Office Office	State o	i New Me	XICO	Form C-103
District I	Energy, Minerals and Natural Resources			May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II			30-015-33493	
	1301 W. Ofally Ave., Alesia, NW 80210			5. Indicate Type of Lease
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410			STATE STATE	
District IV Santa Fe, NM 87505			6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM				·
87505				
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Agreement Name
(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				PEACEKEEPER
PROPOSALS.)				
1. Type of Well: Oil Well Gas Well Other AMENDED-Location				8. Well Number 1
2. Name of Operator				9. OGRID Number
CHI OPERATING, INC		Di	CEIVED	004378
3. Address of Operator	<del></del>	1 18-	- Cartain Marian	10. Pool name or Wildcat
PO BOX 1799 MIDLAND, TX	70702	DF	C _ 5 2005	10. 1 001 hame of window
	17102			
4. Well Location CCD-AMTESIA				
Unit Letter A: 990 feet from the NORTH line and 660 feet from the EAST line				
Section 25 Tow	nship 19S Ran	ge 29E	NMPM EDI	DY County
	11. Elevation (Show	<del></del>		
	711 210 1411011 (2.10 //	334		
Pit or Below-grade Tank Application O	r Closure			
Pit type Depth to Groundw	<del></del>			tance from nearest surface water
Pit Liner Thickness: mil	Below-Grade Tank:	Volume	bbls; Co	enstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
12. Check rippropriate Box to inclease reason of respect of Other Batte				
NOTICE OF IN	TENTION TO:		SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDO	ON 🔲	REMEDIAL WOR	
TEMPORARILY ABANDON				<del></del>
PULL OR ALTER CASING	MULTIPLE COMPL	ō	CASING/CEMENT	<del></del>
TOLL ON NEILEN ON ON TO	moern ee oom e		O TONTO O LINEIT	
OTHER:		П	OTHER:	П
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
Notified OCD prior to spud 5/6/05 @ 16:00 hrs CDT. Drilled surface to 324', set 13 3/8", J-55, 68#. Cmtd @ 324' w/200 sks				
"H"+10% Gyp+6 pps Gils+2% CaCl2 +.25 pps CF, 250 sks "C"+4% gel+2% CaCl2+2 pps Gils, 100 sks "C"+2%				
CaCl2+.25 pps CF. Did not circ. Plg dwn 5/12/05 @ 07:30 hrs-CDT. Notified OCD. Ran temp survey. Cmt @ 100', used				
30 yds ready mix, cmt @ surface, informed OCD. NU wellhead, NUBOP, PUBHA, WOC 221/2 hrs before tstg. csg/annular				
to 1000#-½ hr-ok. @ 06:00 hrs - 5/13/05.				
		<del></del>		
I hereby certify that the information	ahove is true and comn	late to the he	et of my knowlodg	o and haliaf Temphanaute days to the
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .				
	1	D gordennes C	1, a generar permit 🗀	or an (attached) after nauve OCD-approved plan [].
SIGNATURE:	$\mathcal{L}$	TITLE:		DATE 11/30/05
				DATE THISOIDS
Type or print name: JOHN W. WOL	F E-mail	address:		Telephone No: 432-685-5001
For State Use Only				-
	_, *			DEC 0 6 2005
APPROVED BY: FOR	RECORDS ONL'	TITLE		DATE
Conditions of Approval (if any):	<u> </u>			Dill
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