

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., 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

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

025
WELL API NO.
30-015-38186
5. Indicate Type of Lease
STATE ☒ FEE ☐
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name
Elkan
8. Well Number 2Y
9. OGRID Number
004378
10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4098
Pit or Below-grade Tank Application ☐ or Closure ☐
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

SUNDRY NOTICES AND REPORTS ON WELLS
(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 PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator
CHI OPERATING, INC

3. Address of Operator
PO BOX 1799 MIDLAND, TX 79702

4. Well Location

Unit Letter H : 2088 feet from the NORTH line and 699 feet from the EAST line
Section 11 Township 14S Range 34E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4098

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☒ P AND A ☐
CASING/CEMENT JOB ☒

OTHER: ☐

13. 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 recompletion.

Drilled 7 7/8 hole t/4400", set 8 5/8", J-55, 32#. Cmted Lead w/915 sks "C"+15% Gel+10%#SALT+2% CaCl2. Tail w/100 sks #SX GILLSONITE, Tail w/300 sks "C" + 4% GEL + 1/4 # CF, Circ 103 sks t/pit, Bump plug, Float holding. ND BOP, install "B" section & tst, all ok, NU BOP, tst t/5000#. WOC 20 1/2 hrs before tst csg t/700#-30 min.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE: Robin Askeew TITLE: REGULATORY CLERK DATE: 1/02/07

Type or print name: ROBIN ASKEW E-mail address: _____ Telephone No: 432-685-5001

For State Use Only

APPROVED BY: Jim W. Green TITLE: _____ DATE: 1/12/07

Conditions of Approval (if any) Supervisor

FOR RECORD ONLY