

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMNM025503
2. Name of Operator CHESAPEAKE OPERATING, INC. Contact: LINDA GOOD E-Mail: lgood@chkenergy.com		6. If Indian, Allottee or Tribe Name
3a. Address PO BOX 18496 OKLAHOMA CITY, OK 73154-0496	3b. Phone No. (include area code) Ph: 405-767-4275 Fx: 405-753-5469	7. If Unit or CA/Agreement, Name and/or No. NMNM88499X
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 26 T18S R30E NESE 1530FSL 940FEL		8. Well Name and No. BENSON SHUGART 7
DEC 4 2007 OCD-ARTESIA		9. API Well No. 30-015-27546-00-S1
		10. Field and Pool, or Exploratory SHUGART
		11. County or Parish, and State EDDY COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Workover Operatic
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

10/25/2007 RU GRAY WL, RIH TO 3485', PERF GRAYBURG @ 3354' - 3358', 3454 - 3472' W/2 & 4 SPF, 52 HOLES TOTAL, RD GRAY WL.

10/30/2007 RU CUDD, ACIDIZE & SAND FRAC GRAYBURG W/1000 GAL 15% NEFE HCL & 20,832 GAL "B" FRAC 25 X-LINK GEL & 46,000# 16/30 SLC SAND W/SUPERSET ADDED, FLUSH W/840 GAL LINEAR GEL. RU GRAY WL, SET CBP @ 3300'. RIH, PERF PENROSE @ 3106' - 3112', 3272' - 3278, 24 HOLES TOTAL, RD GRAY WL. RU CUDD, ACIDIZE & SAND FRAC PENROSE W/750 GAL 15% NEFE HCL, 22,890 GAL "B" FRAC 25 X-LINK GEL & 25,496# 16/30 SCL SAND W/SUPERSET ADDED, FLUSH W/798 GAL LINEAR GEL.

10/31/2007 RU GRAY WL, SET CBP @ 2320', RIH, PERF SEVEN RIVERS 2192' - 2202', 2218' - 2228' W/2 SPF, RD GRAY WL, RU CUD, ACIDIZE & SAND FRAC SEVEN RIVERS W/700 GAL 15% NEFE HCL, 20,076 GAL "B" FRAC 25 X-LINK GEL W/32,000# 16/30 SLC SAND W/SUPERSET ADDED, FLUSH W/546 GAL LINEAR GEL.

Accepted for Review
NMOC

Subject To OCD Review of Amos

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #57174 verified by the BLM Well Information System For CHESAPEAKE OPERATING, INC., sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 11/19/2007 (08KMS0333SE)	
Name (Printed/Typed) LINDA GOOD	Title FEDERAL REGULATORY ANALYST
Signature (Electronic Submission)	Date 11/16/2007

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By	ACCEPTED	JAMES A AMOS Title ACTING FIELD MANAGER	Date 12/01/2007
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	

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

Additional data for EC transaction #57174 that would not fit on the form

32. Additional remarks, continued

11/03/2007 RAN MIT TEST TO 420# FOR 30 MINUTES - OK. CLEAN LOCATION, RDMO.
RETURN WELL TO INJECTION.

ATTACHED: WORKOVER PROCEDURE

(CHK PN 891189)

