

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-34133
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: Kim 1
8. Well No. 1
9. Pool name or Wildcat

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
 Oil Well Gas Well Other

2. Name of Operator
 Chesapeake Operating, Inc.

3. Address of Operator
 P.O. Box 18496, Oklahoma City, OK 73154-0496

4. Well Location
 Unit Letter P : 730 feet from the So. line and 716' feet from the East line
 Section 1 Township 16S Range 36E NMPM Lea County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
 GL: 3863'

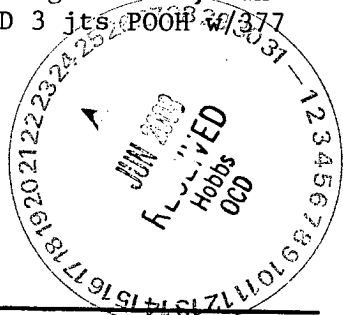
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Add Strawn Perforations <input checked="" type="checkbox"/>	

12. 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.

05/22/03 Open well up. TP 150#, RU Schlumberger, RIH w/guns & perf Strawn 11,580'-11,600' w/4 spf, RD Schlumberger, PU RIH w/5-1/2" Klein pkr, SN & 374 jts 2-7/8" tbg, set pkr @11,450'

05/23/03 RU Cudd Pumping Services, TP 50#, open well up, bleed pressure off, pump 96 bbls Acidtol down tbg, flush w/130 BPW, tbg on vacuum, avg rate 6.5 BPM, avg PSI 35#, max PSI 35#, RD Cudd, release pkr, PU 6 jts to clear balls off perfs, LD 3 jts POOH w/377 jts tbg, SN & pkr



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Barbara J. Bale TITLE Regulatory Analyst DATE 06/19/03

Type or print name Barbara J. Bale Telephone No. (405) 848-8000

APPROVED BY Gary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUN 24 2003

Conditions of approval, if any: