



**PARALLEL**  
Petroleum Corporation

1004 North Big Spring, Suite 400 • Midland, TX 79701 • Ph: 432-684-3727 • Fax: 432-684-3905

May 6, 2008

**Sent via CMRRR# 7007 0220 0002 4961 6875**

Chesapeake Energy Corporation  
Attn: Mr. Ed Birdshead  
P.O. Box 18496  
Oklahoma City, OK 73154-0496

Re: Real Quiet 1525-4 Fed Com #1  
Township 15 South, Range 25 East, N.M.P.M.  
Section 4: N/2  
Chaves County, New Mexico

To Whom It May Concern:

Parallel Petroleum Corporation proposes the drilling of the above-captioned well to horizontally test the Wolfcamp formation in the North half (N/2) of Section 4, Township 15 South, Range 25 East, N.M.P.M. in Chaves County, New Mexico. The well will be commenced at an off lease location in the NE/4 NE/4 of Section 5, Township 15 South, Range 25 East, N.M.P.M. and penetrate the Wolfcamp formation at an orthodox penetration point in the NW/4 NW/4 of Section 4. The well will be drilled to an approximate vertical depth of 4,750'. The well will then be drilled horizontally to a projected orthodox terminus in the NE/4 NE/4 of Section 4.

Enclosed please find an Authority for Expenditure estimating the cost of the proposed well. The total cost for the proposed well is estimated to be \$2,317,500. Please mark the appropriate space provided below indicating whether or not you intend to join in the drilling of the well. If you elect to join, please return a signed copy of the Authority for Expenditure. Additionally, if you elect to join, please furnish us with your well information requirements.

If you have any questions or need anything further, please do not hesitate to contact me. You can reach me at the office, my direct dial number is (432) 687-8663. You can also reach me on my cell phone, the number is (956) 330-4051. Thank you.

Yours truly,

Aaron L. Myers  
Consulting Landman

Oil Conservation Division

Case No. 4

Exhibit No. 4

**CHESAPEAKE ENERGY CORPORATION**

\_\_\_\_\_ I/We elect to participate in the proposed Real Quiet 1525-4 Fed Com  
#1 well and enclose an executed Authority for Expenditure.

\_\_\_\_\_ I/We elect not to participate in the proposed well.

**CHESAPEAKE ENERGY CORPORATION**

By: \_\_\_\_\_  
Name

Title: \_\_\_\_\_

Date: \_\_\_\_\_

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only, No Insurance Coverage Provided)  
 For delivery information visit our website at [www.usps.com](http://www.usps.com)

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent to: **CHESAPEAKE ENERGY**  
 Street, Apt. No. or P.O. Box No.: **P.O. Box 18496**  
 City, State, ZIP+4: **Oklahoma City, OK 73154-0496**

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**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
**CHESAPEAKE ENERGY CORP.**  
**ATTN: ED BIRDSEAD**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

**SENDER: COMPLETE THIS SECTION**

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
**CHESAPEAKE ENERGY CORP.**  
**ATTN: ED BIRDSEAD**  
**P.O. Box 18496**  
**Oklahoma City, OK 73154-0496**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☐ Agent ☒ Addressee ☐ Express Mail

B. Received by (Printed Name) C. Date of Delivery ☐ Return Receipt for Merchandise ☐ C.O.D.

D. Is delivery address different from item 1? ☐ Yes ☐ No **975**  
 If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number **7007 0220 0002 4961 6875**  
 (Transfer from service lab)  
 PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540