

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS**
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.5. Lease Serial No
NMNM95630

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No
CROW FLATS 14-16-28 USA 5H

2. Name of Operator

CHESAPEAKE OPERATING INC

Contact: LYNDEE SONGER

E-Mail: lyndee.songer@chk.com

9. API Well No.

30-015-39509-00-X1

3a. Address

OKLAHOMA CITY, OK 73154-0496

3b. Phone No. (include area code)

Ph: 405-935-2411

10. Field and Pool, or Exploratory
CROW FLATS

4. Location of Well (Footage, Sec, T, R, M, or Survey Description)

Sec 14 T16S R28E NWNW Lot D 660FNL 200FWL

11. County or Parish, and State

EDDY COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Chesapeake is requesting the following:

Chesapeake intends to use an armored coflex hose rated to 10K psi working pressure and hydro-tested to 15K psi to run from the BOP to the choke manifold. Attached is the test form. The BOP and choke manifold will be a 5K psi system that will be tested and used as a 3K psi system as stated in the approved APD. This coflex hose will also be tested to 3K psi after nipple up along with the BOP and choke manifold.

(CHK PN 639443)

Accepted for record

NMOCD

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

RECEIVED

DEC 09 2011

NMOCD ARTESIA

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #123865 verified by the BLM Well Information System

For CHESAPEAKE OPERATING INC, sent to the Carlsbad

Committed to AFMSS for processing by KURT SIMMONS on 11/23/2011 (12KMS0418SE)

Name (Printed/Typed) LYNDEE SONGER

Title REGULATORY COMPLIANCE ANALYST

Signature (Electronic Submission)

Date 11/22/2011

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By CHRISTOPHER WALLS

Title PETROLEUM ENGINEER

Date 12/05/2011

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office Carlsbad

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

M I D W E S T
HOSE AND SPECIALTY INC.

INTERNAL HYDROSTATIC TEST REPORT			
Customer: CACTUS		P.O. Number: ASSET#M10712	
HOSE SPECIFICATIONS			
Type: CHOK & KILL		Length: 35'	
I.D. 4" INCHES		O.D. 8" INCHES	
WORKING PRESSURE 10,000 PSI	TEST PRESSURE 15,000 PSI	BURST PRESSURE PSI	
COUPLINGS			
Type of End Fitting E4.0X64WB			
Type of Coupling: 4 1/16 10K FLANGE			
PROCEDURE			
<i>Hose assembly pressure tested with water at ambient temperature</i>			
TIME HELD AT TEST PRESSURE 1 MIN.		ACTUAL BURST PRESSURE: 0 PSI	
COMMENTS: ASSET#M10712			
Date: 9/29/2010	Tested By: BOBBY FINK		Approved: MENDI JACKSON

Co-Flex line
Conditions of Approval

Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be swapped with a hose of equal size and equal or greater pressure rating. Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review. If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).