

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

FORM APPROVED

OMB NO. 1004-0137

Expires: February 28, 1995

CISF

(See instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME, WELL NO. Remington Federal #3

9. API WELL NO. 30-015-27967

10. FIELD AND POOL OR WILDCAT Palmilla Draw Deblure

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA (N) Sec.3-20S-28E

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL [X] GAS WELL [] DRY [] Other []
b. TYPE OF COMPLETION: NEW WELL [] WORK OVER [] DEEP-EN [] PLUG BACK [] DIFF. RESVR. [X] Other []

2. NAME OF OPERATOR Chi Operating, Inc.
3. ADDRESS AND TELEPHONE NO. P.O. Box 1799 Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface N-660' FSL & 1980' FWL

At top prod, interval reported below
At total depth

14. PERMIT NO. DATE ISSUED
12. COUNTY OR PARISH Eddy
13. STATE New Mexico
15. DATE SPUDDED 7/6/94
16. DATE T.D. REACHED
17. DATE COMPL. (Ready to prod.) 4/28/02
18. ELEVATIONS(DF,RKB,RT,GE,ETC.)* 3274' GR
19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD, & TVD 6700'
21. PLUG BACK TD, MD&TVD 6655'
22. IF MULTIPLE COMPL., HOW MANY*
23. INTERVAL DRILLED BY
24. PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AN TVD)* Delaware 3570-3580' & 3890-3900'

25. WAS DIRECTIONAL SURVEY MADE
26. TYPE ELECTRIC AND OTHER LOGS RUN GR/CAL/CNL/LDT GR/CAL/DLL/MSFL
27. WAS WELL CORED

28. CASING RECORD (Report all strings set in well)

Table with 6 columns: CASING SIZE/GRADE, WEIGHT, LB./FT., DEPTH SET (MD), HOLE SIZE, TOP OF CEMENT, CEMENTING RECORD, AMOUNT PULLED

29. LINER RECORD and 30. TUBING RECORD tables with columns for SIZE, TOP (MD), BOTTOM (MD), SACKS CEMENT*, SCREEN(MD), etc.

31. PERFORATION RECORD (Interval, size and number) 3890-3900'-2SPF, 3570-3580'-2SPF
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. A/700 gals 7.5% HCL & 1500 gals gel wtr w/sd

33.* DATE FIRST PRODUCTION 4/28/02 PRODUCTION METHOD (Flowing, gas lift, pumping, size and type of pump) Pumping WELL STATUS (Producing or shut-in)

Table with 8 columns: DATE OF TEST, HOURS TESTED, CHOKER SIZE, PROD'N FOR TEST PERIOD, OIL - BBL., GAS - MCF, WATER - BBL., GAS-OIL RATIO

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold TEST WITNESSED BY C. MANN

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED [Signature] TITLE REGULATORY CLERK DATE 9/24/02

*(See Instructions and Spaces for Additional Data on Reverse Side)

