District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720
District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources

Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 35196

WELL API NUMBER
30-015-34750

5. Indicate Type of Lease
P

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:O

7. Lease Name or Unit Agreement Name
IMC 21

8. Well Number
001

2. Name of Operator
CHESAPEAKE OPERATING, INC.

9. OGRID Number
147179

3. Address of Operator
P. O. BOX 18496 , OKLAHOMA CITY , OK 731540496

10. Pool name or Wildcat
See Area 13

4. Well Location
Unit Letter A : 330 feet from the N line and 660 feet from the E line
Section 21 Township 23S Range 29E NMPM Eddy County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
2957 GR

Pit or Below-grade Tank Application ☐ or Closure ☐
Pit Type _____ 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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTER CASING ☐
TEMPORARILY ABANDON ☐	CHANGE OF PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDON ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
Other:		Other: **Perforations/Tubing**	☒

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.

7/06/06 Perf'd Bone Spring w/1spf from 7684 - 7926 (22 holes) Spot 250 gals 9f 7 1/2% NeFe acid @ 7926', rev acid into tbg. Acdz w/2000 gals of 7 1/2% NeFe + 40 BS, flush w/52 bbls of 2% KCL.

7/11/06 Frac Bone Spring w/pad of 10,000 gals of Medallion 3,000 gel, 43,000 gals of Med. 3000 containing 129,620# of 20/40 wh. sd. & 3334 gals containing 20,133# of 20/40 super LC sd., flushed w/7640 gals of 2% KCL.

7/15/06 TIH w/2 7/8" tbg and turn over to production

Perforations

Pool: HARROUN RANCH;DELAWARE, NE , 96878 Location: A -21-23S-29E 330 N 660 E

TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount
7684	7926	Y	1			Frac	53000

Tubing

HARROUN RANCH;DELAWARE, NE , 96878

Tubing Size	Type	Depth Set	Packer Set
2.875	l80	7620	7620

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 Electronically Signed TITLE Regulatory Analyst DATE 7/31/2006

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

For State Use Only:

APPROVED BY: Bryan Arrant TITLE Geologist DATE 7/31/2006 1:10:07 PM

Tubing Comments

OGRID: [147179] CHESAPEAKE OPERATING, INC.
Permit Number: 35196
Permit Type: Tubing

Created By	Comment	Comment Date
BSCOFFMAN	I do not have tops from my geologist yet and will file with the completion form C105.	7/31/2006