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 63060

WELL API NUMBER
30-015-35708

5. Indicate Type of Lease
S

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.)

7. Lease Name or Unit Agreement Name
BEGGS 21 STATE COM

1. Type of Well:G

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

4. Well Location
Unit Letter A : 760 feet from the N line and 760 feet from the E line
Section 21 Township 25S Range 27E NMPM Eddy County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3112 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: **Drilling/Cement** | ☒ |

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.
10/16/07. Run 206 jts 9 5/8 46# P-110 csg set @ 9050. Cmtd w/550 sx + additives, tail in w/500 sx 50:50 Poz Prem Plus + additives. WOC 18 hrs. Ran 50 sx to surface. Tested cmt to 3500 psi for 30 mins-OK.**9/7/2007** Spudded well.

**Casing and Cement Program**

| Date | String | Fluid Type | Hole Size | Csg Size | Weight lb/ft | Grade | Est TOC | Dpth Set | Sacks | Yield | Class | 1" Dpth | Pres Held | Pres Drop | Open Hole |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 09/09/07 | Surf | FreshWater | 26 | 20 | 94 | K-55 | 0 | 375 | 885 | 2.03 | Halib Lite | | 500 | 0 | Y |
| 09/14/07 | Int1 | Brine | 17.5 | 13.375 | 54.5 | J-55 | 0 | 2100 | 1840 | 2.01 | C | | 500 | 0 | Y |
| 10/16/07 | Int2 | Brine | 12.25 | 9.625 | 46 | P-110 | 0 | 9050 | 1050 | 2.01 | Poz prem p | | 3500 | 0 | Y |

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 RegulatoryComp. Spec. DATE 10/22/2007

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

**For State Use Only:**

APPROVED BY: Bryan Arrant TITLE Geologist DATE 10/22/2007 11:48:17 AM