		OCD-ARTI	BIA		
7120 A 5 2010	UNITED STATES DEPARTMENT OF THE INTERIOR			FORM APPROVED OM B No 1004-0137 Expires: March 31, 2007  5. Lease Serial No. NM-98124  6. If Indian, Allottee or Tribe Name	
NMOCD ART Labandoned wo	ell. Use Form 3160-3 (	APD) for such prop	oosals.		
SUBMIT IN TRIPLICATE- Other instructions on reverse side.				7 If Unit or CA/Agreement, Name and/or No.	
I. Type of Well □ □ □ Gas Well □ □ Other				8. Well Name and No.	
2. Name of Operator CHI OPERATING, INC.				PARADISE 5 FEDERAL #1  9. API Well No.	
3a. Address 3b. Phone No. P. O. BOX 1799, MIDLAND, TX 79702 432-685-5			area code)	30-015-35630	
4. Location of Well (Footage, Sec., T, R, M, or Survey Description)				10 Field and Pool, or Exploratory Area BURTON FLATS MORROW	
1940' FSL & 780' FEL SEC. 5-T21S-R27E				11. County or Parish, State	
				EDDY,NM	
	PPROPRIATE BOX(ES) TO			EPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION				
☐ Notice of Intent ☐ Subsequent Report ☐ Final Abandonment Notice	Acidize  Alter Casing  Casing Repair  Change Plans  Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (Star Reclamation Recomplete Temporarily Aba Water Disposal	Well Integrity Other	
If the proposal is to deepen dire Attach the Bond under which t following completion of the in testing has been completed. For determined that the site is ready CHI Operating, Inc. will i	ectionally or recomplete horizontal he work will be performed or proviously of operations. If the operation and Abandoniment Notices shall be for final inspection.)  not be drilling the well "Paracette of the control of the well "Paracette of the control of the well "Paracette of the well of t	lly, give subsurface location rude the Bond No. on file was results in a multiple comple filed only after all requirenties 5 Federal #1", pleas	s and measured and true ith BLM/BIA. Required etion or recompletion in nents, including reclamate remove from the B	y proposed work and approximate duration thereofe vertical depths of all pertinent markers and zones d subsequent reports shall be filed within 30 days a new interval, a Form 3160-4 shall be filed once tion, have been completed, and the operator has  LM records.	
14. I hereby certify that the fore Name (Printed/Typed) ROBINASKEV	<u> </u>	Tella Di	ECHLATORY CLE	DIV.	
Signature				Title REGULATORY CLERK  Date 03/25/2010	
/10V V	THIS SPACE FOR	FEDERAL OR S	TATE OFFICE	USE	

Approved by

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to anymatter within its jurisdiction

Title

Office

Date