

Submit 3 Copies To Appropriate District Office  
District I  
1625 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  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

CISF  
60

Form C-103  
Revised March 25, 1999

**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 ☐ Gas Well ☒ Other

2. Name of Operator  
Chesapeake Operating, Inc.

3. Address of Operator  
P. O. Box 18496, Oklahoma City, OK 73154-0496

4. Well Location  
Unit Letter A : 725 feet from the North line and 1063 feet from the East line  
Section 7 Township 23S Range 28E NMPM Eddy County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
GL: 3037

WELL API NO  
30-015-32064

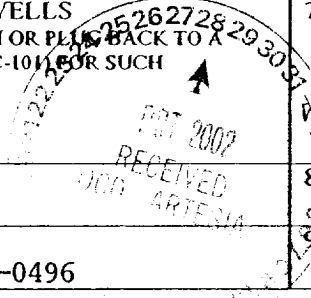
5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:  
Will "7A" Fee

8. Well No.  
1

9. Pool name or Wildcat  
Loving, North (Morrow)



11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	OTHER: Tubing Perforations <input checked="" type="checkbox"/>
OTHER: <input type="checkbox"/>	

12. 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.

09/30/02 RU fun tbg to 12,250, pkr to 12,251, tag pkr, take off BOP, put on tree, .  
RU Schlumberger, RIH, run correlation log, POOH, put guns & pkr on, perf Basal Morrow  
12,392-12,426 w/4 spf, took 5 min to hit bottom, had little blow on tbg, took  
1 hr 15 min to start unloading wt, rec 32 BW, pressure went up to 2000#, test gas  
@ 2600 #, after 30 min pressure went up to 3000# on 12/64" choke, left well to  
Flow Testers

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

SIGNATURE Barbara J. Bale TITLE Regulatory Analyst DATE 10/08/02

Type or print name Barbara J. Bale Telephone No. 405)848 -8000

APPROVED BY [Signature] DATE OCT 29 2002  
Conditions of approval, if any: ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR