

## 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

Form C-103  
Permit57045

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

WELL API NUMBER  
30-025-38334

5. Indicate Type of Lease  
S

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
GOOD 13 STATE

8. Well Number  
001

9. OGRID Number  
147179

10. Pool name or Wildcat

## SUNDRY NOTICES AND REPORTS ON WELLS

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

1. Type of Well: O

2. Name of Operator

CHESAPEAKE OPERATING, INC.

3. Address of Operator

P. O. BOX 18496, OKLAHOMA CITY, OK 731540496

4. Well Location

Unit Letter A : 660 feet from the N line and 660 feet from the E line  
Section 13 Township 13S Range 32E NMPM Lea County

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

4296 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:

PERFORM REMEDIAL WORK  PLUG AND ABANDON

TEMPORARILY ABANDON  CHANGE OF PLANS

PULL OR ALTER CASING  MULTIPLE COMPL

Other:

## SUBSEQUENT REPORT OF:

REMEDIAL WORK  ALTER CASING

COMMENCE DRILLING OPNS.  PLUG AND ABANDON

CASING/CEMENT JOB

Other: **Spud**

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.

7/9/2007 Spudded well.

7/9/07. MIRU Forster drlg rig #25. Spud @ 5:00 a.m. on 7/9/07.

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 Comp. Spec. DATE 7/11/2007

Type or print name Brenda Coffman E-mail address bcoffman@chkenergy.com Telephone No. 817-556-5825

**For State Use Only:**

APPROVED BY: Paul Kautz TITLE Geologist DATE 7/12/2007