

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

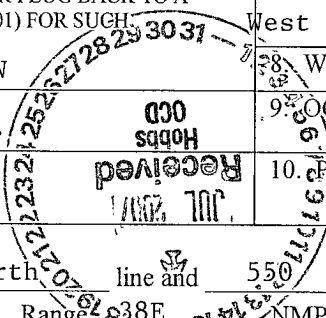
Form C-103
 May 27, 2004

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

| |
|---|
| WELL API NO. 30-025-30210 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. B-9613 |

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 checked="" type="checkbox"/> Other <input type="checkbox"/> WIW | 7. Lease Name or Unit Agreement Name West Dollarhide Queen Sand Unit |
| 2. Name of Operator Chaparral Energy, L.L.C. | 8. Well Number 109 |
| 3. Address of Operator 701 Cedar Lake Blvd. Oklahoma City, OK 73114 | 9. OGRID Number 4115 |
| 4. Well Location Unit Letter D : 750 feet from the North line and 550 feet from the West line Section 32 Township 24S Range 838E NMPM Lea County | 10. Pool name or Wildcat Dollarhide Queen |



| |
|---|
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3164 GR |
|---|

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

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

This well failed an Integrity test on 9/05/2005. To repair the casing in this well we tested and squeezed numerous holes scattered from 3500' to 250'. Finally decided to run a liner to save the well as an injector. Set a CBP @ 3582'. Ran in hole with 81 jts 4 1/2", 11.6 #/ft, J-55 Ultra FJ csg open-ended to 3577'. RU BJ Services and establish circ then mix and pump 65 sks Class C cement to surf. Close in csg valve and squeeze cmt into holes in 5 1/2" csg that had been squeezed previously. Bump to 1670 psi and left on cmt for 5 min. then bled pressure to 500 psi and shut in to WOC. Drilled out cmt & CBP and cleaned to PBTD of 3696'. Then RIH w/plastic coated AD-1 tension pkr & 2-3/8" bare tbq. Circ pkr fluid & set pkr @ 3575'. Call out Buddy Hill, NMOCD, to witness integrity test. Pressure to 500 psi and held for 30 min. OK. Left well as TA'd WIW.

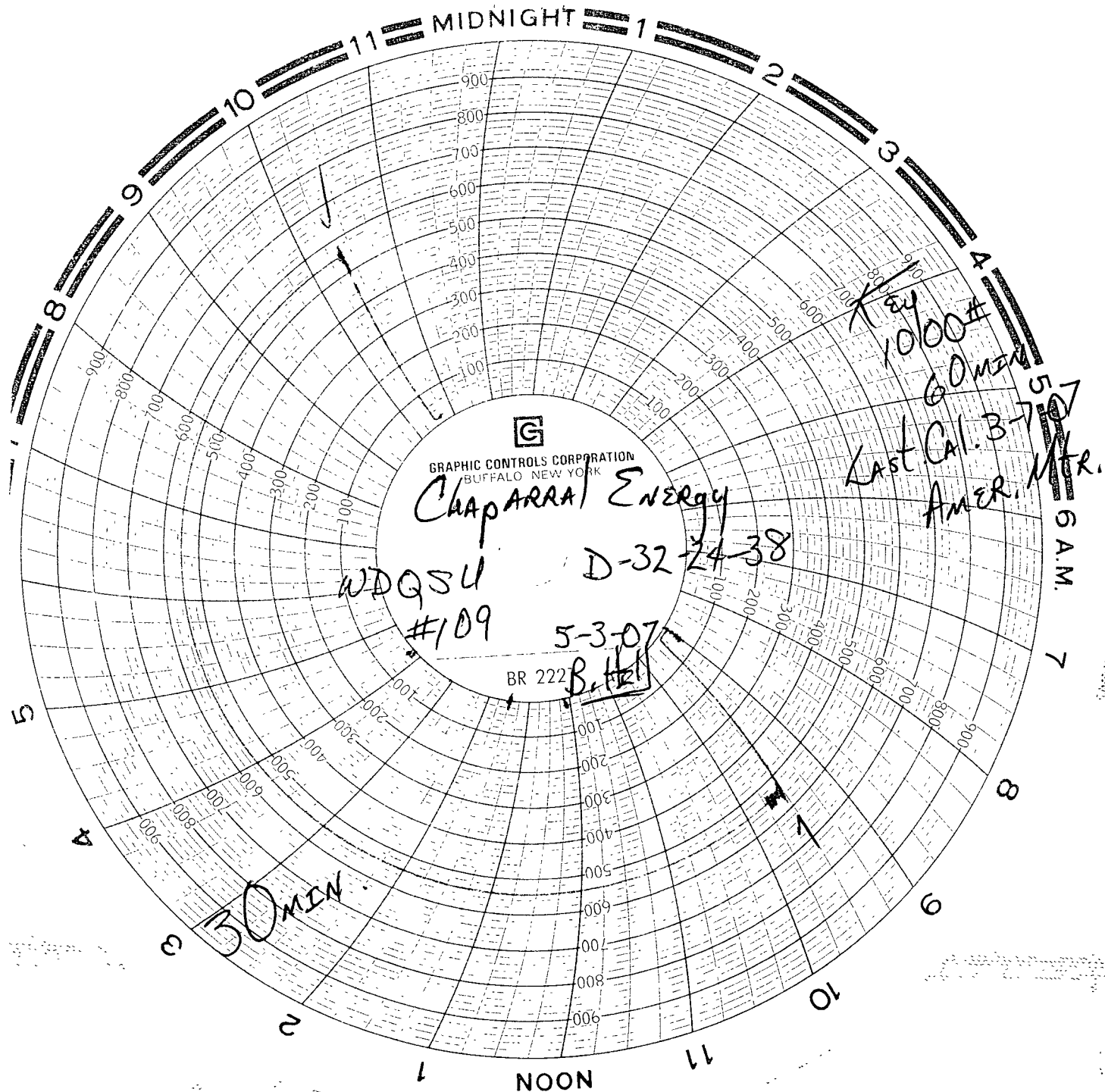
This Approval of Temporary Abandonment Expires 5/3/12

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 David P. Spencer TITLE Manager of Regulatory Affairs DATE July 11, 2007

Type or print name David P. Spencer E-mail address: david.spencer@chaparralenergy.com Telephone No: 405-478-8777
For State Use Only

APPROVED BY: Larry W. Wink TITLE OCD FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUL 16 2007
 Conditions of Approval (if any): _____



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Chaparral Energy

WDQSU
#109

D-32 24-38

5-3-07

BR 222

B. Hill

Key 10100#
60MIN

Last Cal. 3-7-07
AMER. MTR.

6 A.M.

7

8

9

10

11

NOON

1

2

3

4

5

8

9

10

11

MIDNIGHT

1

2

3

4

5