

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720
District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 50806

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well:G 2. Name of Operator CHESAPEAKE OPERATING, INC. 3. Address of Operator P. O. BOX 18496 , OKLAHOMA CITY , OK 731540496 4. Well Location Unit Letter <u>I</u> : <u>2160</u> feet from the <u>S</u> line and <u>660</u> feet from the <u>E</u> line Section <u>5</u> Township <u>10S</u> Range <u>34E</u> NMPM Lea County		WELL API NUMBER 30-025-38292
		5. Indicate Type of Lease S
		6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name DH 5 STATE		
8. Well Number 001		
9. OGRID Number 147179		
10. Pool name or Wildcat		
11. Elevation (Show whether DR, KB, BT, GR, etc.) 4246 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 ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
CASING/CEMENT JOB ☐
Other: **Drilling/Cement** ☒

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.
4/1/07. Run 10 jts 13 3/8 48# H-40 STc csg set @ 420. Cemented w/185 sx HL C light + additives, tail in w/200 sx Premium plus + additives. WOC 24 hrs, ran 58 sx to surf. Tested cmt to 1200 psi for 30 mins-OK.
4/9/07. Run 99 jts 8 5/8 32# J-55 LTC csg set @ 4100. Cemented w/850 sx Interfill C, tail in w/200 sx Prem Plus, WOC 18 hrs, ran 91 sx to surf, Tested cement to 930 psi for 48 mins-Ok.
3/30/2007 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
04/01/07	Surf	FreshWater	17.5	13.375	48	H-40	0	420	285	1.93	HL C		1200	0	Y
04/09/07	Int1	Brine	11	8.625	32	J-55	0	4100	950	2.45	Interfill		930	0	Y

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 Electronically Signed TITLE Regulatory Analyst DATE 4/9/2007
Type or print name Brenda Coffman E-mail address bcoffman@chkenergy.com Telephone No. 432-687-2992

For State Use Only:

APPROVED BY: Paul Kautz TITLE Geologist DATE 4/10/2007 7:23:05 AM