Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I RECE	WETEN, Minerals and Natural Resources	June 19, 2008
1025 N. French Dr., Hoods, NW 88240		WELL API NO. 30-025-06997
1301 W. Grand Ave , Artesia, NMANNOZ 3	2009IL CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NAOBBS	1220 South St. Francis Dr.	STATE FEE X
<u>District IV</u>	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S St. Francis Dr., Santa Fe, NM 87505	•	NA
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSAL	S AND REPORTS ON WELLS .S TO DRILL OR TO DEEPEN OR PLUG BACK TO A TION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Owen B
	s Well X Other	8. Well Number 002
2. Name of Operator Apache Corporation (873)		9. OGRID Number 00873
3. Address of Operator 6120 S Yale Tulsa, OK 74	Ave, Suite 1500 1136-4224	10. Pool name or Wildcat Tubb O&G (Gas), Drinkard
4. Well Location		Tuoo occo (ous), Diminara
Unit Letter L : 19	80 feet from the South line and 42	20 feet from the West line
Section 34	Township 21S Range 37E	NMPM County Lea
	1. 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:		
	PLUG AND ABANDON REMEDIAL WO	BSEQUENT REPORT OF: RK □ ALTERING CASING □
		RILLING OPNS PAND A
PULL OR ALTER CASING []	MULTIPLE COMPL CASING/CEMEI	
DOWNHOLE COMMINGLE		
OTHER:	□ OTHER:	П
	ed operations. (Clearly state all pertinent details, a	nd 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.		
Apache proposes to:		
1. Isolate and squeeze casing leak.		
2. Acidize existing Tubb and Drinkard intervals.		
3 Return well to production		
Spud Date:	Rig Release Date:	
I hereby certify that the information abo	ove is true and complete to the best of my knowled	go and hallof
Thereby certify that the information and	ive is true and complete to the best of my knowled	ge and bener.
SIGNATURE Sophie Ma	kay TITLE Engineering Tech	DATE <u>03/10/2009</u>
Time on print name Scalais Marker		
Type or print name Sophie Mackay E-mail address: sophie.mackay@apachecorp.comPHONE: (918)491-4864 For State Use Only		
1.011	// M TITLE DISTRICT 1 SUPE	BUISOE MAY 1 7 2000
APPROVED BY: Conditions of Approval (if any):	TITLE DISTRICT I SUFE	DATE WITH 13 2009
11 (1) 27		