

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
**N.M. Oil Cons. Division**  
**1625 N. French Dr.**  
**Hobbs, NM 88240**

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to transfer a well to a different reservoir.  
Use "APPLICATION FOR PERMIT - " for such proposals

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.  
**NM - 0127782**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**TKL Federal 27 #2**

9. API Well No.

**30-041-10503-00-00**

10. Field and Pool, or Exploratory Area

**Chavaroo San Andres**

11. County or Parish, State

**Roosevelt, Co, NM**

**SUBMIT IN TRIPLICATE**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

**Chi Operating, Inc.**

3. Address and Telephone No.

**PO Box 1799, Midland, Tx. 79702 915/685-5001**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**1980 FNL, 1980 FEL, Sec. 27, T7S, R33E**

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

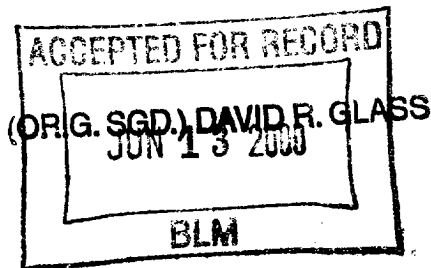
☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other

☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

To place this back into production by 6-30-00



14. I hereby certify that the foregoing is true and correct

Signed

*David R. Glass*

Title **Supv.**

Date

**##### 6-6-00**

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

**Approval Subject To Putting Well On  
Production And Keeping Well On  
Continuous Production.**

to any department or agency of the United States any false, fictitious or fraudulent statements

tion on Reverse Side

GWW