New Mexico Oil Conservation Division

For (A

	UNITED STATES DEPARTMENT OF THE IN BUREAU OF LAND MANAC	Artesia, NM NTERIOR GEMENT	88210		ED 2135 1103-110400000 30, 20 No.	200
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRI Type of Well Oil Well Gas Well Name of Operator	PLICATE - Other instru	ctions on reverse	side	7. If Unit or CA/ NM061P3585 8. Well Name an Manning, LR	ıd No.	
Chesapeake Operating, In a. Address P. O. Box 11050 Midland Location of Well (Footage, Sec. 130' FSL & 990' FEL, Sec.	TX 79702-8050 c., T., R., M., or Survey Description c. 28, T18S, R30E			9. API Well No. 30-015-2465 10. Field and Por Nimenim Rid 11. County or Pa Eddy New Mexico	1 ol, or Exploratory Ige;Morrow arish, State	Area
	PPROPRIATE BOX(ES) TO		·····	ŒPORT, OR O	HER DATA	
TYPE OF SUBMISSION Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	PE OF ACTION Production (State Reclamation Recomplete Temporarily At Water Disposal	□ ⊠ pandon	Water Shut-Off Well Integrity Other Change	e of Oper.
If the proposal is to deepen dir Attach the Bond under which to following completion of the in testing has been completed. Fit determined that the site is read	ed Operation (clearly state all perticular p	lly, give subsurface locativide the Bond No. on file was results in a multiple compartie only after all require	ons measured and true with BLM/BIA. Require letion or recompletion ments, including reclan	vertical depths of all ed subsequent reports in a new interval, a F nation, have been cor	pertinent markers s shall be filed wit form 3160-4 shall mpleted, and the o	and zones. thin 30 days be filed once operator has
	Please, change the ope		t the change. AP MA /S/ Ma MARY RUREAU OF	PROVEC R 9 2005 BY LOU ORMSETH F LAND MANAGE ELL FIELD OFFICE	eth MENT	
14. I hereby certify that the foregoname (Printed/Typed) Prondo Coffmon	oing is true and correct	Title	loton, Analyst		Examiner	-

14. I hereby certify that the foregoing is true and correct	Examiner			
Name (Printed/Typed)	Title			
Brenda Coffman	Regulatory Analyst			
Signature Colons	Date 02/16/2005			
THIS SPACE FOR FEDER	AL OR STATE OFFICE U	SE		
Approved by	Title	Date		
Conditions of approval, if any, are attached. Approval of this notice does not war certify that the applicant holds legal or equitable title to those rights in the subject which would entitle the applicant to conduct operations thereon.				

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.