UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO 1004-0135 Expires: July 31, 2010

OCD - Artesia

Lease Serial No. NMLC061705B

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.					NMLC061705B 6. If Indian, Allottee or Tribe Name			
I. Type of Well					8. Well Name and No. PLU BIG SINKS 25 FEDERAL 1H			
Other Other					<u> </u>			
2. Name of Operator Contact: LYNDEE SONGER CHESAPEAKE OPERATING INC E-Mail: lyndee.songer@chk.com					9 API Well No 30-015-39018-00-X1			
3a. Address 3b Phone No. (include area code Ph: 405-935-2411				10. Field and Pool, or Exploratory UNKNOWN				
OKLAHOMA CITY, OK 73154-0496 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, and State			
Sec 25 T24S R30E SWSE 100FSL 2240FEL					EDDY COUNTY, NM			
12. CHECK APPI	ROPRIATE BOX(ES) TO INI	DICATE NATU	RE OF N	NOTICE, R	EPORT, OR OTHER	R DATA		
TYPE OF SUBMISSION	TYPE OF SUBMISSION TYPE OF ACTION							
- Nation of Intent	☐ Acidize	Deepen	Deepen		tion (Start/Resume)	☐ Water Shut-Off		
Notice of Intent	Alter Casing Fracture Treat		at	Reclamation		☐ Well Integrity		
Subsequent Report	☐ Casing Repair	□ New Constru	w Construction		Recomplete		C4	
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Ab	andon	☐ Temporarily Abandon		Production	Start-up	
Convert to Injection		☐ Plug Back	g Back Wate		Disposal			
following completion of the involved testing has been completed. Final Al determined that the site is ready for f CHESAPEAKE IS REPORTIN 9/30/2011.	oandonment Notices shall be filed onl	ly after all requirem	ents, includ	ling reclamation	on, have been completed, a	and the operato	or has	
(CHK PN 636499)		RECEIVED 0CT 13 2011 NMOCD ARTESIA						
* Completion paper		to be f	iled					
14 Thereby certify that the foregoing is	true and correct Electronic Submission #11901 For CHESAPEAKE O mitted to AFMSS for processing	PERATING ÍNC,	sent to th	ne Carlsbad	•			
Name(Printed/Typed) LYNDEE SONGER			Title REGULATORY COMPLIANCE ANALYST					
Signature (Electronic Submission)			Date 10/03/2011					
	THIS SPACE FOR F	EDERAL OR	STATE (OFFICE U	SE			
Approved By ACCEPTED			JAMES A AMOS _{Title} SUPERVISOR EPS				0/04/2011	
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.			Office Carlsbad Accepted for record					
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent						agency of the	United	