Submit 1 Copy To Appropriate District State	of New Mexico	Form C-103
Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 District II	als and Natural Resources	October 13, 2009 WELL API NO.
		30-025-05798
1301 W. Grand Ave., Artesia, NM 882 MAY 0 2 2 4 1 CONSE <u>District III</u> 1220 So	KVATION DIVISION	5. Indicate Type of Lease
1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 District IV		STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	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		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		North Monument G/SA Unit Blk. 17
1. Type of Well: Oil Well 🗹 Gas Well 🗌 Other		8. Well Number 13
2. Name of Operator		9. OGRID Number
Apache Corp. 3. Address of Operator	· · · · ·	873 /
PO box Drawer D Monument NM 88265		10. Pool name or Wildcat Eunice Monument G/SA
4. Well Location		
	from the South	line and 660 feet from the
West line		
Section 33 Townsh	ip 19S Range 37	E NMPM Lea County
	whether DR, RKB, RT, GR, etc	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
	indicate trature of fronce,	Report of Other Data
NOTICE OF INTENTION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
		I JOB
OTHER: Extend TA'd status	OTHER:	
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
Will move in Gandy's truck and pressure the casing to 520 psi for 32 minutes.		
Condition of A		
Condition of Approval: Notify OCD Hobbs		
office 24 hours prior to running MIT Test & Chart		
Spud Date: Ri	g Release Date:	
I hereby certify that the information above is true and comp	lete to the best of my knowledg	e and belief
	nete to the best of my knowledg	
SIGNATURE TITLE_Instrument TechDATE5/2/2011		
Type or print nameJim Ellison E-mail address JD. Ellison@ apachecorp.com PHONE: 441-7734		
For State Use Only		
APPROVED BY THE STAFF MAR DATE 5-4-2011		
APPROVED BY	ILE STHE MEN	C DATE 5-4-2011
1 On altions of Approximation 2		a —

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