

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  
June 19, 2008

RECEIVED

CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, NM 87505

MAR 17 2010

HOBSOCD

WELL API NO. 30-025-05650
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B0-3657
7. Lease Name or Unit Agreement Name North Monument Grayburg/San Andres Unit
8. Well Number 511 11 ✓
9. OGRID Number 873
10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3711'

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: Injection Well

2. Name of Operator  
Apache Corporation

3. Address of Operator  
6120 S Yale Ave, Suite 1500 Tulsa, OK 74136

4. Well Location  
Unit Letter K : 1980 feet from the South line and 1980 feet from the West line  
Section 19 Township 19S Range 37E NMPM County Lea

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 ☐  
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

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

OTHER: ☐

OTHER: Converted to Injection ☒

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.

In accordance with provisions of Division Order R-9596 (Administrative Order WFX-844), this well was converted to injection via the following procedure:

3/4/10 POOH w/prod equip. TIH w/RBP @ 3770'. Test casing to 500#. Good test. Release RBP. TIH w/new tubing @ 3782' and pkr @ 3775'. Circ pkr fluid  
3/8/10 Tested to 500#. Well lost 25# in 30 minutes. Good test. Good MIT charted for state. Clean location. Lay and hook up injection line. Start injecting.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Amber Cooke

TITLE Engineering Tech

DATE 03/16/2010

Type or print name Amber Cooke

E-mail address: amber.cooke@apachecorp.com

PHONE: 918.491.4968

For State Use Only

APPROVED BY:

[Signature]

TITLE

STATE MGR

DATE

3-22-10

Conditions of Approval (if any):

