to Appropriate

State of New Mexico Form C-103 Submit 3 Copies perals and Natural Resources Department Energy, Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088. 03-015-26266 Santa Fe, New Mexico 87504 2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE XX STATE FEB 16'90 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PROPOSALS TO DRIVE OR TO DEEPEN 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PARTIES." (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: MERLAND WELL XX OTHER 8. Well No. 2. Name of Operator CHI OPERATING, INC. 9. Pool name or Wildcat 3. Address of Operator S. CARLSBAD DELEWARE P. O. BOX 1799, MIDLAND, TX 4. Well Location WEST 660 SOUTH 660 Feet From The Line Feet From The Line and 27 **EDDY** 22 19 Range Section Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3172' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING PLUG AND ABANDON REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDONMENT **CHANGE PLANS** COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON** CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER:... OTHER: 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. TD well @ 12:30 AM 02/13/90 - plug & abandonment on 02/13/90. Plugs set @: 46 sks Class C 2785' - 2665' 1) 31 sks Class C 2) 1501' - 1400' 825' - 725' 31 sks Class C 3) 28 sks Class C 614' - 514' 4) 10 sks Class C 5) Surface

| (This space for State Use) | | | | |
|-------------------------------|---|-----------------------|----------------------|----------|
| TYPE OR PRINT NAME | DAVID H. HARRISON | | 915 TELEPHONE NO. | 685-5001 |
| SIGNATURE | Oper. Manager | | DATE 02/15/90 | |
| I hereby certify that the int | ormation above is true and complete to the best of my | knowledge and belief. | | |

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY ----