Submit 3 Copies To Appropriate District Office State of New Mexico		orm C-103	
District I French Dr., Hobbs, NM 88240	sources WELL API NO. 30-025-38	May 27, 2004	
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1220 South St. Francis D	SION 5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505	r. STATE FEE 6. State Oil & Gas Lease No.	<u>A</u>	
1220 S. St. Francis Dr., Santa Fe, NM 87505	N/A		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACD DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCIPROPOSALS.)	Payday 2		
1. Type of Well: Oil Well X Gas Well Other	8. Well Number #003		
2. Name of Operator Apache Corporation	9. OGRID Number 00873	00873	
3. Address of Operator 6120 S Yale Ave, Suite 1500 Tulsa, OK 74136-4224	10. Pool name or Wildcat Blinebry Oil & Gas / Warren	10. Pool name or Wildcat Blinebry Oil & Gas / Warren; Tubb, East	
4. Well Location			
Unit Letter L: 1650 feet from the South line and 330 feet from the West line			
Section 24 Township 20S Range 3			
3,570' GR	KI, OK, etc.)		
Pit or Below-grade Tank Application or Closure			
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK D PLUG AND ABANDON D REM		CASING	
	MENCE DRILLING OPNS. P AND A		
PULL OR ALTER CASING MULTIPLE COMPL CASI	NG/CEMENT JOB		
	ER:Re-Completion Procedure	[X]	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion			
or recompletion.			
08/23-09/11/07 PUMP TEST BLINEBRY			
09/12/07 RETRIEVE RBP @ 6475' AND POH			
09/12/07 START PRODUCING BLINEBRY/TUBB			
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.			
SIGNATURE Sophic Mackay TITLE Engineeri	ng Tech DATE 10/1	5/2007	
Type or print name Sophie Mackay E-mail address: sophie.mackay@apachecorp.cdialephone No. (918)491-4864			
For State Use Only OCFEED REPRESENTATIVE INSTAFF MANAGET [JAN 1 0 2038]			
APPROVED BY: Lay W. What TITLE DATE			
APPROVED BY: Lay W. W. TITLE DATE Conditions of Approval (if any)			