

Submit 1 Copy To Appropriate District  
 Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM  
 87505

State of New Mexico  
 Energy, Minerals and Natural Resources  
**HOBBS OCD**  
**OIL CONSERVATION DIVISION**  
 NOV 15 2018 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 October 13, 2009

**RECEIVED**

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/>		WELL API NO. 30-025-33687 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> 6. State Oil & Gas Lease No.
2. Name of Operator Apache Corp.		7. Lease Name or Unit Agreement Name McGrail St.
3. Address of Operator P O box Drawer D Monument NM 88265		8. Well Number 10
4. Well Location Unit Letter <u>  N  </u> : <u>  400  </u> feet from the <u>  S  </u> line and <u>  1650  </u> feet from the <u>  W  </u> line Section <u>  26  </u> Township <u>  17S  </u> Range <u>  36E  </u> NMPM Lea County		9. OGRID Number 873
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		10. Pool name or Wildcat Monument Abo

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"/>		<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: <input type="checkbox"/> MPT for Extension of TA		OTHER: <input type="checkbox"/>	

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.

Perfs 7020-7427

Plant to move in truck to pressure test casing to 550 psi for 30 minutes.

**Condition of Approval: notify  
 OCD Hobbs office 24 hours  
 prior of running MIT Test & Chart**

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 JD Ellison TITLE Instrument Tech DATE 11/15/18  
 Type or print name Jim Ellison E-mail address: JD.Ellison@apacheccorp.com PHONE: \_\_\_\_\_

**For State Use Only**

APPROVED BY: Maley Brown TITLE AO/I DATE 11/15/2018  
 Conditions of Approval (if any): \_\_\_\_\_