

Submit to Appropriate District Office
State Lease - 6 copies
Fee Lease - 5 copies
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form U-103
Revised June 10, 2003

WELL API NO.30-005-10467

5. Indicate Type of Lease

Federal *State*

State Oil & Gas Lease No. 025943

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well:

OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐

b. Type of Completion:

NEW ☐ WORK ☐ DEEPEN ☐ PLUG ☐ DIFF.
WELL OVER BACK RESVR. ☐ OTHER ☒

7. Lease Name or Unit Agreement Name
Haley CSA Unit

2. Name of Operator Chi Operating, Inc.

8. Well No. *037*

3. Address of Operator PO Box 1799, Midland, TX 79702

9. Pool name or Wildcat Chavaroo *San Andres*

4. Well Location

Unit Letter H :1980 Feet From The South Line and 660 Feet From The East Line

Section 03 Township 08S Range 33E NMPM County Roosevelt

10. Date Spudded
07/66

11. Date T.D. Reached

12. Date Compl. (Ready to Prod.)

13. Elevations (DF& RKB, RT, GR, etc.)

14. Elev. Casinghead

15. Total Depth
4489

16. Plug Back T.D.
4452

17. If Multiple Compl. How Many
Zones?

18. Intervals
Drilled By

Rotary Tools

Cable Tools

19. Producing Interval(s), of this completion - Top, Bottom, Name
San Andres, 4198-4348

20. Was Directional Survey Made

21. Type Electric and Other Logs Run

22. Was Well Cored

23. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB/FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

24. LINER RECORD

25. TUBING RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

26. Perforation record (interval, size, and number)

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.

DEPTH INTERVAL

AMOUNT AND KIND MATERIAL USED

28. PRODUCTION

Date First Production

Production Method (Flowing, gas lift, pumping - Size and type pump)
Swab

Well Status (Prod. or Shut-in)
Producing

Date of Test
11-05

Hours Tested
1

Choke Size

Prod'n For
Test Period

Oil - Bbl
2

Gas - MCF

Water - Bbl.
4

Gas - Oil Ratio

Flow Tubing
Press.

Casing Pressure

Calculated 24-
Hour Rate

Oil - Bbl.

Gas - MCF

Water - Bbl.

Oil Gravity - API - (Corr.)

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

Test Witnessed By

30. List Attachments

31. I hereby certify that the information shown on both sides of this form as true and complete to the best of my knowledge and belief

Signature

Printed
Name *Oren Albright*

Title *Supervisor*

Date *11-29-05*

E-mail Address

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