



# NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON  
Governor  
Betty Rivera  
Cabinet Secretary

Lori Wrotenbery  
Director  
Oil Conservation Division

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Vio open*

22 February 2002

Chi Operating Inc  
212 North Main  
Midland, Texas 79701

Form C-103 Report of Plugging for your Ralph Nix # 1 J-29-18-26 API 30-015-00256  
Cannot be approved until an NMOCD representative has made an inspection of the location and found it to be cleared to comply with OCD rules and regulations. Please check each item in the space provided to indicate that the work has been accomplished and the location is ready for final inspection. An inspection on 2-11-02 found trash and pipe coming up out of the ground in two places. **This is a Violation of Rule 202.B.3. This must be removed and this form returned on or before 3-15-02.**

- ☐ 1. All pits have been filled and leveled.
- ☐ 2. Rat hole and cellar have been filled and leveled.
- ☐ 3. A steel marker 4" in diameter and approximately 4' above mean ground level has been set in concrete to mark the exact location of the plugged well. (Marker must have operator name, lease name, well number and location including quarter/quarter section or unit letter, section, township, range and API well ID number permanently welded, stamped or otherwise engraved into the metal marker.)
- ☐ 4. The location has been leveled as nearly as possible to original top ground contour and has been cleared of all junk and equipment.
- ☐ 5. The dead men and tie downs have been cut and removed.
- ☐ 6. If a one well lease or last remaining well on lease, the battery and burn pit locations have been leveled and cleared of all junk & equipment.
- ☐ 7. All environmental concerns have been addressed as per OCD guidelines.

The above are minimum requirements and no plugging bond will be cancelled until all locations for plugged and abandoned wells have been inspected and Form C-103 approved.

When all of the work outlined above has been done, please notify this office by completing, signing and returning this letter to us so that our representative will not have to make more than one trip to the location.

I certify that the above work has been done and the above-mentioned lease is ready for OCD inspection and approval.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Van Barton  
Field Rep. II

\_\_\_\_\_  
Title

Well is P/A.

No Release.

P: A  
XPSH

2/11/02  
RT.

3" Header Pipe coming out of Ground by  
P/A marker

more Pipe coming out of Ground in Fenced  
Area, Needs more clean up.

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Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-015-00256
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 004378
7. Lease Name or Unit Agreement Name Ralph Nix
8. Well No. 1
9. Pool name or Wildcat Atoka (Penn)

1988 FEB  
RECEIVED  
OCD - ARTESIA

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator Chi Operating, Inc.
3. Address of Operator 212 North Main; Midland, TX 79701	4. Well Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line Section 29 Township 18S Range 26E NMPM Eddy County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) G.L. = 3416	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. 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.

01-27-98 - MIRU.

01-28-98 - Notified OCD. Unable to recover production packer. Pumped 30 sx C cmt on top of packer @ 8906', no tag. POOH w/ tbg.

01-29-98 - Set 7" CIBP @ 8453', tagged. Circulated mud and pumped 20 sx C cmt 8453-8332'. RIH w/ 7" CIBP and set @ 6300', tagged. Circulated hole w/ mud.

01-30-98 - Notified OCD. Continued circulating hole. Pumped 20 sx C cmt 6300-6180'.

02-02-98 - Contacted Ken Livingston w/ OCD. RIH w/ CBL tool, TOC @ 510'. Loaded hole w/ mud and pumped 25 sx 4030-3880'. Ppumped 25 sx C cmt 2393-2243'. Pumped 25 sx C cmt w/ CaCl<sub>2</sub> @ 1574'. WOC and tagged @ 1445'. Pumped 15 sx C cmt 40'-surface. RDMO.

02-06-98 - Cut off wellhead, capped well, installed dry hole marker.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TYPE OR PRINT NAME

TITLE

DATE

TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: