OCD-ARTESIA

Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007
Expires: March 31, 2007

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. NMNMQ29825		
				6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE- Other instructions on reverse side IVED				7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well Oil Well	ras Well Other		JAN 2 5 2006	8. Well Name		
2. Name of Operator CHESAPEAKE	OPERATING, INC. A'	TTN: LINDA 💝	alcettan-ug	9. API Well 1	FEDERAL 1	
3a. Address 3b. Phone No. (include area code)				30-	015-34536	
P.O. BOX 18496, OKLAHOMA CITY, OK 73154-0496 405-767-4275 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10. Field and Pool, or Exploratory Area UND. INDIAN DRAW; DELAWARE		
2310 FNL 1000 FWL SWNW SEC 7-22S-28E				11. County or Parish, State		
				EDDY COUNTY, NM		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION TYPE OF ACTION						
Notice of Intent	Acidize	Deepen	Production (Star	t/Resume)	Water Shut-Off	
	Alter Casing Casing Repair	Fracture Treat New Construction	Reclamation Recomplete	Ĺ	Well Integrity Other Spud & Surf Csg.	
✓ Subsequent Report	Change Plans	Plug and Abandon	Temporarily Aba			
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		×	
Attach the Bond under which the v following completion of the involv testing has been completed. Final determined that the site is ready for 1/4/2006 Spud 12 1/4" hole (1/5/2006 Ran 10 jts 8 5/8" 2 psi - OK. BLM Nationwide Bond #NM (CHK PN 819661)	ed operations. If the operation res Abandonment Notices shall be file final inspection.) @ 4:30 p.m. # J-55 STC csg set @ 448'. C	sults in a multiple comp ed only after all require	eletion or recompletion in ments, including reclama	n a new interval, a ation, have been o	Form 3160-4 shall be filed once ompleted, and the operator has	
 I hereby certify that the foregon Name (Printed/Typed) 	ng is true and correct					
LINDA GOOD Title PERMITTING AGEN			T			
Signature Similar	Good	Date		1/06/2006		
ACCEPTED THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Annroved by (DAVID E CLAS	·· [*	l'itle	Dai	e ^	
Conditions of approval, if any are atta certify that the applicant holds legal or		dan	Office			
which would entitle the applicant to co	nduct operations thereon.					
Title 18 U.S.C. Section 1001 and Title 4. States any false, fictitions or fraudulen	statements of representations as	enme tor any person k to any matter within i	nowingly and willfully t ts jurisdiction.	to make to any d	lepartment or agency of the United	

(Instructions on page 2)