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 110536

WELL API NUMBER
30-015-36998

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
PLU PIERCE CANYON 5 STATE

1. Type of Well: O

8. Well Number
001H

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 P : 350 feet from the S line and 350 feet from the E line
Section 5 Township 25S Range 30E NMPM Eddy County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3243 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.
2/8/2010 thru 2/19/10: Complete Bone Spring interval: 7900'-12,327'. Perf 5 jspf w/350 holes(OA).
Frac with 30,000 gals 15% NeFe Acid; 41,740 bbls water and 2,263,000 #s sand.
2/22/10 thru 3/4/10: Test well.
3/5/10: RDMO PU.
3/6/10-3/17/10: Flow back load water.

## Perforations

**Pool: PIERCE CROSSING; BONE SPRING, EAST , 96473 Location: A -5-25S-30E 350 N 350 E**

| TOP | BOT | Open Hole | Shots/ft | Shot Size | Material | Stimulation | Amount |
|---|---|---|---|---|---|---|---|
| 7900 | 12327 | N | 5 | | Sand/Water | Frac | |

## Tubing

**PIERCE CROSSING; BONE SPRING, EAST , 96473**

| Tubing Size | Type | Depth Set | Packer Set |
|---|---|---|---|
| 2.875 | L-80 | 7419 | |

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 Sr. Regulatory Compliance Specialist DATE 3/19/2010

Type or print name Bryan Arrant E-mail address bryan.arrant@chk.com Telephone No. 405-935-3782

**For State Use Only:**

APPROVED BY: Jacqueta Reeves TITLE District Geologist DATE 3/19/2010 4:35:17 PM