

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. BOX 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-22020	
5. Indicate Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE	
6. State Oil & Gas Lease No. B-9560	
7. Lease Name or Unit Agreement Name NEW MEXICO BG STATE	
8. Well No. 4	
9. Pool name or Wildcat SAUNDERS; PERMO UPPER PENN	

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

2. Name of Operator
APACHE CORPORATION

3. Address of Operator
2000 POST OAK BLVD., SUITE 100, HOUSTON, TX 77056-4400

4. Well Location
Unit Letter E : 1980' Feet From The NORTH
Section 14 Township 14S Range 33E
Line and 660' Feet From The WEST Line
NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4212' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
<input type="checkbox"/> Perform Remedial Work	<input type="checkbox"/> Remedial Work
<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Altering Casing
<input type="checkbox"/> Temporarily Abandon	<input type="checkbox"/> Commence Drilling Operations
<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandonment
<input type="checkbox"/> Pull or Alter Casing	<input type="checkbox"/> Casing Test and Cement Job
<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other-INTegrity Test ✓

12. 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.

6/8/98 Requested csg. pressure test. See attached. CIBP @ 9720'. Tested 500 in 30 min. Held ok.

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

SIGNATURE <u>Deborah K. Howard</u>	TITLE <u>ENGINEERING TECH</u>	DATE <u>7/24/98</u>
TYPE OR PRINT NAME <u>DEBORAH K. HOWARD</u>		TELEPHONE NO. <u>713/296/7152</u>
(This space for State Use)		
APPROVED BY <u>ORIGINAL SIGNED BY</u>	TITLE <u></u>	DATE <u>7/24/98</u>
CONDITIONS OF APPROVAL, IF ANY: <u></u>		

jc

