

791

Andrew J. McCalmont
Asset Manager – Permian Basin

June 27, 2003

RECEIVED

Mr. David Catanach New Mexico Conservation Division 1220 So. St. Francis Dr. Santa Fe, New Mexico 87505 JUN 3 0 2003

Oil Conservation Division

Re: Application for Authorization to Inject WTYSRU #'s 443, 913, 924, 941, & 945 T-20-S, R-33E, N.M.P.M.

Lea County, New Mexico

Dear David:

Please find enclosed for your review Chesapeake's applications to convert the referenced wells in our West Teas Yates Seven Rivers Unit. As required, we have notified offset leasehold owners and the surface owner and put same in the Hobbs-News Sun.

Per the enclosed, we propose to convert 5 additional wells to injection in the Yates Formation. This will greatly enhance our flood pattern and should thus increase hydrocarbon recovery.

Please call if you have any questions or concerns or if you need additional information.

Yours truly,

Andrew J. McCalmont

ander 1. Mc Calut

6/17/03

MAIL LOG OUT

	MAILED			DELIVERY	
TO	DATE	TRACKING NUMBER	PACKAGE	DATE	COMMENTS
			Copies of WTYSRU Wells 443, 913, 924, 941 & 495 C-		
Kenneth Smith	6/12/03	7002 0510 0002 1312 4042	108 applications		
Bob Shelton, Nearburg					
Producing, Inc.	6/12/03	7002 0510 0002 1312 4035	Copy of WTYSRU Well 443 C-108 application		Ì
Don Shackelford,					
Shackelford Oil			Copies of WTYSRU Wells 443, 941 & 945 C-108		
Company	6/12/03	7002 0510 0002 1312 4028	applications		
SE Royalties, Inc.	6/12/03	7002 0510 0002 1312 4011	Copy of WTYSRU Well 913 C-108 application		
Brad James, Pure					
Energy	6/12/03	7002 0510 0002 1312 4004	Copy of WTYSRU Well 945 C-108 application		

S:\NM-TXPAN\Logs\Mail Log.xls

Page 1 of 1

Jun 26 03 09:45a

William A. Chalfant

682-2601





Land Department

June 23, 2003

VIA HAND DELIVERY

Mr. Kenneth Smith Kenneth Smith, Inc. P.O. Box 764 Carlsbad, NM 88220

Re:

WTYSRU Well #443 WTYSRU Well #913 WTYSRU Well #924 WTYSRU Well #941 WTYSRU Well #945 Lea County, New Mexico

Dear Mr. Smith:

Enclosed please find C-108 applications on the captioned wells. Please indicate your receipt of the applications by signing in the space provided and returning this letter to my attention at the address below.

If you have any questions, call Lynda Townsend at (405) 879-9414.

Sincerely,

Chesapeake Exploration Limited Partnership

Sara L. Caldwell

Land Tech

Enclosures

Kenneth Smith received copies of the C-108 applications for the captioned wells.

Signed this 25 day of Tuke 2003

Kenneth Smith

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON D	
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature	☐ Agent
■ Print your name and address on the reverse	x / Max	☐ Addresse
so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name)	C. Date of Deliver
or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from If YES, enter delivery address be	_
	in 120, enter delivery address be	50W. — 110
Mr. Bob Shelton		
Nearburg Producing,Inc. 3300 N. A Street		
Building 2, Suite 120	3. Service Type Zi Certified Mail Express	Mail
Midland, TX 79705	☐ Registered ☐ Return R	eceipt for Merchandis
,	☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Artic 7002 0510 0002 1312 1	4035	LI Tes
(nai	eturn Receipt	102595-02-M-1
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON D	ELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. 8ignature	☐ Agent
■ Print your name and address on the reverse	X Shall Street	☐ Addresse
so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name)	C. Date of Deliver
or on the front if space permits.	D. Is delivery address dispract from	item 1?
1. Article Addressed to:	If YES, enter delivery address by	alow: 🗆 No
SE Royalties, Inc.		§)
P.O. Box 1658	13 V	<u>/</u>
Carlsbad, NM 88221	3. Service Type ☑ Certified Mail ☐ Express	Mail
		ман leceipt for Merchandis
	☐ Insured Mail ☐ C.O.D.	
2. Article Numi	4. Restricted Delivery? (Extra Fee)	☐ Yes
2 - 10 3PF CM N I		
	12 4011	
(Transfer froi 7002 0510 0002 13	12 4011 eturn Receipt	102595-02-M-1
(Transfer froi 7002 0510 0002 13	eturn Receipt	
(Transfer froi 7002 0510 0002 13 PS Form 3811, August 2001 Domestic Re		
(Transfer froi 7002 0510 0002 13 PS Form 3811, August 2001 Domestic Re	eturn Receipt	
(Transfer froi 7002 0510 0002 13 PS Form 3811, August 2001 Domestic Ro SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	COMPLETE THIS SECTION ON D	ELIVERY ☐ Agent ☐ Address
PS Form 3811, August 2001 Domestic Reserved item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	eturn Receipt COMPLETE THIS SECTION ON D	ELIVERY ☐ Agent ☐ Addresse Ç. Date of Delive
PS Form 3811, August 2001 PS Form 3811, August 2001 Domestic Reserved. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	COMPLETE THIS SECTION ON D	☐ Agent☐ Addresse
PS Form 3811, August 2001 Domestic Reserved item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	COMPLETE THIS SECTION ON D A. Signature X B. Received by (Printed Name)	Agent Address C. Date of Delive
PS Form 3811, August 2001 Domestic Reserved. SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	COMPLETE THIS SECTION ON D A. Signature B. Received by (Printed Name) D. Is delivery address different from	Agent Address C. Date of Delive
PS Form 3811, August 2001 Domestic Reserved in the property of the property o	COMPLETE THIS SECTION ON D A. Signature B. Received by (Printed Name) D. Is delivery address different from	Agent Address C. Date of Delive
PS Form 3811, August 2001 Domestic Reserved item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b	Agent Addresse C. Date of Delive () () () () () () () () () (
Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. It article Addressed to: Mr. Brad James	COMPLETE THIS SECTION ON D A. Signature B. Received by (Printed Name) D. Is delivery address different from	Agent Address C. Date of Delive item 1? Yes
PS Form 3811, August 2001 Domestic Reserved to the back of the mailpiece, or on the front if space permits. Circumpted Lands and James Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Mr. Brad James Pure Energy 153 Treeline Park, Suite 220	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b Certified Mail	Agent Address C. Date of Delive item 1? Yes
PS Form 3811, August 2001 Domestic Reserved to the back of the mailpiece, or on the front if space permits. Circumpted items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b 3. Service Type Certified Mail	Agent Address C. Date of Delive item 1? Yes
PS Form 3811, August 2001 Domestic Reserved August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b 3. Service Type Certified Mail Registered Insured Mail Restricted Delivery? (Extra Fee)	Agent Address C. Date of Delive item 1? Yes Plow No
PS Form 3811, August 2001 Domestic Reserved. SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b 3. Service Type Certified Mail Registered Insured Mail Restricted Delivery? (Extra Fee)	Agent Address C. Date of Delive item 1? Yes No Mail leceipt for Merchandis
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 PS Form 3811, August 2001 Domestic Re	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b 3. Service Type Certified Mail Express Registered Return F Insured Mail CO.D. 4. Restricted Delivery? (Extra Fee)	Agent Address C. Date of Delive item 1? Yes Phow No Mail Deceipt for Merchandia
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 PS Form 3811, August 2001 Domestic Reserved.	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b 3. Service Type Certified Mail Registered Insured Mail A. Restricted Delivery? (Extra Fee)	Agent Address C. Date of Delive item 1? Yes Phyw No Mail Receipt for Merchandis
PS Form 3811, August 2001 Domestic Research SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b 3. Service Type Certified Mail Express Registered Return F Insured Mail CO.D. 4. Restricted Delivery? (Extra Fee)	Agent Address C. Date of Delive item 1? Yes Plow No Mail Receipt for Merchandis
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 PS Form 3811, August 2001 Domestic Rosenberg: Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	COMPLETE THIS SECTION ON D A. Signature B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b Certified Mail	Agent Addresse C. Date of Delive L. D. Yes No Mail Addresse 102595-02-M-1
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 PS Form 3811, August 2001 Domestic Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b 3. Service Type Certified Mail Registered Insured Mail A. Restricted Delivery? (Extra Fee)	Agent Addresse C. Date of Delive L. D item 1? Yes Plow No Mail Receipt for Merchandis Yes 102595-02-M-1 Agent Addresse
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 PS Form 3811, August 2001 Domestic Reserved. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	COMPLETE THIS SECTION ON D A. Signature B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b Certified Mail	Agent Address C. Date of Deliver Address C. Date of Deliver Agent Deceipt for Merchandis De
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 PS Form 3811, August 2001 Domestic Reserved. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	COMPLETE THIS SECTION ON D A. Signature B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b 3. Service Type Certified Mail	Agent Address C. Date of Deliver item 1? Yes Proposition Agent Yes Agent Addresse C. Date of Deliver Addresse C. Date of Deliver Yes
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 PS Form 3811, August 2001 Domestic Rosenberg: Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	COMPLETE THIS SECTION ON D A. Signature B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b Certified Mail	Agent Addresse C. Date of Delivery item 1? Yes Power of Merchandis Agent Yes 102595-02-M-1 Addressed C. Date of Delivery Tem 1? Yes
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 2. 7002 0510 0002 1312 400 PS Form 3811, August 2001 Domestic Reserved. SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Don Shackelford	COMPLETE THIS SECTION ON D A. Signature B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address b Certified Mail	Agent Address C. Date of Deliver item 1? Yes Proposition Agent Yes Agent Addresse C. Date of Deliver Addresse C. Date of Deliver Yes
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. PS Form 3811, August 2001 Domestic Rosenberg: Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Don Shackelford Shackelford Oil Company	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address be Registered Insured Mail Co.D. 4. Restricted Delivery? (Extra Fee) COMPLETE THIS SECTION ON DEAD A. Signature B. Received by (Printed Name) D. Is delivery address be A. Signature D. Is delivery address be A. Signature	Agent Addresse C. Date of Delivery item 1? Yes Power of Merchandis Agent Yes 102595-02-M-1 Addressed C. Date of Delivery Tem 1? Yes
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Treeline Park, Suite 220 San Antonio, TX 78209 Attach this card to the back of the mailpiece, or on the front if space permits. Domestic Reserved. Print your name and address on the reverse so that we can return the card to you. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Don Shackelford Shackelford Oil Company P.O. Box 10665	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address be Return Fellowery Restricted Delivery? (Extra Fee) COMPLETE THIS SECTION ON DEAD A. Signature B. Received by (Printed Name) A. Signature B. Received by (Printed Name) If YES, enter delivery address be Delivery address b	Agent Addresse C. Date of Delivery item 1? Yes Power of Merchandis Agent Yes 102595-02-M-1 Addressed C. Date of Delivery Tem 1? Yes
PS Form 3811, August 2001 Domestic Reserved. SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Mr. Brad James Pure Energy 153 Treeline Park, Suite 220 San Antonio, TX 78209 PS Form 3811, August 2001 Domestic Reserved. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Don Shackelford Shackelford Oil Company	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address be Certified Mail Grant House Ho	Agent Addresse C. Date of Delivery item 1? Yes Power of Merchandis Agent Yes 102595-02-M-1 Addressed C. Date of Delivery Tem 1? Yes
PS Form 3811, August 2001 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Treeline Park, Suite 220 San Antonio, TX 78209 Attach this card to the back of the mailpiece, or on the front if space permits. Domestic Reserved. Print your name and address on the reverse so that we can return the card to you. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Mr. Don Shackelford Shackelford Oil Company P.O. Box 10665	B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address be entered by (Printed Name) 3. Service Type Certified Mail Express Registered Return F Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Complete This Section on Delivery address be entered by (Printed Name) A. Signature D. Is delivery address different from I If YES, enter delivery address be entered by (Printed Name) Complete This Section on Delivery address be entered by (Printed Name) Complete This Section on Delivery address be entered by (Printed Name) Complete This Section on Delivery address be entered by (Printed Name) Complete This Section on Delivery address be entered by (Printed Name) Certified Mail Delivery address be entered by (Printed Name)	Agent Address C. Date of Deliver item 1? Yes Show Agent 102595-02-M-1 Agent Addresse C. Date of Deliver Addresse C. Date of Deliver No Agent No Agent No No No Agent No

• Sender: Please print your name, address, and ZIP+4 in this box •

Chesapeake Operating, Inc. P.O. Box 18496 Oklahoma City, OK 73154-0496

Attn: Sara Caldwell

1**0** 7

UNITED STATES POSTAL SERVICE

MIDLAND/DDESSA

TX 750 05/17/

rirst-Class Mail
Rostage & Fees Paid
USPS
Permit No. G-10

Sender: Please print your name, address, and ZIP+4 in this box

Chesapeake Operating, Inc. P.O. Box 18496 Oklahoma City, OK 73154-0496

Attn: Sara Caldwell

ıØ 7

UNITED STATES POSIAL DERVICE

PM B

.1ist-Class Mail Postage & Fees Patc USPS Permit No. G-10

Sender: Please print your name, address, and ZIP+4 in this box

Chesapeake Operating, Inc. P.O. Box 18496 Oklahoma City, OK 73154-0496

Attn: Sara Caldwell

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

Sender: Please print your name, address, and ZIP+4 in this box

Chesapeake Operating, Inc. P.O. Box 18496 Oklahoma City, OK 73154-0496

Attn: Sara Caldwell

June 5, 2003

RECEIVED

To Whom It May Concern:

JUN 3 0 2003
Oil Conservation Division

Re:

WTYSRU Well #443 - West Teas Field

660' FEL – 1855' FSL Sec 4-T20S-R33E

Lea County, New Mexico

Chesapeake Energy, Inc. is making application to convert the #443, an oil well, to injection in an effort to further our recovery at the previously approved West Teas Yates Seven River Unit (Order # R-11375). Water will be injected into the Yates Sand interval per the attached schematic. There are no known oil or gas bearing zones relatively close to the unitized formations which could be affected by this proposed conversion. A copy of the application is enclosed which we anticipate will be administratively approved.

As one who may be affected by this application, we are notifying you of your right to participate in this process, including the right to provide evidence to the NMOGCD either in support or in opposition to the application. Interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days of receipt of this notice. If you desire more information, you may contact Andrew McCalmont at (405) 879-7852.

Very truly yours,

Sule 1. MI Cod

Andrew McCalmont
Asset Manager – Permian Basin

Chesapeake Energy, Inc.

STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, New Mexico 87505

FORM C-108 Revised 4-1-98

APPLICATION FOR AUTHORIZATION TO INJECT

I.	PURPOSE: Secondary Recovery Pressure Maintenance Disposal Storage Application qualifies for administrative approval? Yes No
II.	OPERATOR: Chesapeake Energy Inc.
	ADDRESS: PO Box 18496 Oklahoma City, Ok 73154 - 0496
	ADDRESS: PO Box 18496 Oklahoma City, Ok 73154 - 0496 CONTACT PARTY: Andrew McCalmont PHONE: 405-679-7852
III.	WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.
IV.	Is this an expansion of an existing project? Yes No If yes, give the Division order number authorizing the project: R-11375
V.	Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
VI.	Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
VII.	Attach data on the proposed operation, including:
*VIII.	 Proposed average and maximum daily rate and volume of fluids to be injected; Whether the system is open or closed; Proposed average and maximum injection pressure; Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and, If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.). Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total disposal solids concentrations of 10 000 mg/l or less) and the proposed injection zone and lineating the geologic name.
	total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.
IX.	Describe the proposed stimulation program, if any.
*X.	Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).
*XI.	Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
XII.	Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
XIII.	Applicants must complete the "Proof of Notice" section on the reverse side of this form.
XIV.	Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
	NAME: Andrew McCalmont TITLE: Asset Manager
	NAME: Andrew McCalmont TITLE: Asset Manager SIGNATURE: DATE: 6/5/03
*	If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: (45e No. 12272, Order No. R-11375, 5/18/2000)

PROPOSED WELLBORE SCHEMATIC CHESAPEAKE OPERATING INC

WELL

: WTU #443

FIELD

: WEST TEAS

COUNTY

: LEA

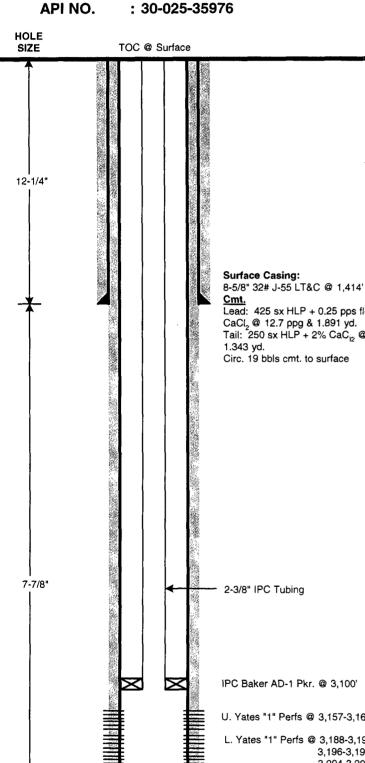
STATE: NM

LOCATION : 660' FEL & 1,855' FSL OF SECTION 4-T20S-R33E

ELEVATION: GL 3,559' RKB 3,575' DF 3,574'

Chesapeake

30-025-35976



Well History

3/6/03: Spud Well @ 7:00 pm

3/09/03: Spud Well @ 7.00 ptt 3/09/03: Run 33 Jts. 8-5/8" surface csg; cmt. to surface 3/13/03: Run OH logs & take sidewall cores. LDDP. 3/14/03: Run 5-1/2" production casing; cmt. to surface 3/15/03: Release Drilling Rig @ 3:00 am

3/19/03: RIH w/ GR; tag bottom @ 3,389'. Log well.
4/7-18/03: RU BOP. Load hole w/ 2% KCl. Perf U. Yates 1
3157-65' (9 holes) & L. Yates 1 3188-91', 3196-99', 3204-07' &
3214-17' (16 holes total). Acidize w/ 1000 gals. 15% NeFe w/
25 BS. Frac Yates 1 w/ 40,000 gal gelled borate + 80,000# 20/ 40 sand. ISIP 7 psi. CO w/ foam unit to 3218' (bridge); CO, tag sand @ 3231'. CO to PBTD, circ 2 hrs. Rec. 10 BO while circ. RIH w/ tbg. string, rods & pump. Load well, test to 500 psi, good pump action. RDMO.

Lead: 425 sx HLP + 0.25 pps flocele + 2% CaCl₂ @ 12.7 ppg & 1.891 yd.
Tail: 250 sx HLP + 2% CaC_{l2} @ 14.8 ppg &

Circ. 19 bbls cmt. to surface

2-3/8" IPC Tubing

IPC Baker AD-1 Pkr. @ 3,100'

U. Yates "1" Perfs @ 3,157-3,165 (1 spf, 9 holes)

L. Yates "1" Perfs @ 3,188-3,191 (1 spf, 4 holes) 3,196-3,199 (1 spf, 4 holes) 3,204-3,207 (1 spf, 4 holes) 3,214-3,217' (1 spf, 4 holes)

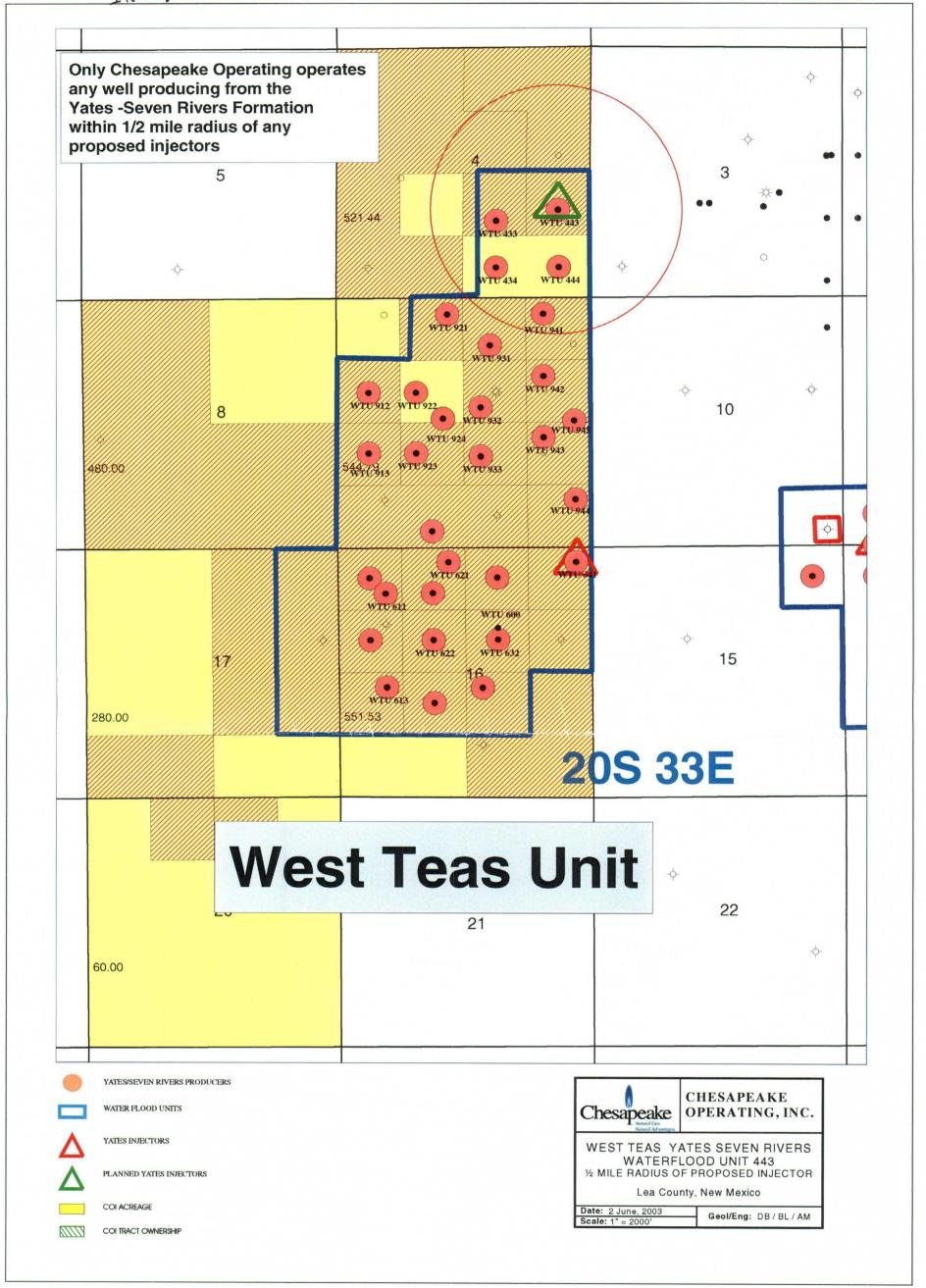
PBTD @ 3,389'

Production Casing: 5-1/2" 15.5# J-55 LT&C @ 3,460"

Lead: 550 sx HLP + 0.25 pps flocele + 2% CaCl₂ @ 12.4 ppg & 1.891 yd. Tail: 270 sx 50:50 Poz + 2% CaCl₂ @ 14.2 ppg & 1.343 yd.

Circ. 26 bbls cmt. to surface

PREPARED BY: Ginni A. Kennedy	DATE: 6/6/03
UPDATED BY:	DATE:



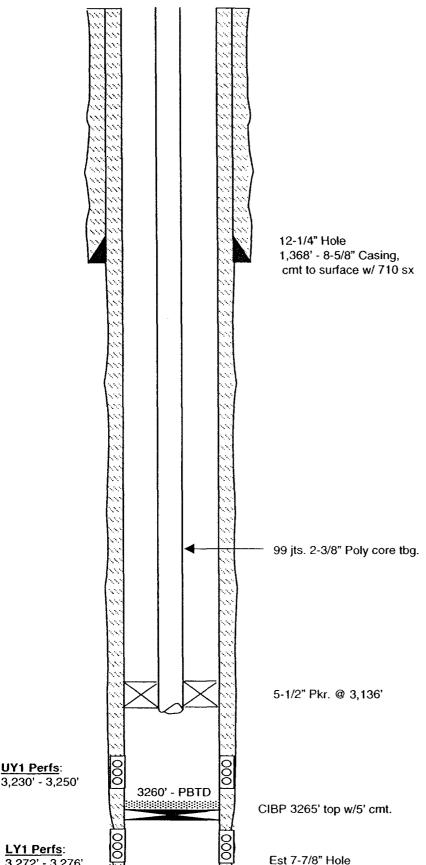
Date: 06/03/2003

Author: Brian Weaver

WTU 443 - C108 - Item VI Wellbore Schematic/Data Tabulation

	Well Name	Prior Name	Location	Status
1	WTU 433	Anasazi 4 #3	4A-20S-33E	Injecting
2	WTU 434	Scharbauer 4#1	4O-20S-33E	Producing
3	WTU 444	Scharbauer 4#3	4P-20S-33E	Producing
4	WTU 941	Federal 9 #5	9F-20S-33E	Producing
7	US Government #1	NA	3M-20S-33E	P&A

Chesapeake Operating, Inc.



WTU #433 **Injection Well**

(Anasazi "4" State #3) West Teas Field "J" Section 4, T20S, R33E Lea County, New Mexico GL: 3,556'; KB 3,573'

Initial Completion

Spud well 11-08-94 12/19/94

Perf LY1 3272-76, 3288-92,' 4 spf (32) Perf UY1 3230-50' 4 spf (40) Isolate 3288-92 swab dry, Isolate 3272-76' swab dry, Acidize 3272-76' w/400 gal 7.5% HCl (poss. Commun. w/3288-92') Acidize 3246-50' Swab 3272-76' acid wtr + fm wtr Swab 3230-50' little inflow w/tr. Oil Set CIBP @3268', Frac 3230-50' w/ 7942 gal. XL gel 47000# 20/40 Brady @2-12 ppg, (began screen-out) Drill out CIBP @3268', POP IPP: 41 BOPD; 27 BWPD, 15 MCFD 6/5/96

Set CIBP @3265' Re-Frac w/ 19800 gal YF-120, 119400# 20/40 IPP 8 BOPD, 69 BWPD

4/11/02

Hole in tubing

POOH w/ pump, rods & 2-3/8" tbg., test tbg to 5000 psi above slips, chg. out 5 its. & 50 rod boxes, hang well on, RDMO.

5/1/03 - 5/03/03

Convert to WIW.

LD pump, rods & tbg. RIH w/ 4-3/4" bit & tbg. to 3200', RU foam unit & CO to 3260', circ. 2 hrs. RD foam unit, POOH, RIH w/ 5-1/2" pkr. to 3,200'. Test to 500 psi, go up to 750 psi & bust hole in tbg. POOH w/ tbg. & pkr; replace bad it., RIH w/ tbg & pkr; attempt to set pkr @ 3,165'; no success; set pkr. @ 3,136'. Test csg. to 450 psi for 30 mins. for state MIT. Pump 24 bbls. Ne-Fe acid & 60 BPW @ 2-1/2 BPM & 1100 psi. SD, went on vacuum. RDMO.

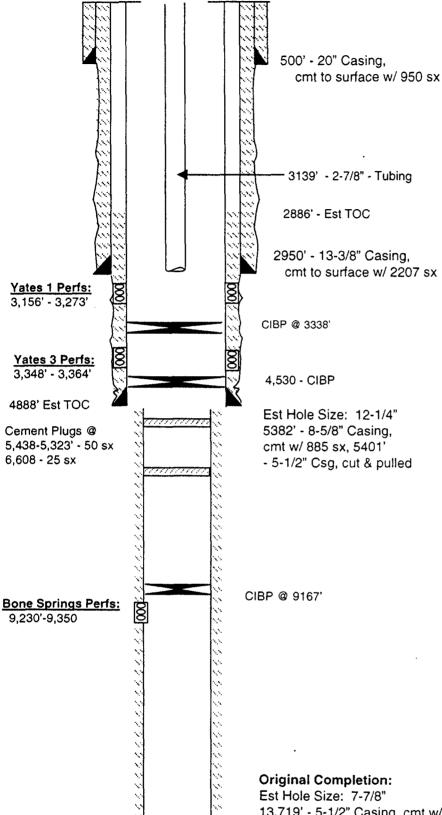
Cement circulated was estimated by calculations.

LY1 Perfs:

3,272' - 3,276' 3,288' - 3,292'

3,550' - 5-1/2" Casing, cmt w/780 sx Class Cmt to surface, circ approx 301 cu ft

Falcon Creek Resources, Inc.



WTU #434

(Scharbauer "4" #1)
West Teas Field
"O" Section 4, T20S, R33E
Lea County, New Mexico
GL: 3,556'; KB 3,574'

Initial Completion:

Spud 4/93

Perf Bones Springs 9,230' - 9,350' IPP: 65 BO, 60 MCFD, 201 BWPD 1/94 Perf Y3 from 3348'-3364' (1sp2f) Acidize w/ 1000 gals 7-1/2% NeFe Swab 94 of 86 Bbl load w/ no shows Set CIBP @3338'

2/94

Perf Y1 from 3,156-64', 3,174-90', 3200-08', 3218-24', 3233-37', 3244-52', 3261-65', 3269-73' (1 spf) Acidize w/ 2600 gal 7.5% NeFe, swab 7 runs, rec 24 BW, 0.5 BO, last pull 25% oil Frac w/ 53,000 gal GW 171,000# 12/20 Brady to 9 ppg, AIR 30 BPM, AIP 1570 psi, ISIP 1480, force closed IPP: 104 BOPD, 14 MCFD, 28 BWPD 10/94 500 gal 15% HCl dump job for scale buildup (3 jts full 9/94) 9/96 Heavy paraffin, 1 jt full par & scale 9/99 Bailed 46' (sd?), acidized w/4000 gal 15% HCl, 7 BPM

All Cement information is estimated by calculations

Est Hole Size: 7-7/8" 13,719' - 5-1/2" Casing, cmt w/ 1300 sx TD = 13,720'

Falcon Creek Resources, Inc.

WTU #444 (Scharbauer "4" #3) West Teas Field "P" Section 4, T20S, R33E Lea County, New Mexico GL: 3,560'; KB 3,570'

Initial Completion

Spud well 9-7-95
Perf Yates 3 from 3263'-3279'
Acidize w/ 2000 gal 7.5% NE-Fe
After load rec. swab 0.18 BO,
24 BW in 4 HR, Set CIBP @ 3230'
Perf Yates from (1 spf) 3104-3132',
3154, 56, 60, 62, 64, 66, 68, 70, 72,
78, 80, 86, 3188'
Acidize w/ 3000 gal 7.5% NeFe
Frac w/ 37016 gal 150,580 # sd
IPP: 98 BOPD, 4 BWPD, 14 MCFD

All Cement Information is Estimated by Calculations

10/18/01: Off. Clean free sand of bester

3190-3225'. RIHMIVEL to 3082'.

Pump 500 sall ky on vac. At w/ 2000 sal

15'h NEFE D 4 BPM on vac. Swoll beck.

PWOP- found cromped 10 mt. Pwor
wont pump. POOH-sand/paratin Swob to

2/4/02: Az L/500 gal

1,354' - 8-5/8" Casing, cmt to surface w/700 sx

Yates 1 Perfs: 3,104' - 3,188'

Yates 3 Perfs: 3,263' - 3,279'

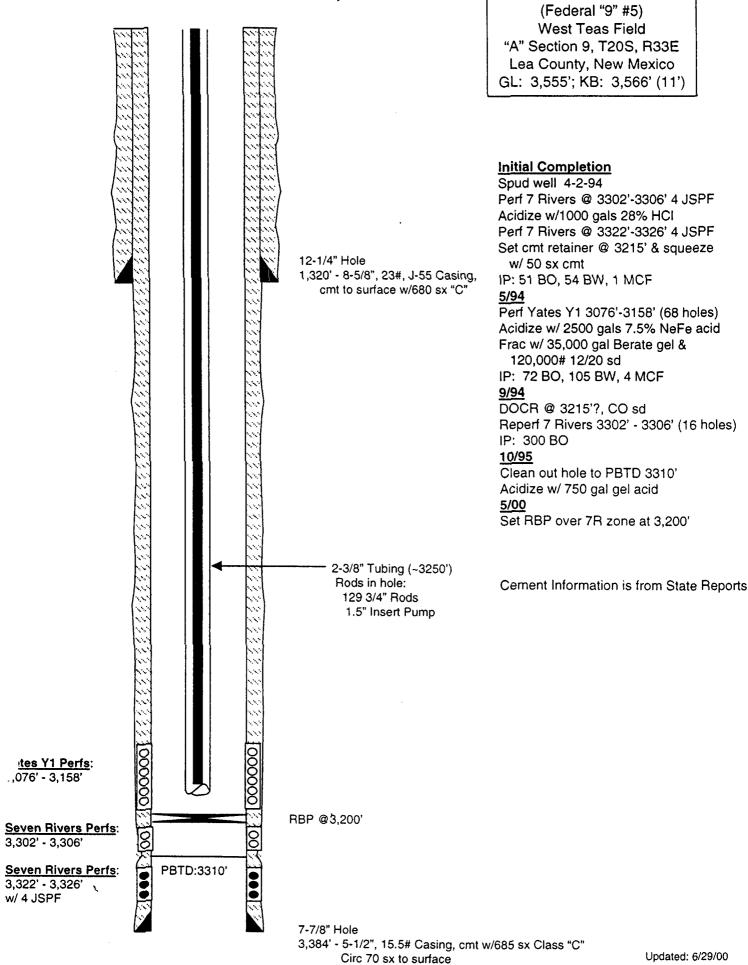
Est Hole Size: 7-7/8"

CIBP (3230'

3,373' - 4-1/2" Casing, cmt w/815 sx Class Cmt to surface, circ 189 cu ft to surface

WTU #941

Falcon Creek Resources, Inc.



(OPR	LEA,N.M. ROGER C. H U. S. GOVE Sec 3, T-2	ANKS_ RNMEN	(WICHITA	A FA	LLS)	v	VELL NO.	1	
	CTR	8-18-66 Roy Smith		C. R	.SPL.S		KT_E	LEV D. F	. <u>8-</u> 3	1592 ¹ 1581 ¹
		60' Anh Peo								
	PAY ZON	E TOP PAY	PRODUCI	NG INTERVAL	1	<u></u>	<u>~~</u>	BSaw	HRS	TEST BASIS
			P	LUGGED	. Al	ANDONED				
	CHOKE	GOR	GTY	СР	TP	POT D	ATE		TRE	ATMENT
	ļ							 -		
		t								
		PKR RECORD /8 - 312 -		EACHED T.	D.					
. •		LEA,N.M.						RIVE	<u>us)</u>	-1 -
	DATE I	GER C. HAN		U.S. GO	UVER	INMENT		SPL (L	~	2' DF
		3460' Anhy			8-22	2-66	[~	Yates		
		395-3460,	Rec 64	anhy	& 8		5	Salt ((1546)
				(9-9-66	۷			B/Salt		
								<u>Yates</u>	(329	10)
									-	
								· · · · · · · · · · · · · · · · · · ·		
		<u> </u>								
				Subsurfee		rary				
(P. O. Box Midland, "						
	′ ——						-+			

ار	MALCO REFINERIES, Inc. SCOUT REPORT	Bonst Dist. Na
0	COMPANY Redricts & Swith County Les Stee Mexico	WELL NO. PARK Trigg Federal
	Squit 1-27-57 Comp 2-26-57 Common Clare of Market 21. D. 7. 3566	3500' Test. (-10-52 RURT FEB 6 (0.55 RB
	FORMATIONS: Provinced	FEb 20 / 3015 00
	TA TX 35.44 BX 2990	FER 27 TD JUIC IS POLA WAR - 6 Hold for type
	152 1925 160 +1+3	355
	TGS TSA TGI	
1	T Abe T Ruses	
9	T. Penn. T. Mins. T. Dev.	
(.	T. Nort. T. Simp. T. NcKee	
	T. Pre-Cam.	
	Stade 640	
	<u>8/</u> 8/	CASING & CRMENT COMPLETION RECORD
1	8 <i>i</i> 8 <i>i</i>	Sine Depth Sax T. D. 7455 / SPB 13 34 95 50 T. P.
	<u>H</u>	1024 488 set 1997 Pg H 975 910 set 1945 a. 9
		10 1/4 486 Set STPT P 9 17 P 75: 910 Set Thing Ca. Pucher Prof. SHOOTING RECORD Gal. Interest Town Gal. Interest Town Cal. Interest Town C
	Grev. GOR	Qua From Cal From 2
~	PCP SICP	Qu From Gal Zone

The Subsurface Library
P. O. Box 942
Midland, Texas

WTU 443 - C108 - Item VII

- 1. The average daily rate will approximate 500 BWPD, a maximum rate of 750 BWPD, total volume will approach 1 million bbls.
- Per the unitization hearings and the original order, this system is closed.
- 3. Average pressure will approach 600 psi. Maximum authorized pressure is currently .2 psi per foot or approximately 600 psi.
- Water is reinjected from unitized zones
- 5. NA.

WTU 443 - C108 - Item IX

The Yates is typically stimulated as follows:

- 1. Tie onto casing. Establish rate and bull head 1000 gallons of 15% NeFe acid into the Yates '3'. Launch 14 balls throughout job. Note rates and pressures. Surge balls off perfs. Fracture the Yates '3' with 20,000 gal of gelled borate containing 40,000# of 20/40 sand per the attached treatment schedule. Maintain rates approaching 30 BPM, max pressure 4000 psi.
- Set a CIBP @ 3,200'. Run casing gun and perforate the Yates '2' 3,142 – 3,170' (28') w/ 1 SPF, 23 gram charge, 60 degree phasing.
- Tie onto casing. Establish rate and bull head 1000 gallons of 15% NeFe acid into the Yates '2'. Launch 28 balls throughout job. Note rates and pressures. Surge balls off perfs. Fracture the Yates '2' with 40,000 gal of gelled borate containing 75,000# of 20/40 sand per the attached treatment schedule. Maintain rates approaching 30 BPM, max pressure 4000 psi.
- Set a CIBP @ 3,130'. Run casing gun and perforate the Yates '1L' 3,082 3,115' (33') and Yates '1U' 3,038 3,159' (21') w/ 1 SPF, 23 gram charge, 60 degree phasing.
- 5. Tie onto casing. Establish rate and bull head 1000 gallons of 15% NeFe acid into Yates '1'. Launch 54 balls throughout job. Note rates and pressures. Surge balls off perfs. Fracture the Yates '1' with 40,000 gal of gelled borate containing 75,000# of 20/40 sand per the attached treatment schedule. Maintain rates approaching 30 BPM, max pressure 4000 psi.



Geology Department

May 6, 2003

To: Andrew McCalmont
Assett Manager
Chesapeake Energy Corporation.

Having reviewed all pertinent geologic data within 2 miles of the West Teas Yates - Seven Rivers Unit, it is my opinion that there is no evidence of open faults or any hydrologic connection between the Yates-Seven Rivers Reservoirs and any known underground sources of drinking water.

Sincerely,

Doug Bellis Geologist

Chesapeake Energy Corporation

AFFIDAVIT OF PUBLICATION

State of New Mexico, County of Lea.

I, KATHI BEARDEN **Publisher** of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not a supplement thereof for a period. weeks. Beginning with the issue dated May 16 __ 2003 and ending with the issue dated May 22 **Publisher** Sworn and subscribed to before 22nd me this_ day of Notary Public.

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937, and payment of fees for said publication has been made.

My Commission expires

October 18, 2004

(Seal)

LEGAL NOTICE May 16, 17, 18, 20, 21, 22, 2003

PROPOSED INJECTION WELLS

Chesapeake Operating, Inc. proposes the conversion of the following described wells to water injection service for the existing waterflood Order No. R-11375; West Teas (Yates Seven Rivers) Unit 913, 1980' FSL & 660' FWL, Section 9-20S-33E, West Teas (Yates Seven Rivers) Unit 941, 330' FNL & 990' FEL, Section 9-20S-33E, West Teas (Yates Seven Rivers Unit 443, 1650' FSL & 660' FEL, Section 4-20S-33E, West Teas (Yates Seven Rivers Unit 924, 2560' FNL & 2210' FWL, Section 9-20S-33E, West Teas (Yates Seven Rivers 9452612' FNL & 330' FEL. All wells are located in Lea County, New Mexico. The zones to be injected into are the Yates Sand from 3000' to 3300' with a maximum injection rate of 600 BWPD/well at a maximum pressure of 600 psi. Any interested parties with objection or request for hearing should notify the Oil Conservation Divsion at P.O. Box 2088, Santa Fe, New Mexico 87501 within 15 days of this notice. Any questions should be directed to Andrew McCalmont, Agent for Chesapeake Operating, Inc., at P.O. Box 18496, Oklahoma City, OK 73118, telephone number 405-848-8000, ext. 7852. #19820.

01104307000 02563986 Chesapeake Operating, Inc. P.O. Box 18496 Oklahoma City, OK 73154-0496

Form 9- 631 (May 1963)	DEPARTI	UN ED STATES MEN I OF THE IN MEDICE SURVI	TERIOR 🖁	UBMIT IN TRI Other instruction erse side)	(P) TE*	5. LEASE	Form approved. Budget Bureau No. DESIGNATION AND S. -62479	
(Do not use th	is form	TION FOR PERMIT—" for	plug back to	a different reserv	voir.	301	IAN, ALLOTTER OR T IE Greement hamr	RIBE NAME
OIL GAS WELL WELL 2. NAME OF OPERATOR		DRY				4Ott		· - · · · · ·
ROGER C. I	HARKS					. 	. COVERNME	NT
3. ADDRESS OF OPERAT		a iidabidaa Pa	.13 <i>a</i> 17a	жав 763	י זמו	9, WHILL		
4. LOCATION OF WELL See also space 17 b At surface	(Report location c	Tearly and in accordance wi	th any State re			10: FIBLE 11: 886,	AND POOL, OR WILL LICAT T., E. M., OR BLE. AL	
1980' FEL	and 1980	• FML of the	Section				BVHY OR AND A	
14. PERMIT NO.	4 0 11 66	15. ELEVATIONS (Show who	ether DF, ST, GR,	ets.)		12. 600N	TY OR PARISH 13.	
Ltr. date 16.		propriate Box To India	ate Nature	of Notice. Re	port, or C			MENT
	NOTICE OF INTEN				• •	DÖT REPOR		
TEST WATER SHUT	-OFF	PULL OR ALTER CASING]	WATER SHUT-OFF	. [_		REPAIRING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE	_	FRACTURE TREAT	MENT		ALTERING CARING	
SHOOT OR ACIDIZE	11	ABANDON*	-1 1	SHOOTING OR ACI	DIZING]	ABANDON MENT	X
REPAIR WELL (Other)	<u> </u>	CHANGE PLANS	-	(Other)	port results	of mutilia	e completion pri-Wet and Leg form.	- <u> </u>
17. DESCRIBE PROPOSED	OR COMPLETED OPE	RATIONS (Clearly state all penally drilled, give subsurface	ertinent details	and give perti	nent detes	including	estimentad deta at a	terting on
nent to this work.	.) •	nany drined, give subsurtac	ce rocations and	ı measured and	true vertica	n gebrüs Ac		*
					5 37 3			e.
			4 . m. 75 m.A.	. 0 20				• : • • • • • • • • • • • • • • • • • •
Spud Date	\$ 8-16-6	e sinda	rud nate	8-22	-60			1
Summary:	Well was	drilled to de	epth of	3460' (1	orille	r) .	2 - 4 2 差	
•		ity was encour						
	A 65' CO	re of 100% and	hydrite	was rec	overed	ILOB	interval	
		ov structural	positio	on of the	e well	. it 1	rada abando	ned
		further drill:		,				
		hlumberger Gau		Sonic Le	og.			
			* ***					
	Plug #1 #2	3410'-3240' 3225'-3025'	170 ·	70 sx.		,	• ជា ជីគីទ្	
		1420'-1220'		60 sx.			1 112	
	#4	350'- 250'		30 sx.	-	No.		
	₩5	25'0-'	25'	10 sx.				
					:			
					:	. San		
18. I hereby certify the	t the females la	tune and comment			·	3 9 3		
signing to	$\sim 100 \text{ L}$	5 ().	Owner (- Operate	35	DA'	· 1]=[\$-6	
(This space for Fed	deral or State offic	e use)				WEN		
APPROVED BY	ADDROVAT	TITLE	l	<i>F</i>	\PPR(DA	ra)	
CONDITIONS OF A	affauvali, If A	NI:		ĺ	NOV 1	7 1056		

~ (1.2

reight for somers box le Interns Mature of Mories

and had been been a

gatairin

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or aggletic by any State, on all lands in such State, pursuant to applicable State law, and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or negrous, the local, Federal and/or State office. ಚಾಗಳು

dem 1 LP hopsasis to abandon a well and subsequent reports of abandonment should include such special information as its required by local Federal and for State offices.

In stall to include properts and subsequent reports of abandonment about the subsection of parting of any easing, liner or tubing purper and the depth to the purper of the abandonment.

In subsection looking to approve of the abandonment of the subsection of desing to of well; and date well site confillence of the subsection of subsection of the subsection of t Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Rederal requirements. State or Rederal office for specific instructions.

Beerge & Commence of the Section of the Commence of the Commen

RIBHIGHT TOISTERN ARTESA

L GORDON