTING 7 OTHER: 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 the required testing for this well 5/24/2018, witnessed by the OCD. Passing chart attached. Rig Release Date: Spud Date: 11/14/1947 10/6/1947 I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Sr. Staff Reg Analyst DATE 7/12/2018 **SIGNATURE** Type or print name Reesa Fisher PHONE: (432) 818-1062 E-mail address: For State Use Only APPROVED B

Conditions of Approx

