Do no					FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007 5. Lease Serial No. NM-0560353 6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE- Other instructions on reverse side. 1. Type of Well					7. If Unit or CA/Agreement, Name and/or No. NM0560353 NM126412X	
Gas Well□□					8. Well Name and No. BENSON DELAWARE UNIT #15	
2. Name of Operator CHI OPERATING, INC.					9. API Well No.	
3a Address 3b. Phor P.O. BOX 1799, MIDLAND TX 79702 432-61			No. (include area code) -5001		3001538298 10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					DN DELAWARE	
SEC.1-T19S-R30E 150' FSL 1550' FW	L, UNIT N		11. County or Parish, State EDDY		or Parish, State	
12. CI	IECK APPROPRIATE BOX(ES)	TO INDICATE NAT	URE OF NOTICE,	REPORT, OR	COTHER DATA	
TYPE OF SUBMISSION TYPE OF ACTION						
Final Abandonme	Image: Subsequent Report Image: Acidize Image: Deepen Image: Casing Image: Fracture Treat Image: Casing Repair Image: New Construction Image: Casing Repair			(Start/Resume) Water Shut-Off N Well Integrity Other Other y Abandon osal		
Attach the Bond ur following completi testing has been co determined that the CHI Operating, tubing lengths. CHI Operting, f Cond - Sug 2'	deepen directionally or recomplete horizon der which the work will be performed or p on of the involved operations. If the operat npleted. Final Abandonment Notices shal site is ready for final inspection.) Inc. has packer depth at 4532', 102' nc. is requesting approval to leave part Tions of Approval file to the foregoing is true and correct Unard!	rovide the Bond No. on fi ion results in a multiple cc be filed only after all requ above the upper most acker at this depth. NAC NM OIL CO UA UR OR ARTESIA AUG 3	le with BLM/BIA. Requestions or recompletion or recompletion irrements, including rectain rect	uired subsequent n on in a new interva amation, have bee opth is actually 4 ACCE	eports shall be filed within 30 days il, a Form 3160-4 shall be filed once n completed, and the operator has	
Name (Printéd/Typed) R PAM CORBETT			EIVED REGULATORY CI	Lerk		
Signature	an Cablet	Date		02/13/2013		
	THIS SPACE FO	R FEDERAL OR	STATE OFFIC	EUSE		
certify that the applican which would entitle the Title 18 U.S.C. Section 1 States any false, fictitiou	if any, are attached. Approval of this not holds legal or equitable title to those rigl applicant to conduct operations thereon. 001 and Title 43 U.S.C. Section 1212, make s or fraudulent statements or representati	its in the subject lease	Title Office knowingly and willful its jurisdiction.		Date	
(Instructions on page	e 2)					