Form 3160-5 (August 1999)

UNITED STATES

DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000

BUREAU OF LAND MANAGEMENT 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. NM 0415688A 6. If Indian, Allottee or Tribe Name 7. If Unit or CA/Agreement, Name and/or No. Old Indian Draw Unit	
SUBMIT IN TRIPLICATE - Other Instructions on reverse side 1. Type of Well				
Oil Well Gas Well 2. Name of Operator	Other			8. Well Name and No. Old Indian draw Unit #37
Chesapeake Operating, Inc	C .			9. API Well No.
3a. Address P. O. Box 11050 Midland TX 79702-8050 4. Location of Well (Footage, Sec., T., R., M., or Survey Description 2160' FSL & 1960' FEL, Section 18, T22S, R28E		3b. Phone No. (include area code) (432)687-2992 BECEIVED JUL 0 5 2005		30-015-24573 10. Field and Pool, or Exploratory Area Indian Draw; Delaware
				11. County or Parish, State Eddy
	O	OD-AHTEOIM	New Mexico	
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NATU	RE OF NOTICE,	REPORT, OR OTHER DATA
TYPE OF SUBMISSION		TY	PE OF ACTION	
 □ Notice of Intent □ Subsequent Report □ Final Abandonment Notice 	☐ Alter Casing ☐ Casing Repair ☐ Change Plans ☐	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	☐ Production (St☐ Reclamation☐ Recomplete☐ Temporarily A☐ Water Disposa	☐ Well Integrity ☐ Other
If the proposal is to deepen dire Attach the Bond under which the following completion of the invitesting has been completed. Fin determined that the site is ready This well has been TA'd si	ectionally or recomplete horizontally ne work will be performed or provide tolved operations. If the operation real Abandonment Notices shall be find for final inspection.) The provided Herican State of the sapeal of the considering using the west work with the same and the sa	y, give subsurface locati de the Bond No. on file v esults in a multiple comp iled only after all require ke, respectfully recell in a future wate	ons measured and true with BLM/BIA. Required letion or recompletion ments, including reclar quest that we be a flood project. Y	any proposed work and approximate duration thereof. vertical depths of all pertinent markers and zones. red subsequent reports shall be filed within 30 days in a new interval, a Form 3160-4 shall be filed once mation, have been completed, and the operator has allowed to continue to carry this well four consideration is appreciated. test.



14. I hereby certify that the foregoing is true and correct					
Name (Printed/Typed)	Title	Title			
Brenda Coffman	Regulatory Analyst				
Signature Brown Colomb	Date 06/27/2005	MA OCO			
THIS SPACE FOR F	EDERAL OR STATE OFFICE USE	acted.			
Approved by	Title	Date			
Conditions of approval, if any, are attached. Approval of this notice does certify that the applicant holds legal or equitable title to those rights in the which would entitle the applicant to conduct operations thereon.					

fraudulent statements or representations as to any matter within its jurisdiction.