Submit 3 Copies To Appropriate District State of New Mexico	Form C-103 June 19, 2008
District I 1625 N. French, Dietards, N. Stand Control of Control o	WELL API NO. 30-025-38810
1301 W. Grand Ave., Agesia, NM \$220000 OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505	STATE     FEE     X       6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr. Santa Febrer 87505	NA
(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 SUCI	<ul> <li>7. Lease Name or Unit Agreement Name</li> <li>BM Marcus</li> </ul>
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other	8. Well Number 005
2. Name of Operator Apache Corporation	9. OGRID Number 00873
3. Address of Operator 6120 S Yale Ave, Suite 1500 Tulsa, OK 74136-4224	10. Pool name or Wildcat Blinebry O&G, Warren; Tubb
4. Well Location	
Unit Letter B: 330feet from the Northline and 165Section 20Township 20SRange 38E	0 feet from the East line NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3554' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:       SUBS         PERFORM REMEDIAL WORK       PLUG AND ABANDON       REMEDIAL WORK         TEMPORARILY ABANDON       CHANGE PLANS       COMMENCE DRI         PULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT         DOWNHOLE COMMINGLE	LLING OPNS. P AND A
OTHER: Request DHC: Blinebry/Tubb       Image: Complete and the state and	
Pursuant to Division Order R-11363 Pool Names: Blinebry Oil & Gas (Oil) 6660 Warren; Tubb (Gas) <0:1) 78080 63180 6484 -	le 269 6690
The allocation method will be as follows: Test 83 BO X 146 MCF X 100 BW	
Blinebry37 BO45%120 MCF82%17 BW52%Tubb46 BO55%26 MCF18%16 BW48%TOTAL83 BO100%146 MCF100%33 BW100%	
Downhole commingling will not reduce the value of these pools.	DHC Order No: <u>HOB - 0279</u>
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
Thereby certify that the mormation above is the and complete to the best of my knowledge and benef.	
SIGNATURE <u>Lackay</u> TITLE <u>Engineering Tech</u> DATE <u>11/06/2008</u>	
Type or print name_Sophie Mackay       0       E-mail address: sophie.mackay@apachecorp.comPHONE: (918)491-4864         For State Use Only       NOV 1 4 0000	
APPROVED BY:	