

Submit 3 Copies To Appropriate District
Office

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

Revised March 25, 1999

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.
30-015-32582

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

RYAN

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

8. Well No.

#2

3. Address of Operator

P.O. Box 1799, MIDLAND, TX. 79702

9. Pool name or Wildcat

4. Well Location

Unit Letter A1 : 990 feet from the NORTH line and 990 feet from the EAST line

Section 5 Township 23S Range 27E NMPM County EDDY

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

3165 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Drld 7 7/8" hole to 12,100'. Ran E-logs. Ran 5 1/2" 17# Prod. Csg. Cmdt w/800sks Super "C" mod + 8% BA-10 + 65% FL-52 + 3% SMS. ND BOP. Released Rig 3/17/03.

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

SIGNATURE Robin Askeu TITLE REGULATORY CLERK DATE 3/17/03

Type or print name ROBIN ASKEW

Telephone No. 915-685-5001

(This space for State use)

APPROVED BY Accepted for record TITLE AS DATE MAR 19 2003

Conditions of approval, if any: