

Submit 3 Copies To Appropriate District
Office
District I
625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

June 19, 2008

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-23697
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 025503
7. Lease Name or Unit Agreement Name
8. Well Number 5
9. OGRID Number 147179
10. Pool name or Wildcat Shugart-Yates-SR-Q
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3459.8 GL

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other WIW	RECEIVED
2. Name of Operator Chesapeake Operating, Inc,	NOV 23 2009
3. Address of Operator P.O. Box 18496 Oklahoma City, OK 73154-0496	NMOCD ARTESIA
4. Well Location Unit Letter A : 990 feet from the North line and 990 feet from the East line Section 26 Township 18S Range 30E NMPM County Eddy	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3459.8 GL	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: MIT Chart <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Chesapeake Operating respectfully submits MIT chart. Test was witnessed by Paul Swartz with the BLM. Ran test for 30 minutes @ 580 psi. Good test

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Pat Richards TITLE Production Assistant DATE 11/16/2009

Type or print name Pat Richards E-mail address: pat.richards@chk.com PHONE: (575)391-1462

For State Use Only

Accepted for record
NMOCD RE

APPROVED BY: _____ TITLE _____ DATE 12/11/09

Conditions of Approval (if any):

