Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103		
District I				Revised March 25, 1999		
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO.			
1301 W. Grand Avenue, Artesia, NM OIL CONSERVATION DIVISION			30-015-32876	CT		
88210 District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410				5. Indicate Ty		
District IV Santa Fe, NIVI 87505				STATE		<del></del>
2040 South Pacheco, Santa Fe, NM 87505				6. State Oil &	Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS					e or Unit Agreeme	ent
(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				Name:		
PROPOSALS.)						
1. Type of Well:				Henry		
Oil Well Gas We	Il X Other FFB 1 3 2004					<del></del>
2 Name of Operator				7. Well No.		
Chi Operating, Inc.  OCD-ARTESIA				#3		
3. Address of Operator				8. Pool name or Wildcat		
P.O. Box 1799 Midland, Texas 79702				Golden Lane; Delaware, South		
4. Well Location				- <del> </del>	<del> </del>	
Unit Letter N: 990	feet from the SC	OUTH lin	e and 1650	feet from the W	EST line	
Section 22 Township: 22S Range: 27E NMPM County: EDDY						
10. Elevation (Show whether DR, RKB, RT, GR, etc.)						
GL - 3113'						
11. Check Ar				Report or Other	Data	بسيسك
11. Check Appropriate Box to Indicate Nature of Notice, I NOTICE OF INTENTION TO: SUBS				SEQUENT RE		
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WO						
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DR	ILLING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST A	ND 🗹		
OTHER	COM LETION		CEMENT 30B	,		_
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.						
Spud well 8/20/03. Drld 17½" hole to 224' w/13 3/8" 68# J55 surface csg. Cmtd w/200sxs "H" + 10% A10						
+ 10pps LCM + 2% CACL2, 1	Lead 175sxs "C" +	4% Gel +	4pps LCM + 2	% CACL2, Tail	100sxs "C" + 2%	,
CACL2 + 1pps LCM. WOC, TOC @ 44'. Drld 121/4" to 5455' w/9 5/8" csg 36/40# N80/J55. Cmtd w/1st Stage;						
Lead 450sxs + 15% Gel + 10% Salt + 1# LCM-1, Tail 200sxs + 25# CF. 2 <sup>nd</sup> Stage w/Lead 500sxs + 15% Gel +						
10% Salt + 1# LCM-1, Tail 10				C		
I hereby certify that the inform	nation above is true	and comp	olete to the best	of my knowledg	e and belief.	
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SIGNATURE KOOVOLL	OLL TITLE	Regu	lartory Clerk	DATE	2/04/04	
	****		·			_
Type or print name Robin Askew Te				elephone No. 915-685-5001		
(This space for State use)						<del></del>
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APPPROVED FOR RECORDS ONLY					FEB 1 6 2004	
BYTITLE_ Conditions of approval, if any:  Note Woe Time			DATE			
Conditions of approval, if any		`				
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	NATE WOC	Time				