Submit 3 Copies	State of New Mexico	Form C-103
to Appropriate District Office	Energy, Minerals and Natural Resources Department	Revised 1-1-89
DISTRICT I	OIL CONSERVATION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 8		30-025-06436
DISTRICT II	Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease
P.O. Drawer DD, Artesia, NM		STATE FEE
DISTRICT III		State Oil & Gas Lease No.
000 Rio Brazos Rd., Azlec,		22503
	SUNDRY NOTICES AND REPORTS ON WELLS	
	S FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A FFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"	7. Lease Name or Unit Agreement Name
Uli		North and Driving III 1
. Type of Well:	(FORM C-101) FOR SUCH PROPOSALS.)	Northeast Drinkard Unit
OIL W	ELL GAS WELL OTHER INJECTION	
. Name of Operator		8. Well No.
Apache Corporati	ion	116
 Address of Operator 2000 Post Oak Bl 	vd., Ste. 100, Houston, Texas 77056-4400	9. Pool name or Wildcat Eunice N. Blinebry-Tubb-Drinkard
. Well Location	F	
Unit Let	040	Feet From The West Line
Section	2 Township 21S Range 37E NMPN (Show whether DF, RKB, RT, GR, etc.)	M Lea County
	//////////////////////////////////////	
1.	Check Appropriate Box to Indicate Nature of Notice, F	Report, or Other Data
		SUBSEQUENT REPORT OF:
Perform Remed	ial Work Plug and Abandon Remedial Work	Altering Casing
Temporarily Aba	andon Change Plans Commence Dri	lling Operations 🔲 Plug and Abandonment
Pull or Alter Cas		•
		d Cement Job
Other	✓ Other	Convert to Injection
11/12/98 11/13/98 11/16/98 11/17/98 11/18/98 11/19/98	MIRU. Pressure test casing to 700# - Held. PU & RIH w / bit & cement @ 5732'. DO 18' to CIBP @ 5750'. DO plug & clean of hole clean. POH. RU Wireline. Run GR/CCL from 6000' to 5500'. Perforate Bline 82-86, 90-96, 5935-39, 42-54 w / 4 JSPF & 90 deg phasing. Rito 5709'. RU Petroplex. Load & test backside & lines. Acidize w / 5500 graphs and the second secon	ebry intervals @ 5804-20, 66-74, D Wireline. RIH w / pkr & tubing gals 15% HCL. POH & LD WS.
<u> </u>		WFX-722
I hereby certify that the infi	formation above is true and complete to the best of my knowledge and belief.	
SIGNATURE	Engineering Technician	DATE 12/23/98
TYPE OR PRINT NAME	Debra J. Anderson	TELEPHONE NO. 713-296-6338
(This space for State Use		
APPROVED BY	TITLE	DATE
conditions of appro $25 N$	OVAL, IF ANY:	Q d

JC5N

