

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.	30-025-06356
5. Indicate Type of Lease	<input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE
6. State Oil & Gas Lease No.	22503
7. Lease Name or Unit Agreement Name	Northeast Drinkard Unit
8. Well No.	222
9. Pool name or Wildcat	Eunice N. Blinbry-Tubb-Drinkard
4. Well Location	
Unit Letter <u>Lot 9</u> : <u>3534</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u> Line	
Section <u>2</u> Township <u>21S</u> Range <u>37E</u> NMPM <u>Lea</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
<u>3500'</u> <u>GR</u>	

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 **INJECTION**

2. Name of Operator
Apache Corporation

3. Address of Operator
2000 Post Oak Blvd., Ste. 100, Houston, Texas 77056-4400

4. Well Location
Unit Letter Lot 9 : 3534 Feet From The South Line and 990 Feet From The East Line
Section 2 Township 21S Range 37E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3500' 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 Convert to Injection

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.

10/30/98 MIRU. POH & LD rods & tubing.

11/2/98 RIH w / WS & Pkr. Set pkr @ 5669'. RU Petroplex. Load & test backside to 500#. Test lines to 5000#. Acidize w / 3500 gals 15% HCL. POH w / WS & LD

11/3/98 RIH w / pkr & 2-7/8" Fiber Lined Tubing

11/4/98 Set pkr @ 5651'. ND BOP. Flange up WH. MIT test backside to 500# - Held. (See Attached)

11/5/98 Hook up surface injection lines. Put on injection.

WEX-740

I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE <u>Debra J. Anderson</u>	TITLE <u>Engineering Technician</u> DATE <u>12/22/98</u>
TYPE OR PRINT NAME <u>Debra J. Anderson</u>	TELEPHONE NO. <u>713-296-6338</u>
(This space for State Use)	
APPROVED BY <u>CHRIS WILLIAMS</u>	TITLE <u>DISTRICT SUPERVISOR</u> DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:	

ICSN

dp

