Office Office	State of New Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.
District II	OIL CONSERVATION DIVISION	30-025-32021
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE X FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
SUNDRY NOTICE	ES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)		Newman State
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 1
2. Name of Operator Checapeake Operating Inc.		9. OGRID Number 147179
Chesapeake Operating, Inc. 3. Address of Operator P. O. Box 11050		10. Pool name or Wildcat
Midland, TX 79702-8050		Stateline;Ellenburger
4. Well Location	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Unit Letter F : 18		1874feet from theWestline
Section 32	Township 23S Range 38E	NMPM CountyLea
	11. Elevation (Show whether DR, RKB, RT, GR, e 3296' GR	ac.)
Pit or Below-grade Tank Application 🗌 or C	losure 🗌	P
Pit typeDepth to Groundwate	Distance from nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness: mil	Below-Grade Tank: Volume bbls;	Construction Material
12. Check Ap	propriate Box to Indicate Nature of Notic	e, Report or Other Data
NOTICE OF INT	ENTION TO: SI	JBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK [PLUG AND ABANDON REMEDIAL W	
		DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEME	ENT JOB 🔟
OTHER:Change Lease Name	☑ OTHER:	
 Describe proposed or complet of starting any proposed work or recompletion. 	ed operations. (Clearly state all pertinent details, c). SEE RULE 1103. For Multiple Completions:	and give pertinent dates, including estimated date Attach wellbore diagram of proposed completion
Chesapeake, respectfully, request peri	mission to change the lease name for this well from	n the Newman State to the Newman 32 State
#1.		
	7.79	Received Hobbs OCD
OBER	OGRID NO. 147179 BITY NO. 34566	1891011121375
OPEN.	12TY NO. 34560	(6) A 15/2
PPOP	CODE	A Standard
PGOL	C()UE	Reseived =
EFF. C	DATE	Hobbs &
APIN	0	FO OCD COLUMN
		e oz a chi
		2628272
I hereby certify that the information ab grade tank has been/will be constructed or clo	ove is true and complete to the best of my knowle used according to NMOCD guidelines \square , a general permit	edge and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan.
SIGNATURE Dio no Co	Of TITLE Regulatory Analyst	
	TILE Regulatory Allalyst	DATE 04/08/2005
Type or print name Brenda Coffman For State Use Only	E-mail address: bcoffman@	©chkenergy.com Telephone No. (432)687-2992
APPROVED BY:	TITLE . for	TROLEUM ENGINEERATE APR 1 3 2005
Conditions of Approval (if any):		CIMULEUM ENGINEEM ZUU