Form 3160-5 (April 2004)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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FORM APPROVED OM B No 1004-0137 Expires: March 31, 2007

٠.	NM 0560353
6.	If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an

abandoned we	ell. Use Form 3160 - 3 (/	APD) for such p	oroposais.		
SUBMIT IN TRI	7. If Unit or	CA/Agreement, Name and/or No.			
1. Type of Well ☐ ☐ Gas Well ☐ ☐ Other			V - 9 2009	8. Well Nan	
2. Name of Operator CHI OPERATING, INC.				MUNC 9. API We	HKIN #13 ll No.
3a. Address	3b. Phone No (incl.	GD ARTESIA	30-015-36425		
P.O. BOX 1799, MIDLAND, T 4. Location of Well (Footage, Sec.,	432-685-5001		10. Field and Pool, or Exploratory Area BENSON BS/DELAWARE		
			11. County o	or Parish, State	
G-11-19S-30E 1550			EDDY	COUNTY, NM	
12. CHECK AI	PPROPRIATE BOX(ES) TO	INDICATE NAT	URE OF NOTICE, R	EPORT, OR	OTHER DATA
TYPE OF SUBMISSION		T	YPE OF ACTION		
	Acidize	Deepen	Production (Sta	art/Resume)	Water Shut-Off
Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity  Other TEST
✓ Subsequent Report	Casing Repair Change Plans	New Constructio Plug and Abando		handon	DELAWARE SAND
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
determined that the site is ready 10/12/09: MIPU, ND WH, Dump 35' of cmt on top of PU 5 1/2 x 2 3/8 cst pkr, le @ 4732-4783, set pkr @ 4 well. RU Frac crew, test I	nal Abandonment Notices shall be y for final inspection.)  NU BOP. Released TAC, LD  f plug. Perf Delaware sand @  ff pkr hanging @ 4656'. TH 1  656'. Started on acid, staging 3  ines, P/202bbls pad @ 10 BM  2 10 BM w/8ppg Siber Super s	tbg. RU Schlumber 4732-42,4747-51,475 t/4811', RU acid cre 5 balls every 2bbl of & 1550psi; 52bbls (6	ger, PU 5 1/2 CIBP, set 54-62,4766-69,4777-83, w, loaded well w/115bb acid, w/750# sand & g ② 10 BM w/2ppg sand (	t @ 8550(BS p 2spf 62 shots. ols 2% spotted el, P/3 stages. @ 1250psi; 58	nerfs @ 8582-8625). RD Schlumberger, d 2bbls acoss perfs RD acid crew. Swab bbls @ 10 BM w/5ppg
			ACCEPT NO JS/ BUREAU O	)V 5 20	RECORD 009
14. Thereby certify that the foregoing is true and correct Name (Printed/Typed)				BAD FIELD O	FFICE
ROBIN ASKEV	1 itie	REGULATORY CLI	ERK 		
Signature SOM	Date		10/26/2009		
	THIS SPACE FOR	FEDERAL OR	STATE OFFICE	USE	
Approved by  Conditions of approval, if any, are attached. Approval of this notice does not warra certify that the applicant holds legal or equitable title to those rights in the subject lewhich would entitle the applicant to conduct operations thereon.			Title Office		Date
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudu	le 43 U.S.C. Section 1212, make it ilent statements or representations	a crime for any person as to any matter within	n knowingly and willfully nits jurisdiction.	to make to any	y department or agency of the United