

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
Revised March 25, 1999

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

WELL API NO. 30-025-36036
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

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 New Drilling Well

7. Lease Name or Unit Agreement Name:

Hampton 1

2. Name of Operator
Chesapeake Operating, Inc.

8. Well No. 1

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

9. Pool name or Wildcat
Undesignated SW Austin Mississippian

4. Well Location

Unit Letter N : 660 feet from the South line and 2050 feet from the West line

Section 1 Township 15S Range 35E NMPM Lea County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
GR: 3966.7'

11. 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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

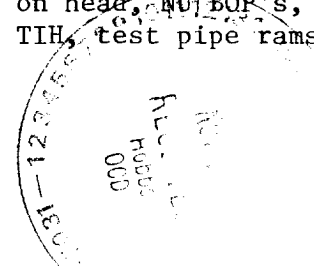
OTHER: Spud - Surface Casing ☒

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.

11/06/02 Spud well @ 2:00 p.m. w/Nabors Drilling Rig #311

11/06/02 RU csg crew, run 9 jts 13-3/8" 48# H-40 STC csg, RD csg crew, RU cmt crew, cmt w/440 sx Cl. C + additives, did not circ, WOC - 27 hours

11/07/02 run temperature survey, TOC 10' below GL, cut off, weld on head, NU BOP's, test blind rams, manifold & kill line valves to 800#, PU BHA, TIH, test pipe rams to 500#



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 11/14/02

Type or print name Barbara J. Bale

Telephone No. (405)848-8000

(This space for State use)

APPROVED BY

Conditions of approval, if any:

ORIGINAL SIGNED BY

GARY W. WINK

TITLE CC FIELD REPRESENTATIVE / STAFF MANAGER

DATE NOV 20 2002