Form 3160-5 (August 1999)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

**SUNDRY NOTICES AND REPORTS ON WELLS** 

not use this form for proposals to drill or to re-enter an

FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000

5.	Lease Serial No.	
Ν	MNM13978	•
<u> </u>	If Indian Allottee or Tribe Name	:

abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee of Title Name	
SUBMIT IN TR	7. If Unit or CA/Agreement, Name and/or No.					
Type of Well     ☐ Oil Well	JUN 0 3 7005		8. Well Name and No. Leeman 12 Federal 6			
<ol> <li>Name of Operator Chesapeake Operating, In</li> </ol>	C.	UOU-AATERM		9. API Well No.		
3a. Address	3b. Phone No. (include area code)		30-005-63710  10. Field and Pool, or Exploratory Area			
P. O. Box 11050 Midland  4. Location of Well (Footage, Se	(432)687-2992		Pecos Slope			
1980' FNL & 1980' FEĽ, So	ection 12 T9S R25E			11. County or Parish, State Chaves New Mexico		
12. CHECK AF	PROPRIATE BOX(ES) TO	O INDICATE NAT	URE OF NOTICE,	REPORT, OI	R OTHER DATA	
TYPE OF SUBMISSION		Ι	YPE OF ACTION			
☐ Notice of Intent	☐ Acidize ☐ Alter Casing	☐ Deepen ☐ Fracture Treat	☐ Production (St☐ Reclamation	art/ Resume)	☐ Water Shut-Off ☐ Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete			
☐ Final Abandonment Notice	☐ Change Plans ☐ Convert to Injection	☐ Plug and Abandon ☐ Plug Back	☐ Temporarily A ☐ Water Disposa			
		I lug Dack				
determined that the site is read 3-14-05 In 7 7/8" hole, ra sx + additives. Released 4-2-05 Ran Logs: GR/CC w/170 jts. 2 3/8" tbg to 53/ 4-3-05 RU Cudd Pumping Devonian perfs w/2300 ga 4-13-05 RIH w/2 3/8" tubi	n 127 jts. 4 1/2" 11.6# J5: United Drilling rig #30 @ L/CBL/VDL. RIH, perfora 00'. g Service. Pump 200 gal als 15% neFe acid + 150 ing set @5,590'. SD WO	5 LTC csg set @ 9 4:00 p.m. TOC 17 ate Devonian 5,46 s 15% NeFe dowr BS. Swabbing.	5650'. Cmt'd w/56 '00'. 6' - 5,526i' @ 2 sp	5 sx 35:65:5 of, 121 holes	5 + additives; tail in w/470 w/ 3 1/8" csg. gun. RIH	
14. I hereby certify that the foregoing Name (Printed/Typed)	ing is true and correct	Title			1	
Brenda Coffman	$\sim$		Regulatory Analyst			
Signature Date 05/19/2005						
ACCEPTED	FORTEODISSPACE	OR FEDERAL OR	STATE OFFICE US	Entro		
Approved by G. SGD.	DAVID & CLAS		Title	. I	Date	
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant t	nl or equitable title to those rights o conduct operations thereon	in the subject lease	Office			
Title 18 U.S.C Section 1 001 mak	es it a crime for any person know ations as to any matter within its	ingly and willfully to nurisdiction.	nake to any department	or agency of the	United States any false, fictitious or	