

Submit To Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies <b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 <b>District II</b> 1301 W. Grand Avenue, Artesia, NM 88210 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 <b>District IV</b> 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> 1220 South St. Francis Dr. Santa Fe, NM 87505	<b>Form C-105</b> Revised June 10, 2003  <b>WELL API NO.30-005-10541</b>  5. Indicate Type of Lease <del>Federal</del> <u>State</u> State Oil & Gas Lease No. 025943
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>		
1a. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>  b. Type of Completion: NEW <input type="checkbox"/> WORK <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG <input type="checkbox"/> DIFF. <input type="checkbox"/> WELL OVER <input type="checkbox"/> BACK <input type="checkbox"/> RESVR. <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>		7. Lease Name or Unit Agreement Name Haley CSA Unit
2. Name of Operator Chi Operating, Inc.		8. Well No. 039
3. Address of Operator PO Box 1799, Midland, TX 79702		9. Pool name or Wildcat Chavaroo <u>San Andres</u>
4. Well Location Unit Letter <u>J</u> :1980 Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line  Section <u>03</u> Township <u>08S</u> Range <u>33E</u> NMPM County <u>Roosevelt</u>		
10. Date Spudded <u>11/66</u>	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. 4438	17. If Multiple Compl. How Many Zones?
18. Intervals Drilled By		19. Producing Interval(s), of this completion - Top, Bottom, Name <u>San Andres, 4240-4366</u>
20. Was Directional Survey Made		21. Type Electric and Other Logs Run
22. Was Well Cored		23. <b>CASING RECORD (Report all strings set in well)</b>
CASING SIZE	WEIGHT LB./FT.	DEPTH SET
HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
24. <b>LINER RECORD</b>		
SIZE	TOP	BOTTOM
SACKS CEMENT	SCREEN	25. <b>TUBING RECORD</b>
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. <b>PRODUCTION</b>		
Date First Production	Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> ) <u>Swab</u>	Well Status ( <i>Prod. or Shut-in</i> ) <u>Producing</u>
Date of Test 11-05	Hours Tested 1	Choke Size
Prod'n For Test Period	Oil - Bbl 2	Gas - MCF
Water - Bbl 7	Gas - Oil Ratio	
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate
Oil - Bbl	Gas - MCF	Water - Bbl
Oil Gravity - API - ( <i>Corr.</i> )		
29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc.</i> )		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 <u>Oren Albright</u>	Printed Name Oren Albright	Title Supervisor
E-mail Address	Date 11-29-05	