

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**NMOCD**  
**Artesia**

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.*

5. Lease Serial No.  
NMNM0560353

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
NMNM126412X

8. Well Name and No.  
BENSON DELAWARE FEDERAL UNIT 24

9. API Well No.  
30-015-42567-00-X1

10. Field and Pool or Exploratory Area  
BENSON-DELAWARE

11. County or Parish, State  
EDDY COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator Contact: PAM CORBETT  
CHI OPERATING INCORPORATED E-Mail: pamc@chienergyinc.com

3a. Address  
MIDLAND, TX 79702

3b. Phone No. (include area code)  
Ph: 432-685-5001  
Fx: 432-687-2662

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 11 T19S R30E NENE 1040FNL 125FEL

**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 Well Spud
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 recomple 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 recomple 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.

9/15/14 Spud well  
9/16/14 ran 13 3/8" 48# ST&C csg @ 484' with 450 sxs Class C cem. WOC 18 hrs, circ. to surf.  
9/17/14 NU BOP, test; Drilling \*contacted BLM at 8:00 am to witness test, no witness came. TIH tag cem @ 435', drill cmt & plug F/435-484'; Drilling  
9/19/14 set plug @ 800', WOC  
9/20/14 Tag cmt @ 585', pmp cmt plug 585' bttm top 440', WOC  
9/21/14 TIH tag cmt @ 524', drill cmt f/524'-800'; drilling  
9/22/14 run 8 5/8" csg w/1070 sxs Class C cem  
9/23/14 NU BOP, test, WOC, TIH tag cmt @ 1964', drill cmt, drill F/2057-2115  
9/24-9/28/14 Directional drill

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

DEC 27 2016

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #360555 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 (17JAS0043SE)**

Name (Printed/Typed) **CLIF MANN** Title **FIELD SUPERVISOR**

Signature (Electronic Submission) Date **12/09/2016**

RECEIVED

**ACCEPTED FOR RECORD**  
DEC 16 2016  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By \_\_\_\_\_ Title \_\_\_\_\_  
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 \*\***