

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 117883

|                                                                                                                                                                                                                                                                                                                                         |  |                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)                                                                                                                           |  | WELL API NUMBER<br>30-015-37805                      |
| 1. Type of Well: O                                                                                                                                                                                                                                                                                                                      |  | 5. Indicate Type of Lease<br>S                       |
| 2. Name of Operator<br>CHESAPEAKE OPERATING, INC.                                                                                                                                                                                                                                                                                       |  | 6. State Oil & Gas Lease No.                         |
| 3. Address of Operator<br>P. O. BOX 18496, OKLAHOMA CITY, OK 731540496                                                                                                                                                                                                                                                                  |  | 7. Lease Name or Unit Agreement Name<br>SKEEN 34 COM |
| 4. Well Location<br>Unit Letter <u>3</u> : <u>315</u> feet from the <u>S</u> line and <u>1670</u> feet from the <u>E</u> line<br>Section <u>34</u> Township <u>26S</u> Range <u>28E</u> NMPM <u>Eddy</u> County                                                                                                                         |  | 8. Well Number<br>001H                               |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3105 GR.                                                                                                                                                                                                                                                                           |  | 9. OGRID Number<br>147179                            |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/><br>Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ |  | 10. Pool name or Wildcat                             |

**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: **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.  
 Drill 11" hole w/cut brine fluid to 2607' on 7/25/10. Run 61 jts of 8 5/8" 32# J-55 LTC csg. M&P 660 sxs of Class "C" cmt 14.2 ppg(1.8 yield). Add: 5% Cmt extender + .2% Antifoam. Tail w/320 sxs of Class "C" cmt 14.2 ppg(1.37 yield). Add: 2% bentonite + 5% BWOW Accel. Returned 58 bbls of cmt to surface. Total WOC time @ 23 hours. Test csg to 1500 psi for 30 minutes, held good. Test 13 3/8" 5M BOP rams 250/3000 psi; annular 250/2500 psi; choke manifold, kelly, standpipe & flowline 250/3000 psi. All tests good. Resumed drilling formation on 7/28/10. 7/19/2010 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 |
|----------|--------|------------|-----------|----------|--------------|-------|---------|----------|-------|-------|-------|---------|-----------|-----------|-----------|
| 07/19/10 | Surf   | FreshWater | 17.5      | 13.375   | 48           | H-40  | 0       | 420      | 449   | 1.75  | C     |         | 1500      | 0         | N         |
| 07/26/10 | Int1   | CutBrine   | 11        | 8.625    | 32           | J-55  | 0       | 2607     | 980   | 1.8   | C     |         | 1500      | 0         | N         |

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 7/29/2010  
 Type or print name Bryan Arrant E-mail address bryan.arrant@chk.com Telephone No. 405-935-3782

**For State Use Only:**

APPROVED BY: Randy Dade TITLE District Supervisor DATE 7/29/2010 2:21:54 PM