Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103	
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources			WELL API NO. 20 025 107(1)	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5 Indicate Type	30-025-10761
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			5. Indicate Type of Lease STATE X FEE	
District IV	Santa Fe, NM 87505			6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505				BO-0158-0019	TT 11 A
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.)				7. Lease Name or Unit Agreement Name New Mexico BZ State NCT-8	
1. Type of Well: Oil Well Gas Well Other Water Injector				8. Well Number 003	
2. Name of Operator Apache Corporation				9. OGRID Number 00873	
3. Address of Operator 6120 S Yale Ave. Suite 1500				10. Pool name or Wildcat	
Tulsa, OK 74136-4224				Langlie Mattix; 7 Rvrs-Q-Grayburg	
4. Well Location Unit Letter J: 1980 feet from the South line and 1980 feet from the East line					
Section 16 Township 23S Range 37E NMPM CountyLea					
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3304' GR					
Pit or Below-grade Tank Application			atay wall Dia	tanaa fuam naarast ay	rface water
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material					
					r Data
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					
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRI				P AND A
PULL OR ALTER CASING	NG ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐				
OTHER:			OTHER:Casing In	ntegrity Test - Wate	er Injector Well
13. Describe proposed or comp of starting any proposed w or recompletion.					tes, including estimated date tram of proposed completion
 Tagged fill @ 3480'. Cleaned or Notified Sylvia Dickey OCD1-F Ran MIT 5/16/2007 and passed. 	CO1 of casing integri				
MIT chart attached.					
				18	
				15	
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				14.	ja T
				•	420
I hereby certify that the information grade tank has been/will be constructed or					
SIGNATURE Sophie	Mackay	TITLE_Eng	ineering Tech		DATE 05/23/2007
Type or print name Sophie Mackay For State Use Only	, J.	E-mail add	dress:sophie.mack	ay@apachecorp.cd STAFF MAMAGET	delephone No. (918)491-4864
of .1.	111-1	CAP MINISTER REPORT			MAI 2 3 2001
APPROVED BY: \(\sum_{\text{fury}} \text{U}\) Conditions of Approval (if any):	nump	TITLE			DATE

