

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 83317

SUNDRY NOTICES AND REPORTS ON WELLS (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.) 1. Type of Well:G 2. Name of Operator CHESAPEAKE OPERATING, INC. 3. Address of Operator P. O. BOX 18496 , OKLAHOMA CITY, OK 731540496 4. Well Location Unit Letter <u>6</u> : <u>660</u> feet from the <u>N</u> line and <u>1980</u> feet from the <u>W</u> line Section <u>4</u> Township <u>21S</u> Range <u>35E</u> NMPM Lea County		WELL API NUMBER 30-025-39053
		5. Indicate Type of Lease S
		6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name CATTLEMAN 4 STATE		
8. Well Number 003		
9. OGRID Number 147179		
10. Pool name or Wildcat		
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3616 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:

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.

10/09/08 THRU 10/11/2008

RUN 7" HCL-80 26# LTC CASING. CEMENT CASING AS FOLLOWS, 20 BBLs. GEL SPACER + 700 SKS. LEAD, INTERFILL H @ 11.9 PPG. & 2.48 YIELD + .25 LBM PHENO SEAL + .1% HR-601, TAIL CEMENT 550 SKA. 50/50 POZ PREMIUM, @ 14.4 PPG. & 1.25 YIELD + .3% HALAAD R-322 + .1% HR 601. DISPLACE W/ 383 BBLs. BRINE @ 10 PPG. BUMPED PLUG @ 790 PSI. WENT 500 OVER. FLOATS HELD. EST TOC-4838'. WOC-18 HRS. TEST BOPE, 250 LOW 5000 HIGH, TESTED ANNULAR TO 250 LOW, 2500 HIGH. TEST CASING TO 3,000PSI. PRESSURE HELD. 9/12/2008 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
09/12/08	Surf	FreshWater	17.5	13.375	48	H-40	0	425	445	1.34	HALCEM	1200		0	
09/23/08	Int1	Brine	12.25	9.625	48	J-55	0	5338	1755	1.99	ECONOCCEM	1500		0	
10/09/08	Int2	Mud	8.75	7	26	HCL-80	4838	10100	1250	2.48	INTERFILL	3000		0	

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 Comp. Spec. DATE 10/20/2008
Type or print name Brenda Coffman E-mail address bcoffman@chkenergy.com Telephone No. 817-556-5825

For State Use Only:

APPROVED BY: Paul Kautz TITLE Geologist DATE 10/20/2008 9:27:36 AM