

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

1625 N. French Dr., 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.

30-025-34592

5. Indicate Type of Lease

☐ STATE

☒ FEE

6. State Oil & Gas Lease No.

22880

7. Lease Name or Unit Agreement Name

Turner

8. Well No.

20

9. Pool name or Wildcat

Ellenberger, Branson

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., Ste. 100, Houston, Texas 77056-4400

4. Well Location

Unit Letter P : 330 Feet From The South Line and 730 Feet From The East Line
Section 22 Township 21S Range 37E NMPM Lea County

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

3400' GR

11.

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

NOTICE OF INTENTION TO:

☐ Perform Remedial Work

☐ Plug and Abandon

☐ Temporarily Abandon

☐ Change Plans

☐ Pull or Alter Casing

☐ Other

SUBSEQUENT REPORT OF:

☐ Remedial Work

☐ Altering Casing

☐ Commence Drilling Operations

☐ Plug and Abandonment

☐ Casing Test and Cement Job

☒ Other

Perforate Ellenberger & 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.

4/28/99 Perforate Ellenberger @ 7428' - 7518' - 4" - 182 Holes

4/29/99 Acidize perforations w / 4090 gals 15% HCL

4/30/99 Perforate Ellenberger @ 7362' - 7397' - 4" - 72 Holes. Acidize w / 1630 gals 15% HCL

5/4/99 RIH & set CIBP @ 7350'. Dump 35' cement on top of plug.

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

SIGNATURE

Debra J. Anderson

TITLE

Engineering Technician

DATE

6/14/99

TYPE OR PRINT NAME

Debra J. Anderson

TELEPHONE NO.

713-296-6338

(This space for State Use)

APPROVED BY

DISTRICT I SUPERVISOR

TITLE

DATE

JUN 20 1999

CONDITIONS OF APPROVAL, IF ANY:

No Production