

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Lordsburg, NM 87040  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

RECEIVED  
OCT 17 2008  
HOBBS

State of New Mexico  
Energy, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
May 27, 2004

WELL API NO. 30-025-06714
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: MARY E. WANTZ
8. Well Number 2
9. OGRID Number 000873
10. Pool name or Wildcat DRINKARD

Pit or Below-grade Tank Application ☒ or Closure ☐  
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 \_\_\_\_\_

**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.)

1. Type of Well:  
Oil Well ☒ Gas Well ☐ Other ☒

2. Name of Operator  
APACHE CORPORATION

3. Address of Operator  
6120 S. Yale Avenue, Suite 1500, Tulsa Oklahoma 74136-4224

4. Well Location  
Unit Letter O : 810' feet from the SOUTH line and 2,130' feet from the EAST line  
Section 21 Township 21-S Range 37-E NMPM LEA County NM

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
OTHER: <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

Approved for plugging of well bore only.  
Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms: [www.emnrd.state.nm.us/wcd](http://www.emnrd.state.nm.us/wcd).

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.

9-26-08 M.I.R.U. Well was circulated w/150 bbl. of mud.

9-29-08 Spot 25 sx. @5,891' - 5,638'. Spot 25 sx. @3,812' - 3,559'. Perf. @2,780'. Could not pump into perf. Spot 50 sx. @2,845'. W.O.C & tag @2,410'.

9-30-08 Perf. @1,350'. Sqz. 65 sx. W.O.C. & tag @1,256'. Perf. @217'. Sqz. 130 sx. to surface.

R.D. M.O. Cutoff w/ H & anchors. Installed dry hole marker.  
P & A DATE: 9-30-08

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 NMOC guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Randall Minear TITLE P & A SUPV. DATE 10-12-08  
E-mail address:

Type or print name RANDALL MINEAR

Telephone No.

For State Use Only

OCD FIELD REPRESENTATIVE II/STAFF MANAGER

APPROVED BY Cathy M. Hill TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval, if any:

OCT 21 2008