1625 N. Fren ki Dr. Höbbs, Din 1 8240	State of New Mexico , Minerals and Natural Resources	Form C-103 June 19, 2008 WELL API NO.
1301 W. Grand And Discontinuous 210 OIL C	CONSERVATION DIVISION	30-025-04162 5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	220 South St. Francis Dr.	STATE FEE X
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
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.)		7. Lease Name or Unit Agreement Name North Monument G/SA Unit Blk 18
1. Type of Well: Soil Well Gas Well Other:		8. Well Number ₀₀₄
Name of Operator Apache Corporation		9. OGRID Number 873
3. Address of Operator	TV 70705	10. Pool name or Wildcat
303 Veterans Airpark Lane, Suite 3000 Midland, TX 79705 4. Well Location		Eunice Monument G/SA
Unit Letter D : 660 feet from the North line and 660 feet from the West ✓ line		
	ownship 20S Range 36E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3614' DF		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		
TEMPORARILY ABANDON CHANGE F		RILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE DOWNHOLE COMMINGLE	COMPL CASING/CEMEN	NT JOB
-		n de la companya de La companya de la co
OTHER: TA Status Renewal 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.		
Apache respectfully requests TA Status Renewal for this well. Sylvia Dickey witnessed the MIT and chart is attached.		
This Approval of To		
This Approval of Temporary		
Library Lypnes Long Control Lypnes Lyp		
	,	
Sund Data.		
Spud Date: 02/19/1936	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 information above is true a	and complete to the best of my knowledg	ge and belief.
SIGNATURE ROSC Heland	TITLE Sr. Engr Tech	DATE <u>03/07/2011</u>
Type or print name Reesa Holland For State Use Only	E-mail address: Reesa.Holland@apa	pHONE: 432/818-1062
APPROVED BY: TITLE STATE DATE 3-8-2011		
Conditions of Approval (if any):		

