Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		<i>p</i> 25 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WEŁL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-38186
District III	1220 South St. Fran	cis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87	1	STATE FEE 6. State Oil & Gas Lease No.
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM			o. State Office Gas Lease No.
87505	67	V 151772	
	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLU	CHCY TO A S	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLI	SALS TO DRILL OR TO DEEPEN OR PLU CATION FOR PERMIT" (FORM C-101) FO	G BACK TO A POR	Elkan
			8. Well Number 2Y
1. Type of Well: Oil Well		CEIVED	
2. Name of Operator	3 OCD	- ARTESIA	9. OGRID Number
CHI OPERATING, INC			004378 10. Pool name or Wildcat
3. Address of Operator PO BOX 1799 MIDLAND, TX	70702	12	10. Pool name or wildcat
	19102	27257	
4. Well Location			
Unit Letter H : 2088 feet from the NORTH line and 699 feet from the EAST line			
Section 11 Township 14S Range 34E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
Pit or Below-grade Tank Application or Closure			
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK			
TEMPORARILY ABANDON	CHANGE PLANS		
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 🛛
OTHER:	пΙ	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 11/30/06 in the AM. Drilled surface to 451', set 13 3/8", J-55, 61#. Cmtd @ 451' Lead w/300 sks "C"+4%			
Gel+2#SXLCM-1+2% CaCl2. T	ail w/100 sks "C"+2% CaCl2+.25	# SXCF. Circ 13	l sks t/pit, Bump plug, Float holding
Install "A" section & tst, all ok, l	NU BOP,tst t/1200#. WOC 25½ h	rs before tst csg t/	750#-30 min. (Notified NMOCD)
11	4		
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.			
The state of the s			
SIGNATURE: TITLE: REGULATORY CLERK DATE 1/02/07			
Type or print name: ROBIN ASKEW E-mail address: Telephone No: 432-685-5001			
For State Use Only			
APPROVED BY:	Z Sees - EITH D		DATE 1/12/07
Conditions of Approval (if any):			
or rapproved (it mit).	FOR RECOR	D ONLY	