

Submit 3 Copies 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

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

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 )		WELL API NO. 30-025-38508
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Apache Corporation		6. State Oil & Gas Lease No. BO-9745
3. Address of Operator 6120 S Yale Ave, Suite 1500 Tulsa, OK 74136-4224		7. Lease Name or Unit Agreement Name Northeast Drinkard Unit
4. Well Location Unit Letter <u>F</u> : 3465 feet from the <u>South</u> line and <u>1775</u> feet from the <u>West</u> line Section <u>2</u> Township <u>21S</u> Range <u>37E</u> NMPM County <u>Lea</u>		8. Well Number 247
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,485' GR		9. OGRID Number 00873
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
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 _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: Completion Procedure ☒

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.

10/24/07 PERF DRINKARD @ 6702-06, 6718-22, 6738-42, 6776-80, 6794-6800 2 JSPF  
10/25/07 ACID DRINKARD W/ 3000 GALS 15% HCl  
10/29/07 FRAC DRINKARD W/ 39K GALS SS-3500 AND 62K LBS 20/40 SLC  
10/30/07 PERF TUBB @ 6364-68, 6384-88, 6416-20, 6458-64 2 JSPF  
10/30/07 SET RBP @ 6495'  
10/31/07 ACID TUBB W/ 3000 GALS 15% HCl  
11/01/07 FRAC TUBB W/ 36K GALS PAD AND 82K LBS 20/40 SLC  
11/01/07 RETRIEVE RBP @ 6495' AND POOH  
11/02/07 PERF BLINEBRY @ 5762-66, 5783-89, 5843-47, 5867-71, 5920-26, 5964-68, 6054-60 2 JSPF  
11/02/07 SET RBP @ 6108'  
11/05/07 ACID BLINEBRY W/ 3000 GALS 15% HCl  
11/06/07 FRAC BLINEBRY W/ 36K GALS PAD AND 82K LBS 20/40 SAND  
11/06/07 RETRIEVE RBP @ 6108' AND POOH  
11/07/07 PU PUMP AND RIH W/ RODS  
11/08/07 SET 640 PUMPING UNIT / PUT ON PRODUCTION BLINEBRY-TUBB-DRINKARD  
12/05/07 CHANGE ROD PUMP OUT FOR ESP

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 Sophie Mackay

TITLE Engineering Tech

DATE 12/17/2007

Type or print name Sophie Mackay

E-mail address: sophie.mackay@apachecorp.com Telephone No. (918)491-4864

For State Use Only

APPROVED BY: Chris Williams

OC DISTRICT SUPERVISOR/GENERAL MANAGER  
TITLE \_\_\_\_\_

DATE JAN 15 2008

Conditions of Approval (if any):