Form 3160-5) STATES		Cons. Division	
(June 1990)			Hobbs, NM	FORM APPROVED 88240 8000001 Boreau No. 1004-0135	
. ,		BUREAU OF LAND MANAGEMENT		Expires: March 31, 1993	
				5. Lease Designation and Serial No.	
SU	13099 NM 18846				
Do not use this t Us	6. If Indian, Allottee or Tribe Name				
Use "APPLICATION FOR PERMIT - " for such proposals SUBMIT IN TRIPLICATE				7. If Unit or CA, Agreement Designation Chavaroo SA Unit	
1. Type of Well					
X Oil 3as Other					
2. Name of Operator				8. Well Name and No. Chavaroo SA Unit #1	
Chi Operating Inc.				9. API Well No.	
3. Address and Telephone No.				30-041-20490	
PO Box 1799, Midland, Tx. 79702				10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) /650/5 + 2310/W				Chavaroo San Andres	
Sec 34, T-7-S, R-32-E, unit D				11. County or Parish, State Chaves, NM	
12. CHECK APPRO TYPE OF SUBMIS		NDICATE NATURE OF NO	OTICE, REPORT, OR PE OF ACTION	OTHER DATA	
Notice of Intent		Abandonment		Change of Plans	
<u></u>		Recompletion			
X Subsequent Repo	rt 🛛	Plugging Back		Non-Routine Fracturing	
		Casing Repair		Water Shut-Off	
Final Abandonme	nt Notice	Altering Casing		Conversion to Injection	
		X Other Restore well	to production	Dispose Water	
	1			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
	and measured and true vertical dep	tinent details, and give perlinent dates, incluc oths for all markers and zones pertinent to thi		sposed work. If well is directionally drilled,	
			Ĩ	ACCEPTED FOR RECORD	
				0001	
				GCT 2001	
				L. UPS BACYAK	
	$1 \wedge 1$				
14. Thereby certify that the fore Signed	going is true and forrest	Title Supv.		Date 9/24/01	
(This space for Federal or St	ate office use)				

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Title

Approved by

Conditions of approval, if any:

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*See Instruction on Reverse Side

Date
