

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

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

Federal Well

WELL API NO. 30-005-63708
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Dana 3 Federal
8. Well Number 11
9. OGRID Number 147179
10. Pool name or Wildcat Pecos Slope

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 ☐ **RECEIVED**

2. Name of Operator
Chesapeake Operating, Inc. **NOV 19 2004**

3. Address of Operator P. O. Box 11050
Midland, TX 79702-8050 **OCD-ARTESIA**

4. Well Location
Unit Letter E : 1980 feet from the North line and 660 feet from the West line
Section 3 Township 9S Range 25E NMPM County/Chaves

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3563 GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type Steel 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 _____

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.

We will be using a closed loop system while drilling this well.

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 Brenda Coffman TITLE Regulatory Analyst DATE 11/17/2004

Type or print name Brenda Coffman E-mail address: bcoffman@chkenergy.com Telephone No. (432)685-4310

For State Use Only

TIM W. GUM

NOV 24 2004

APPROVED BY: DISTRICT II SUPERVISOR TITLE _____ DATE _____

Conditions of Approval (if any):