Form 3160-5 (Augi, #2007)

UNITED STATES DEPARTMENT OF THE INTERIOR

OCD Artesia
-s/a

FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010

. В	UREAU OF LAND MANA	GEMENT		4.		July 31, 2010		
SUNDRY	5. Lease Serial No. NMLC068431							
Do not use thi abandoned we	6. If Indian, Allottee	or Tribe Name						
SUBMIT IN TRI	7. If Unit or CA/Agreement, Name and/or No. 891000303X							
1. Type of Well — Gos Well — Oth	8. Well Name and No PLU REMUDA B	3ASIN 4 24 30 USA 1H						
Oil Well Gas Well Oth Name of Operator	N		9. API Well No					
CHESAPEAKE OPERATING			30-015-40660-					
3a. Address		3b. Phone No. Ph: 405-935	(include area co 5-2896	ode)	10. Field and Pool, o UNDESIGNAT			
OKLAHOMA CITY, OK 73154 4. Location of Well (Footage, Sec., 7		<u> </u>	11 County on Bonish	and State				
Sec 4 T24S R30E NENE 175		11. County or Parish, and State EDDY COUNTY, NM						
12. CHECK APPI	ROPRIATE BOX(ES) TO	O INDICATE :	NATURE O	F NOTICE, R	EPORT, OR OTHI	ER DATA		
TYPE OF SUBMISSION		OF ACTION						
Notice of Intent	Acidize	□ Deep	en	□ Produc	tion (Start/Resume)	Water Shut-Off		
_	☐ Alter Casing	□ Fract	ure Treat	□ Reclan	nation	□ Well Integrity		
☐ Subsequent Report	☐ Casing Repair	_	Construction	□ Recom		Other Change to Original		
☐ Final Abandonment Notice	☐ Change Plans ☐ Plug and Aband			_	rarily Abandon	PD PD		
	Convert to Injection	□ Plug		□ Water	=			
13 Describe Proposed or Completed Op If the proposal is to deepen direction. Attach the Bond under which the wo following completion of the involved testing has been completed Final Al determined that the site is ready for f	ally or recomplete horizontally, ork will be performed or provide d operations. If the operation re bandonment Notices shall be fil	give subsurface lost the Bond No. on sults in a multiple	ocations and me file with BLM/ completion or	easured and true v BIA Required so recompletion in a	vertical depths of all pert absequent reports shall be a new interval, a Form 3	tinent markers and zones be filed within 30 days 160-4 shall be filed once		
CONFIDENTIAL						•		
CHK would like to state for the record that we are in compliance with Onshore Order #2 in regards to our choke configuration. We have two remotely control adjustable chokes installed. Adjustable choke are flow control devices only and do not exist as shut off valves. In the case of a well control situation, the chokes are used to control flow. If there is a choke failure, the choke can be isolated by the manual valves adjacent to the choke. If the hydraulic lines for the remotely operated chokes fail or lose power, the well can be shut in until the choke is repaired or power is restored. CHK PN 643672 CHK PN 643672								
14. Thereby certify that the foregoing is	s true and correct Electronic Submission # For CHESAPEA Imitted to AFMSS for proce	KE OPERATIN	G İNC, sent t	o the Carisbad	•••	•		
Name (Printed/Typed) ERIN CAF		Title AUTHORIZED REPRESENTATIVE						
Signature (Electronic S	Submission)		Date 10/2	5/2012				
	THIS SPACE FO	OR FEDERAL	OR STAT	E OFFICE U	ISE			
Approved By WESLEY INGRAM	TitleDETDO	I ELIM ENGIN	IEED	Date 10/26/201				
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conditions.	Office Carls	LEUM ENGIN	LUN	2000 10/20/201				
Title 18 H.S.C. Section 1001 and Title 43	LISC Section 1212 make it s	arima for any na	reen knowingle	and wallfully to	nake to any department	or agency of the United		

Fitle 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.

Chesapeake Minimum BOPE Requirements

Operation: Intermediate and Production Hole Sections

