

Submit to Appropriate  
District Office  
State Lease - 6 copies  
Fee Lease - 5 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

RECEIVED

Form C-101  
Revised 1-1-89

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

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

API NO. (assigned by OCD on New Wells)  
**O. C. D. 30-06-27282**  
4. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☐

b. Type of Well:

OIL WELL ☐ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. Name of Operator

Chi Operating, Inc. ✓

3. Address of Operator

P. O. Box 1799, Midland, TX 79702

7. Lease Name or Unit Agreement Name

Savage

8. Well No.

1

9. Pool name or Wildcat

Old Millman Ranch Bone Spring

4. Well Location

Unit Letter 0 : 1880 Feet From The East Line and 660 Feet From The South Line

Section 8

Township 20-S

Range 28-E

NMPM

Eddy

County

10. Proposed Depth  
7450'

11. Formation  
Bone Spring

12. Rotary or C.T.  
Rotary

13. Elevations (Show whether DF, RT, GR, etc.)  
3271 GR

14. Kind & Status Plug. Bond  
\$50,000.00

15. Drilling Contractor  
McGee

16. Approx. Date Work will start  
ASAP

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
24"	20"	98#	350'		Surface
17 1/2"	13 3/8"	48#	6,000'		Surface
12 1/4"	8 5/8"	24# & 32#	2,950'		750' SURFACE
7 7/8"	5 1/2"	15.5# & 17#	7,450'		5,000'

Plan to drill and test the first sand and the second sand. BOP is a 10" 3000 psi  
Cameron Space Saver.

POST 10-1  
1-15-93  
NEWSC + API

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 7-15-93  
UNLESS DRILLING UNDERWAY

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE

*David H. Harrison*

TITLE President

DATE 1/14/93

TYPE OR PRINT NAME

David H. Harrison

TELEPHONE NO. (915) 685-50

(This space for State Use)

APPROVED BY

*Mark Kelly*

TITLE

*Geologist*

DATE

1-15-93

CONDITIONS OF APPROVAL, IF ANY:

\* AS NOTED ABOVE

NOTIFY N.M.O.C.D. IN SUFFICIENT  
TIME TO WITNESS CEMENTING THE  
30,172, 308 CASING

Submit to Appropriate  
District Office  
State Lease - 4 copies  
Fee Lease - 3 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised 1-1-89

RECEIVED

OIL CONSERVATION DIVISION

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

NOV 15 1993

O. C. D.  
ARTESIA

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

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

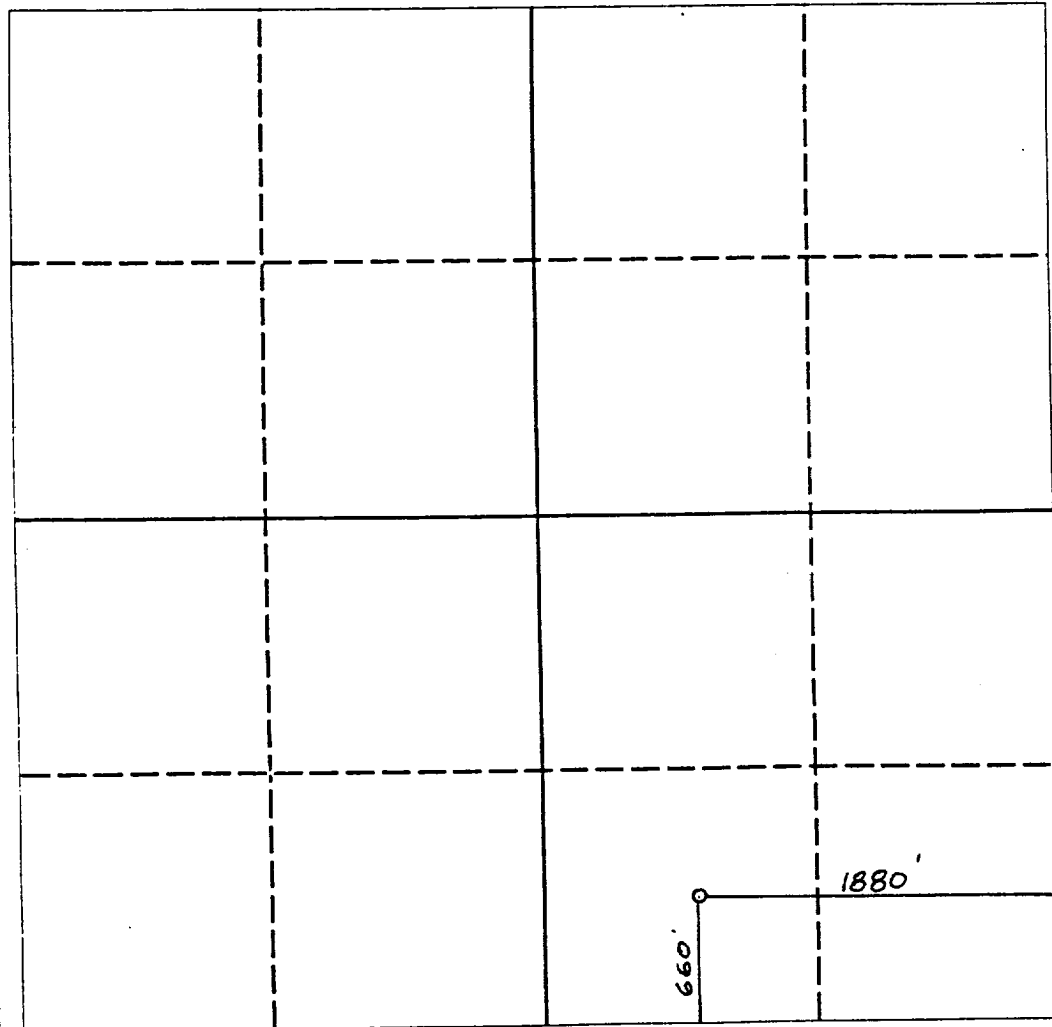
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator <b>CHI OPERATING, INC.</b>			Lease <b>SAVAGE</b>		Well No. <b>1</b>
Unit Letter <b>0</b>	Section <b>8</b>	Township <b>20 SOUTH</b>	Range <b>28 EAST</b>	NMPM	County <b>EDDY COUNTY, NM</b>
Actual Footage Location of Well: <b>1880</b> feet from the <b>EAST</b> line and <b>660</b> feet from the <b>SOUTH</b> line					
Ground level Elev. <b>3271.</b>	Producing Formation <b>Bone Springs</b>	Pool <b>Old Millman Ranch Bone Spring</b>		Dedicated Acreage: <b>40</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?  
☐ Yes ☐ No If answer is "yes" type of consolidation \_\_\_\_\_  
If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)  
No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature *David H. Harrison*  
Printed Name **David H. Harrison**  
Position **President**  
Company **Chi Operating, Inc.**  
Date **1/14/93**

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed **NOVEMBER 30 1992**  
Signature & Seal of Professional Surveyor  
*David H. Harrison*  
Certificate No. **5412**  
NEW MEXICO  
REGISTERED PROFESSIONAL ENGINEER  
NM P.E. 5412