

State of New Mexico  
Energy, Minerals and Natural Resources

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

<p>WELL API NO. 30-025-36450</p>	
<p>5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/></p>	
<p>6. State Oil &amp; Gas Lease No.</p>	
<p>7. Lease Name or Unit Agreement Name Trinity Burrus Abo Unit</p>	
<p>8. Well Number 18</p>	
<p>9. OGRID Number 147179</p>	
<p>10. Pool name or Wildcat Trinity; Wolfcamp</p>	
<p>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.)</p>	
<p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p>	
<p>2. Name of Operator Chesapeake Operating Inc.</p>	
<p>3. Address of Operator P.O. Box 11050 Midland, TX 79702-8050</p>	
<p>4. Well Location Unit Letter J : 1650 feet from the South line and 2200 feet from the East line Section 23 Township 12S Range 38E NMPM County Lea</p>	
<p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3789 GR</p>	
<p>Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/></p>	
<p>Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____</p>	
<p>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____</p>	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: Change name ☒

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.

Due to the completion and approval of the Burrus Water Flood the lease name will change from Burrus 23 #3 to Trinity Burrus Abo Unit 18.

OPER. OGRID NO. 147179  
PROPERTY NO. 35626  
POOL CODE 59890  
EFF. DATE MAY 01 2006  
API NO. 30-025-36450



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☒.

SIGNATURE Shay Stricklin TITLE Regulatory Assistant DATE 06/13/2006

Type or print name Shay Stricklin E-mail address: sstricklin@chkenergy.com Telephone No. (432)687-2992

For State Use Only

APPROVED BY: Chris Williams TITLE DISTRICT SUPERVISOR/GENERAL MANAGER DATE JUN 15 2006

Conditions of Approval (if any):