

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOCD
Artesia**SUNDRY NOTICES AND REPORTS ON WELLS**
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

SUBMIT IN TRIPLICATE - Other instructions on page 2		5. Lease Serial No. NMNM0560353
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator CHI OPERATING INCORPORATED		7. If Unit or CA/Agreement, Name and/or No. NMNM126412X
Contact: PAM CORBETT E-Mail: pamc@chienergyinc.com		8. Well Name and No. BENSON DELAWARE FEDERAL UNIT 23
3a. Address MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-685-5001 Fx: 432-687-2662	9. API Well No. 30-015-42566-00-X1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T19S R30E NENE 990FNL 150FEL		10. Field and Pool or Exploratory Area BENSON-DELAWARE
		11. County or Parish, State EDDY COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Well Spud
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

10/2/14 Spud well; drilling
10/3/14 run 13 3/8 54.5# J-55 csg @ 493' with 425 sxs Class C cem. WOC 18 hrs, circ. to surf.
10/4/2014 NU BOP, test; Drilling
10/5-10/8/14 TIH, pmp 225 sxs bttm 826-406', WOC, TIH tag cmt @ 681'
pmp 2nd cmt plug with 149 sxs @ 658', TOH, WOC, TIH tag cmt @ 537'
pmp 3rd cem plug 76 sxs @ 532', TOH WOC, TIH tag cmt @ 532', pmp cem plug 120 sxs, WOC, TIH tag cmt @ 459', WOC drlg cmt 459-794.
10/9/14 run 8 5/8" 32# J-55 csg @ 2064' w/992 sxs Class C cem, circ to surf. ND and set slips, WOC, cut of csg and install B section test, WOC 18 hrs.
10/11-10/14/14 begin directional drill.

NM OIL CONSERVATION
ARTESIA DISTRICT

DEC 27 2016

14. I hereby certify that the foregoing is true and correct. Electronic Submission #360462 verified by the BLM Well Information System For CHI OPERATING INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 12/12/2016 (17JAS0045SE)		RECEIVED ACCEPTED FOR RECORD DEC 16 2016 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
Name (Printed/Typed) CLIF MANN	Title FIELD SUPERVISOR	
Signature (Electronic Submission)	Date 12/08/2016	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved By _____		Title _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.		

(Instructions on page 2)

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **