Submit 3 Copies To Appropriate District	m			Form C-103 October 25, 2005
Office	State of New Mexico Energy, Minerals and Natural Resources		WELL API NO.	
			30-025-05668	
1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Ave., Artesia, NM 88240 CENTROL CONSERVATION DIVISION			5. Indicate Type of Leas	se
			STATE 🗹	FEE 🗆 /
1000 Rio Brazos Rd. Aztec, NM 87418EP 10 2010 1220 South St. Francis Dr. Santa Fe, NM 87505			6. State Oil & Gas Leas	se No.
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 87505 Santa Fe, NM 87505			B-1651-9	
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name	
100 NOT USE THIS FORM FOR PROPOSALS TO DRILL OR DEEPEN OR PLUG BACK TO			North Monument G/SA Unit Blk 6	
A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			8. Well Number	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			o. Well Number	
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator			9. OGRID Number	
Apache Corporation			87 10. Pool Name	73
3. Address of Operator 303 Veterans Airpark Lane, Ste. 3000, Midland, TX 70705			Eunice Mon	ument G/SA
4. Well Location			<u> </u>	J
Unit Letter D	660 feet from the Township 19S Rang	N line and e 37E	660 feet from the NMPM	W line / County Lea
Section 20	Township 19S Rang . Elevation (Show whether DR, F		I AIVIF IV	oounty
	3673'			
12. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEN ON WENTER TO THE TEN		MENCE DRILLING O		V
	JLTIPLE COMPL 🔲 CAS	ING/CEMENT JOB		
DOWNHOLE COMMINGLE				
OTHER: J Location is ready for OCD inspection after P&A				
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.				
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the				
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER / QUARTER LOCATION OR				
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. ALL INFORMATION HAS BEEN WELDED OR				
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.				
The location has been leveled as nearly as possible to the original ground contour and has been cleared of all junk, trash, flow lines and				
other production equipment. Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.				
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with				
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from the lease and well location.				
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have				
to be removed.) All other environmental concrens have been addressed as per OCD rules.				
All other environmental concrens have been addressed as per OCD rules. Pipelines and flow lines have been abandoned in accordance with 19.15.9.714.B(4)(b) NMAC. All fluids have been removed from				
non-retrieved flow lines and pipelines.				
When all work has been completed, return this form to the appropriate District office to schedule an inspection. If more than one				
inspection has to be made to a P&A loca	tion because it does not meet the cri	teria above, a penalty	may be assessed.	•
SIGNATURE Sum B	uleTITLE	Reclamation For	emanDATE	9/9/10
TYPE OR PRINT NAME Guinn	Burks E-MAIL <u>gu</u>	inn.burks@apache	ecorp.com_PHONE:	432-556-9143
For State Use Only	J.11	<u>بر</u> ا	CD	20/21/21
APPROVED BY:	Unitaku TITLE (supliance O	Hicer DATE	09 121 12010
Conditions of Approval (if any):		1		