

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

|   |
|---|
| WELL API NO.<br>30-025-05812  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |

|  |  |   |
|--|--|---|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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<br>North Monument G/SA Unit Blk 17 |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>   |  | 8. Well Number 16   |
| 2. Name of Operator<br>Apache Corporation  |  | 9. OGRID Number<br>00873  |
| 3. Address of Operator<br>6120 South Yale, Suite 1500, Tulsa, OK 74136-4224  |  | 10. Pool name or Wildcat<br>Eunice Monument G/SA                        |
| 4. Well Location<br>Unit Letter P : 330 feet from the South line and 840 feet from the East line<br>Section 33 Township 19S Range 37-E NMPM County Lea   |  |   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)   |  |   |
| Pit or Below-grade Tank Application <input checked="" type="checkbox"/> or Closure <input type="checkbox"/>  |  |   |
| Pit type STEEL Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water   |  |   |
| Pit Liner Thickness: STEEL mil Below-Grade Tank: Volume 180 bbls; Construction Material STEEL  |  |   |

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

|  |  |  |  |
|--|--|--|--|
| NOTICE OF INTENTION TO:                        |  | SUBSEQUENT REPORT OF:                            |  |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input checked="" type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>                | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>              | CASING/CEMENT JOB <input type="checkbox"/>       |  |
| OTHER: <input type="checkbox"/>                |  | 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

SEE ATTACHED CURRENT WELLBORE DIAGRAM

8 5/8" surface csg set @ 302', circulated with 200 sx; 5 1/2" 15.5# production csg set @ 3,811' with 200 sx, TOC 2,660' (calc)  
Grayburg perforations 3,684 - 3,796' TA'd w/ CIBP set @ 3,653' (October 2002), passed MIT to 670 psi October 2002

1. Tag CIBP, circulate plugging mud, and pump 25 sx C cmt @ 3,653'
2. Perforate & squeeze 40 sx C cmt 2,500 - 2,400' WOC & TAG (base of salt @ 2,400')
3. Perforate & squeeze 40 sx C cmt 1,395 - 1,295' WOC & TAG (top of salt @ 1,395')
4. Perforate & squeeze 50 sx C cmt 352 - 252' WOC & TAG (surface casing shoe)
5. 25 sx C cmt 60' to surface
6. Cut off wellhead & anchors, install dry hole marker, backfill cellar.

THE OIL CONSERVATION DIVISION MUST  
BE NOTIFIED 24 HOURS PRIOR TO THE  
BEGINNING OF PLUGGING OPERATIONS

RECEIVED

MAY 12 2008

HOBBS OCD

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  TITLE James F. Newman, P.E. (Triple N Services) DATE 05/08/08

Type or print name James F Newman E-mail address: jim@triplenservices.com Telephone No. 432-687-1994

For State Use Only

APPROVED BY:  OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE MAY 21 2008  
Conditions of Approval (if any):

[illegible]