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 52381

WELL API NUMBER
30-025-38213

5. Indicate Type of Lease
P

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.)

1. Type of Well:O

7. Lease Name or Unit Agreement Name
R L BRUNSON 4

8. Well Number
001

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

4. Well Location
Unit Letter I : 2310 feet from the S line and 500 feet from the E line
Section 4 Township 22S Range 37E NMPM Lea County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3437 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: **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.

1/11/07. Run 26 jts 8 5/8 24# J-55 STC csg set @ 1163. Cemented w/395 sx Prem Plus + additives, tail in w/100 sx Prem Plus + additives. WOC 24 hrs. Circ 110 sx to surf. Tested cmt for 23 mins @ 179 psi-OK.

1/17/07. Run 88 jts 5 1/2 15.5# J-55 STC csg set @ 3940. Cemented w/400 sx 35/65 Poz Cl C + additives, tail in w/400 sx 50/50 Poz Cl C + additives. Circ 55 sx to surf. WOC 18 hrs. Tested csg for 52 mins @ 455-OK. Release United drilling rig #29 @ 4:00 am.**1/9/2007** 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
01/11/07	Surf	FreshWater	11	8.625	24	J-55	0	1163	495	1.75	Prem Plus		179	0	Y
01/17/07	Prod	FreshWater	7.875	5.5	15.5	J-55	0	3940	800	2.03	C		455	0	Y

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 Regulatory Analyst DATE 4/26/2007

Type or print name Brenda Coffman E-mail address bcoffman@chkenergy.com Telephone No. 432-687-2992

For State Use Only:

APPROVED BY: Chris Williams TITLE District Supervisor DATE 4/30/2007 10:16:26 AM