OCD-ARTESIA

April 20	UNITED STATES DEPARTMENT OF THE		. 1	FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007
	BUREAU OF LAND MAN			ease Serial No.
The state of the s	NOTICES AND REF	. 41.7	10 / / /	NMLC ² 29389-B If Indian, Allottee or Tribe Name
abandoned we	ell. Use Form 3160 - 3 (/	APD) for such pr		a Marai, Miorido de Miori Mario
SUBMIT IN TRIPLICATE- Other instructions on reverse side.				f Unit or CA/Agreement, Name and/or No. NMNM 105365
1. Type of Well				
2. Name of Operator CHESAPEAKE OPERATING, INC. ATTN: LINDA GOOD			SOOD .	Well Name and No. ANADARKO FEDERAL 2
3a Address 3b. Phone No. (include area code)			9.	API Well No. 30-015-32852
P. O. BOX 18496, OKLAHOMA CITY, OK 73154-0496 405-767-4275			10.	Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				CEDAR LAKE County or Parish, State
660 FSL 660 FWL, SWSW, SECTION 4, T18S, R31E				•
				EDDY COUNTY, NEW MEXICO
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
TYPE OF SUBMISSION			PE OF ACTION	
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (Start/Resi	ume)
Subsequent Report	Casing Repair	New Construction	Recomplete	Other Workover Same
	Change Plans	Plug and Abandon	Temporarily Abandon	Zone
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal	Well Record Only
If the proposal is to deepen dire Attach the Bond under which the following completion of the in-	ectionally or recomplete horizontall he work will be performed or provivolved operations. If the operation nal Abandonment Notices shall be	y, give subsurface location ide the Bond No. on file results in a multiple com	ons and measured and true verti with BLM/BIA. Required sub- pletion or recompletion in a new	posed work and approximate duration thereof. call depths of all pertinent markers and zones. sequent reports shall be filed within 30 days w interval, a Form 3160-4 shall be filed once have been completed, and the operator has
10/20/2006 RU BJ Services & Stinger isolation tool. Treat Morrow perfs @ 11,748' - 11,761' w/5000 gal CO2 per-pad 4000 gal foamed Isosol, flush w/5915 gal CO2, return to production.				
(CHK PN 891316)				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
 I hereby certify that the fore Name (Printed/Typed) 	egoing is true and correct	1		
LINDA GOOD		Title	PERMITTING AGENT	V. March
Signature Sind	la Good	Date	11/02/	2006
THIS SPACE FOR FEDERAL OR STATE OFFICE USE				
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Approved by

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

FREDERICK WRIGHT PETROLEUM ENGINEER