

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 87240
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

RECEIVED

OIL CONSERVATION DIVISION

JUN 02 2008

HOBBS OGD

Form C-103
May 27, 2004

WELL API NO. 30-025-36473
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: HARRIS 3
8. Well Number 1
9. OGRID Number 147179
10. Pool name or Wildcat Bronco; Wolfcamp

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>	7. Lease Name or Unit Agreement Name: HARRIS 3
2. Name of Operator CHESAPEAKE OPERATING, INC.	8. Well Number 1
3. Address of Operator 2010 Rankin Hwy., Midland, TX 79701	9. OGRID Number 147179
4. Well Location Unit Letter <u>I</u> : <u>1925</u> feet from the <u>SOUTH</u> line and <u>660</u> feet from the <u>EAST</u> line Section <u>3</u> Township <u>13 S</u> Range <u>38 E</u> NMPM County <u>LEA, NM</u>	10. Pool name or Wildcat Bronco; Wolfcamp
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,806 GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type <u>STEEL</u> 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

5-8-08 Set 5 1/2" C.I.B.P. @9,500'. Circulate hole w/mud. Spot 25 sx. cmt. on C.I.B.P. @9,500'. Spot 25 sx. cmt. @6,500'. Spot 25 sx. cmt. @4,620'.

5-9-08 Tag & plug @4,410'.

5-12-08 Cut 5 1/2" csg. @2,900'.

5-13-08 Spot 40 sx. cmt. @2,950'. Tag & plug @2,785'. Spot 40 sx. cmt. @2,350'. Spot 40 sx. cmt. @483'.

5-14-08 Tag & plug @348'. Spot 20 sx. cmt. from 60'- surface. Install Dryhole Marker.

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 [Signature] TITLE P & A SUPV. DATE 5-19-08

Type or print name CARY EGLESTON E-mail address: _____

Telephone No. (432) 530-0907

For State Use Only

APPROVED BY [Signature] TITLE OCD DISTRICT SUPERVISOR/GENERAL MANAGER DATE JUN 05 2008

Conditions of Approval, if any: