OCD-ARTELIA

UNITEDSTATES DEPARTMENT OF THE INTERIOR

FORMAPPROVED OM B No 1004-0137 Expires March 31, 2007

BUREAU OF LAND MANAGEMENT 5 Lease Serial No NMNM34246

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.				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 NMNM72187		
1 Type of Well Oil Well	Gas Well Other	DEC 0.7	2007	8 Well Name and No		
2 Name of Operator Chesapeake Operating Inc OCD-ARTESIA				FEDERAL CN COM 1 9 API Well No		
3a Address 3b PhoneNo (include area code)				30-015-23939		
2010 Rankin Hwy Midland TX 79701 (432)687-2992				10 Field and Pool, or Exploratory Area		
4 Location of Well (Footage, Sec, T, R, M, or Survey Description)				HAPPY VALLEY, MORROW		
660 FSL, 2080 FWL SE SW SEC 20 T22S R26E				11 County or Parish, State EDDY COUNTY, NEW MEXICO		
12 CHECK A	PPROPRIATE BOX(ES)TO	INDICATE NATUR	E OF NOTICE, R	EPORT, OR OTHER DATA		
TYPE OF SUBMISSION	MISSION TYPE OF ACTION					
X Notice of Intent	Acidize [AlterCasing [Deepen FractureTreat	Production (Sta	water Shut-Off Well Integrity		
Subsequent Report	Casing Repair	New Construction	Recomplete	Other		
Final Abandonment Notice	Change Plans	Plug and Abandon	X Temporarily Ab	oandon		
Final Adandonment Notice	Convert to Injection	PlugBack	Water Disposal			
following completelon of the intesting has been completed. Find determined that the site is read that the site is read to the sapeake feeting. DEC	volved operations. If the operation in all Abandonment Notices shall be by for final inspection.) IV) request permission to 5 2007 ES BABYAK EUM ENGINEER	esults in a multiple comfiled only after all required only after all required of TA this well. Pro	pletion or recompletion ements, including reclar occedure and MI	in a new interval, a Form 3160-4 shall be filed once mation, have been completed, and the operator has T chart will follow Pled for record NMOCD		
14 I hereby certify that the fore Name (Printed/Typed) Shay Stricklin		Title	Regulatory Tec	:h		
Signature	tuill	Date	11/28/2007			
	THIS SPACE FOR F	EDERAL OR S	TATE OFFICE	USE		
Approved by		· – – – – – –	itle	Date		
Conditions of approval, if any, are	attached Approval of this notice	does not warrant or		,		

which would entitle the applicant to conduct operations thereon 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

Office

certify that the applicant holds legal or equitable title to those rights in the subject lease