Submit 3 Copies To Appropriate District	· · · · · · · · · · · · · · · · · · ·	lew Mexico_		Form C-103
Office	Energy, Minerals a	nd Natural Resources		Revised March 25, 1999
District !				VELL API NO.
1625 N. French Dr., Hobbs, NM 87240	OIL CONCEDIA	ATION DUVISION	<u> </u>	0-041-20066
District II	-	ATION DIVISION	•	5. Indicate Type of Lease
811 South First, Artesia, NM 87410		th Pacheco		STATE FEE
District III	Santa Fe,	NM 87505	· · ·	
1000 Rio Brazos Rd., Aztec, NM 87410		•	. [6	6. State Oil & Gas Lease No.
District IV	•			25945
2040 South Pacheco, Santa Fe, NM 87505				
SUNDRY NOT	ICES AND REPORTS ON WEL	LS	7	7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PRO	POSALS TO DRILL OR TO DEF	EPEN OR PLUG BACK TO A	1	
DIFFERENT RESERVOIR. USE "APPI	LICATION FOR PERMIT" (FORI	M C-101) FOR SUCH PROPOSALS.)	н	londo State
1. Type of Well			ł	
Oil Well Gas Well	Injector		ŀ	
2. Name of Operator	<u> </u>		8	3. Well No.
Chi Operating, Inc				1
3. Address of Operator	,		٤	Pool name or Wildcat
PO Box 1799, Midland, TX 797	02			SWD; Chavaroo San Andres
4. Well Location	•			
Unit Letter F	1980 feet from the North	line and 1980 feet from the	West lin	ne
Section 31	Township 7S	Range 33E NMPM	С	ounty Roosevelt
	10. Elevation (Show whether DR, Ri	KB, RT, GR, etc.)		
	• •	Nature of Notice, Report or Ot		DT 05
NOTICE OF INTE	ī	SUBSEQUE		;;
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	A	LTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	P	LUG AND
				BANDONMENT
	MULTIPLE	CASING TEST AND		
	COMPLETION	CEMENT JOB		
	_	 ,		
OTHER:		OTHER:		
12. Describe proposed or completed operation		• •		
of starting any proposed work). SEE	ERULE 1103. For Multiple Comp	pletions: Attach wellbore diagram of pro	posed compl	etion
of recompilation.				
Run and set CIBP @4150', cap w/35'	æment w/dump bailer, Displace	w gelled brine water, pull tubing, perf () 1930', esta	blish circulation
between 8 5/8" and 4 1/5", cement to se	nutace			31112137470
				SE RL Hobbs OCD
	-	00		(3) mu 998 50
		. COMMISSION MUST BE NOTIF URS PRIOR TO THE BEGINNIN		ED 2
		GGING OPERATIONS FOR THE		IN FLUTING N
		BE APPROVED.	C 100	Hopps OCO
1		and declaration of the first		100 xi0
I hereby certify that the information above is tr	ue and complete to the best of my kno	owiedge and belief.		65.8572820
SIGNATURE Juliu	TITLI	E Supt.		DATE 6-9-03

Type or print name Oren Albrigh	<u>)t</u>		Telephone	No. 915/684-0504
(This space for State use)				
APPROVED BY Lary W. Win	U TITLE	PRESENTATIVE II/STAFF MANA	CEU	DATE
Conditions of approval if any:	OC FIELD RE	EKESTIANA E DI S.V.		JUN 1 8 2003