	/	13141576	- v. 40		
Submit 3 Copies To Appropriate District	State of New Me Energy, Minerals and Batu	xico	-17(()	Form C	
Office District [	Energy, Minerals and Patu	ıral Resdûrces S(2) : ■ [1	WELL APINO	Revised March 25	<u>, 1999</u> 
1625 N. French Dr., Hobbs, NM 88240 District II	<i>\</i> ∞	14 7	30-015-320	64	
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION 1220 South Seffran	ids Dr	5. Indicate Type	of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87	7505 ~~1/1 14/	STATE  State Oil & O	FEE : Cas Lease No.	
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM		المرتبان الم		Jas Lease No.	
87505	ES AND REPORTS ON WELLS	-	7 Lease Name o	r Unit Agreement N	ame:
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR USE "APPLICA	ALS TO DRILL OR TO DEEPEN OR PL	UG BACK TO A	r. Boase Plante o	· Om rigreement r	
PROPOSALS.)  1. Type of Well:		V	vill "7A' Fe	ee	
Oil Well Gas Well K	Other				
2. Name of Operator	T	18	B. Well No.		
Chesapeake Operating,  Address of Operator	Inc.	9. Pool name or Wildcat			
			Loving,	North (Morrow	v)
4. Well Location					
Unit Letter A	feet from the <u>North</u>	line and _1063	feet fro	m the <u>East</u>	_line
Section 7			NMPM Edd	ly County	
	10. Elevation (Show whether Di	R, RKB, RT, GR, etc.)	,		
11 Chack Ar	GL: 3037 opropriate Box to Indicate N	ature of Notice R	enort or Other	Data	
NOTICE OF INT			EQUENT RE		
	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASIN	G □
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	.ING OPNS.	PLUG AND ABANDONMENT	
100201111211111111111111111111111111111	MULTIPLE  COMPLETION	CASING TEST AND CEMENT JOB			
OTHER:		OTHER: 7." csg		<u> </u>	Ŋ
<ol> <li>Describe proposed or completed starting any proposed work). SEE recompilation.</li> </ol>	operations. (Clearly state all pertice RULE 1103. For Multiple Com	inent details, and give pletions: Attach wellt	pertinent dates, i bore diagram of p	ncluding estimated or proposed completion	date of For
1.57  yield, cont w/l5	cun 215 jts 7" 26# L-80, 9 PPG Mud Clean, cmt v 50 sx Cl. H Neat, 15.6 I , test 2500#, NU BOP, ch	w/500 sx 15:61:1 PPG, 1.18 yield,	ll Poz + add , set csg sl	litives, 13.2 l Lips, ND BOP, (	PPG, cut
-					
I hereby certify that the information	n above is true and complete to the	e best of my knowledg	ge and belief.		
		Regulatory A		DATE <u>09/12/</u>	<b>0</b> 2
<i>V</i>		<u> </u>	J. J.		
Type or print name Barbara (This space for State use)	a J. Bale		T C	ephone No (405) 8	
	<b>ighial</b> signed by tim W. C			<b>SEP 23</b>	<b>LUUL</b>
APPPROVED BY Conditions of approval, if any:	FRACT !! SUPERSISOR TITLE			DATE	