

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

dst
bp

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.	30-015-00282
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	C.R. Martin
8. Well No.	1
9. Pool name or Wildcat	Atoka Penn

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 ☐ GAS WELL ☒ OTHER

2. Name of Operator
Chi Operating, Inc.

3. Address of Operator
P.O. Box 1799 Midland, Texas 79702

4. Well Location
Unit Letter J : 1650 Feet From The South Line and 1980 Feet From The East Line
Section 15 Township 18S Range 26E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
GL- 3338'

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: Workover <input type="checkbox"/>	PLUG AND ABANDONMENT <input 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.

1-22-96 Breakout wellhead, RU wireline unit, run gagering & set 5-1/2" PKR.

1-24-96 Dump sand on pkr & load hole w/fresh water. Run 4-1/2" flush joint 11.60# . Cmt. WOCMT. DO Cmt and circ hole.

1-25-96 TIH w/ production tbgr.

RECEIVED

JAN 29 1996

OIL CON. DIV.

DIST. 2

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

SIGNATURE John W. Qualls TITLE Geologist DATE 01-22-96

TYPE OR PRINT NAME John W. Qualls 915 TELEPHONE NO. 685-5001

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE FEB 1 1996

CONDITIONS OF APPROVAL, IF ANY: