Submit 3 Copies To Appropriate Office		State of New Me		JAN 29 2009	Form C-103
District I 1625 N. French Dr., Hobbs, NM	•••	Minerals and Natu	ral Resources	WELL API NO.	June 19, 2008
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION			30-015-36788 5. Indicate Type of Le	9CA	
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410			STATE \	FEE \square	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lea	ase No.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				Nichols "30" State Com.	
1. Type of Well: Oil Well Gas Well Other				8. Well Number #2	
2. Name of Operator CHI OPERATING, INC.				9. OGRID Number 4378	
3. Address of Operator				10. Pool name or Wildcat	
P.O. BOX 1799, MIDLAND, TEXAS 79702				ILLINOIS CAMP MO	RROW
4. Well Location Unit Letter C	: 950 feet:	from the NORTH	line and 1980	feet from theWE	ST line
Unit Letter C : 950 feet from the NORTH line and 1980 feet from the WEST line Section 30 Township 18S Range 28E NMPM County EDDY					
11. Elevation (Show whether DR, RKB, RT, GR, etc. 3566' GL					10 mm. 1
PERFORM REMEDIAL W TEMPORARILY ABANDO PULL OR ALTER CASING DOWNHOLE COMMINGL OTHER: 13. Describe proposed of starting any proj or recompletion. Spud well 12-10-08. Drld 1 Tail 200sxs C 2%S1,Circ 16 590sxs C 4%D20+d.2%D46	Or completed operations posed work). SEE RUL	ABANDON ANS ANS ANS ANS ANS ANS ANS ANS ANS AN	REMEDIAL WOF COMMENCE DR CASING/CEMEN OTHER: pertinent details, and le Completions: A case case. Cmtd w/Le de to 2395'. Ran 9 so surface. WOC 245	ILLING OPNS. P AID	ERING CASING DATE OF THE PROPERTY OF THE PROPE
N80 production csg. Cmtd v Released rig 1-5-09.	w/1060sxs PVL + 1.33%	5D44(BWOW).3%E	0167+.2%D65+.2%	5D46+.3%D13. Bump plu	g floats holding.
Spud Date: 12-10-08		Rig Release Da	1-5-09		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE	Neskew	TITLERI	EGULATORY CLI	ERKDATE1-	-26-09
Type or print nameROBIN ASKEW E-mail address:robina@chienergyinc.com_ PHONE: _432-685-5001 For State Use Only					
APPROVED BY: Conditions of Approval (if any):		TITLE	15-17	DATE_	