

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMM
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-13232A
2. Name of Operator Chi Operating, Inc.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 1799 Midland, Texas 79702 (915) 685-5001	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FNL & 510' FEL, Sec. 9-T-20S-R-28E	8. Well Name and No. USA 9 Federal #2
	9. API Well No. 30015-28039
	10. Field and Pool, or Exploratory Area Old Millman Ranch Bone Spring
	11. County or Parish, State Eddy

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input checked="" type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Extension of permit to drill USA 9 Fed. #2. Work will start around 9-1-95.

APPROVED FOR 12 MONTH PERIOD
ENDING 7/8/94

RECEIVED
OIL CON. DIST.
DIST. 2

APPLICATION EXPIRED

14. I hereby certify that the foregoing is true and correct	
Signed <u>[Signature]</u>	Title Geologist
(This space for Federal or State office use)	Date 8-14-95
Approved by (ORIG. SGD.) JOE G. LARA	Title PETROLEUM ENGINEER
Conditions of approval, if any:	Date 11/3/95

Application Expires