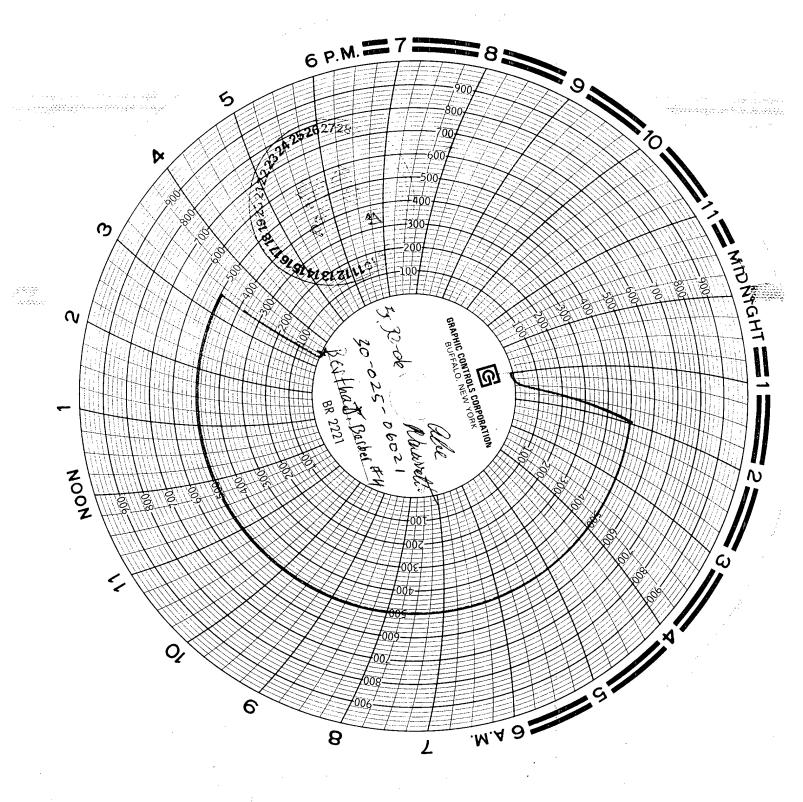
Office District I	State of New Mexico Energy, Minerals and Natural Resource	Form C-103 es May 27, 2004
1625 N. French Dr., Hobbs, NM 88240		WELL API NO. 30-025-06021
District II 1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE X 6. State Oil & Gas Lease No.
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	N/A
(DO NOT USE THIS FORM FOR PROP	TICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A LICATION FOR PERMIT" (FORM C-101) FOR SUCH	
1. Type of Well: Oil Well X	Gas Well Other	8. Well Number 4
2. Name of Operator Apache Co.		9. OGRID Number 00873
3. Address of Operator 6120 S Tulsa, C	Yale Ave, Suite 1500 DK 74136-4224	10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres
4. Well Location		
Unit Letter_D	: 330feet from the North line an	nd 990 feet from the West line
Section 8	Township 20S Range 37E	NMPM CountyLea
Control Charles Control	11. Elevation (Show whether DR, RKB, RT, GB 3,566' GR	R, etc.)
Pit or Below-grade Tank Application	or Closure	process and a recognition of the control of the con
Pit typeDepth to Ground	waterDistance from nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness: m	il Below-Grade Tank: Volumebb	ls; Construction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF I PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	PLUG AND ABANDON ☐ REMEDIAL CHANGE PLANS ☐ COMMENC	SUBSEQUENT REPORT OF: WORK
. 011 0, 12.12 0, 10 10	5/10/140/0E	
	_	
of starting any proposed v	OTHER:TA ripleted operations. (Clearly state all pertinent deta work). SEE RULE 1103. For Multiple Completion	ils, and give pertinent dates, including estimated date as: Attach wellbore diagram of proposed completion
13. Describe proposed or com	pleted operations. (Clearly state all pertinent deta	ils, and give pertinent dates, including estimated date
13. Describe proposed or com of starting any proposed v or recompletion.	apleted operations. (Clearly state all pertinent deta work). SEE RULE 1103. For Multiple Completion	ils, and give pertinent dates, including estimated date
13. Describe proposed or composed of starting any proposed or completion.Request to extend TA status.Test Date 5/30/2006 by Lobo TrueMIT chart attached.	apleted operations. (Clearly state all pertinent deta work). SEE RULE 1103. For Multiple Completion	ils, and give pertinent dates, including estimated date his: Attach wellbore diagram of proposed completion
13. Describe proposed or comof starting any proposed wor recompletion. Request to extend TA status. Test Date 5/30/2006 by Lobo True MIT chart attached.	pleted operations. (Clearly state all pertinent detawork). SEE RULE 1103. For Multiple Completion cking. This Approval of Temporary bandonment Expires above is true and complete to the best of my known closed according to NMOCD guidelines, a general per MackayTITLE Engineering Tecture and complete to the complete to	ils, and give pertinent dates, including estimated date as: Attach wellbore diagram of proposed completion Attach wellbore diagram of proposed completion Wedge and belief. I further certify that any pit or belowmit or an (attached) alternative OCD-approved plan h DATE 06/01/2006
13. Describe proposed or comof starting any proposed wor recompletion. Request to extend TA status. Test Date 5/30/2006 by Lobo True MIT chart attached. Thereby certify that the information grade tank has been/will be constructed of SIGNATURE Type or print name Sophie Mackage.	pleted operations. (Clearly state all pertinent detawork). SEE RULE 1103. For Multiple Completion cking. This Approval of Temporary bandonment Expires above is true and complete to the best of my known closed according to NMOCD guidelines, a general per MackayTITLE Engineering Tecture and complete to the complete to	wledge and belief. I further certify that any pit or belowmit \square or an (attached) alternative OCD-approved plan \square .



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