

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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.
NMLC062376

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

8. Well Name and No.
FREEWAY FEDERAL COM 2H

9. API Well No.
30-015-42569-00-X1

10. Field and Pool, or Exploratory
~~UNDESIGNATED~~
Parkway; B.S

11. County or Parish and State
EDDY COUNTY, NM

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
CHI OPERATING INCORPORATED Contact: PAM CORBETT
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 30 T19S R30E Lot 1 330FNL 200FWL

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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	Change to Original APD
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	Variance

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 recomplete 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

FREEWAY FEDERAL COM 2H
API 30-015-42569

CHI Operating, Inc. is requesting the following change to the original APD:

revise the 2000 and 3000 psi steel line on the mud cross to the choke manifold for a 10,000 psi flex hose in its place.

Spec sheets attached with the hydrostatic pressure test per Chris Walls/BLM contact.

NM OIL CONSERVATION
ARTESIA DISTRICT
OCT 27 2014
RECEIVED

Accepted for record
NMOCD Tel 10-28-14
SEE ATTACHED FOR
CONDITIONS OF APPROVAL

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

Electronic Submission #272512 verified by the BLM Well Information System
For CHI OPERATING INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by CHRISTOPHER WALLS on 10/21/2014 (15CRW0013SE)

Name (Printed/Typed) SONNY MANN

Title FIELD SUPERVISOR

Signature (Electronic Submission)

Date 10/21/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

APPROVED

Approved By

Title

OCT 21 2014

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

/s/ Chris Walls

BUREAU OF LAND MANAGEMENT

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 official or agent of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



Midwest Hose & Specialty, Inc.

Internal Hydrostatic Test Graph

January 24, 2014

Customer: Odessa

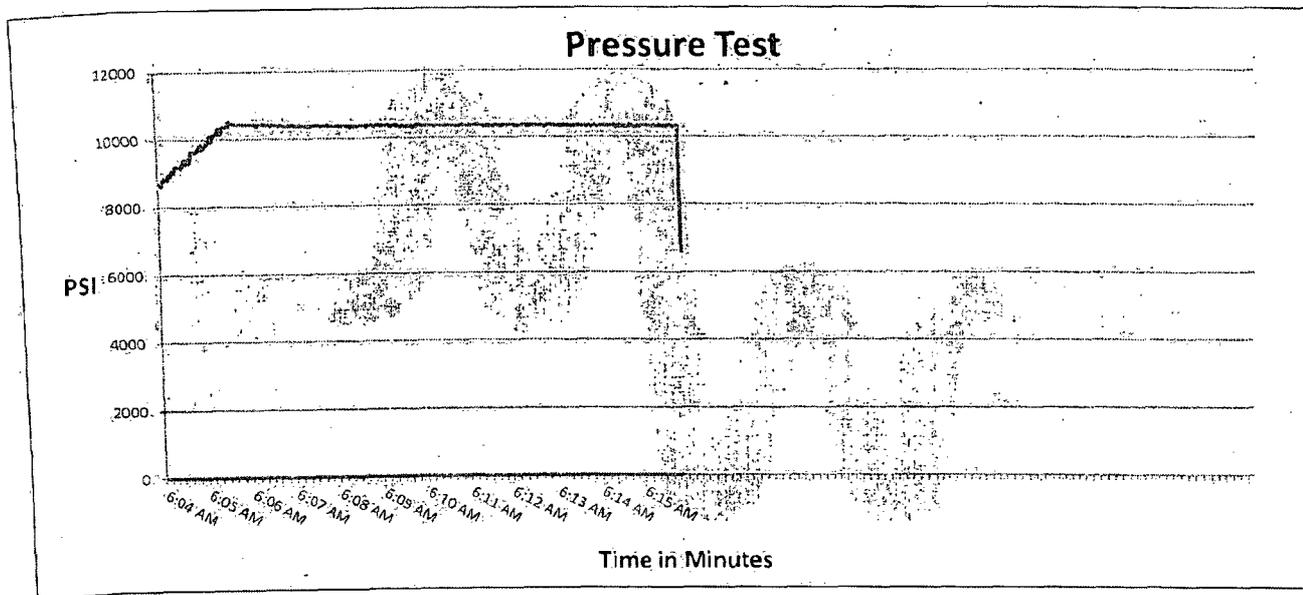
Pick Ticket #: 235383

Hose Specifications

Hose Type	Length
D	22'
I.D.	O.D.
3.5"	4.95"
Working Pressure	Burst Pressure
5000 PSI	Standard Safety Multiplier Applies

Verification

Type of Fitting	Coupling Method
4" 602	Swage
Die Size	Final O.D.
5.56"	5.54"
Hose Serial #	Hose Assembly Serial #
11094	235383-2



Test Pressure
10000 PSI

Time Held at Test Pressure
10 3/4 Minutes

Actual Burst Pressure

Peak Pressure
10590 PSI

Comments: Hose assembly pressure tested with water at ambient temperature.

Tested By: Ryan Malone

Approved By: Joe Proctor



Midwest Hose
& Specialty, Inc.

Internal Hydrostatic Test Certificate

General Information		Hose Specifications	
Customer	ODESSA	Hose Assembly Type	Rotary/Vibrator
MWH Sales Representative	TANYA SMITH	Certification	API 7K
Date Assembled	1/23/2014	Hose Grade	D
Location Assembled	OKC	Hose Working Pressure	5,000
Sales Order #	196543	Hose Lot # and Date Code	11094-09/13
Customer Purchase Order #	214288	Hose I.D. (Inches)	3.5"
Assembly Serial # (Pick Ticket #)	235383-2	Hose O.D. (Inches)	5.45"
Hose Assembly Length	22'	Armor (yes/no)	NO
Fittings			
End A		End B	
Stem (Part and Revision #)	R:3.5X64-602M	Stem (Part and Revision #)	R:3.5X64-602F
Stem (Heat #)	12114055927	Stem (Heat #)	13114050224
Ferrule (Part and Revision #)	RF.3.5	Ferrule (Part and Revision #)	RF.3.5
Ferrule (Heat #)	126151	Ferrule (Heat #)	126151
Connection (Part #)		Connection (Part #)	
Connection (Heat #)		Connection (Heat #)	
Dies Used	5.56"	Dies Used	5.53"
Hydrostatic Test Requirements			
Test Pressure (psi)	10,000	Hose assembly was tested with ambient water temperature.	
Test Pressure Hold Time (minutes)	10 3/4		
Date Tested	1/24/2014	Tested By	Approved By
		<i>[Signature]</i>	<i>[Signature]</i>



Midwest Hose
& Specialty, Inc.

Certificate of Conformity

Customer: **ODESSA**

Customer P.O.# **214288**

Sales Order # **196543**

Date Assembled: **1/23/2014**

Specifications

Hose Assembly Type: **Rotary/Vibrator**

Assembly Serial # **235383-2**

Hose Lot # and Date Code **11094-09/13**

Hose Working Pressure (psi) **5,000**

Test Pressure (psi) **10000**

We hereby certify that the above material supplied for the referenced purchase order to be true according to the requirements of the purchase order and current industry standards.

Supplier:

Midwest Hose & Specialty, Inc.

3312 S I-35 Service Rd

Oklahoma City, OK 73129

Comments:

Approved By

Date

Joe Punter

1/24/2014

Co-Flex line
Conditions of Approval

Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).