UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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.



FORM A	PPROVED	
OMB NO	1004-0135	
Expures: li	dv 31 2010	١

,	NMNM95630
6	If Indian, Allottee or Tribe Name
7	TOTAL CAZA

SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7 If Unit or CA/Agreement, Name and/or No			
Type of Well ☐ Gas Well ☐ Other					8 Well Name and No. CROW FLATS 14 FEDERAL 3H			
2 Name of Operator	9 API Well No.							
CHESAPEAKE OPERATING, 3a Address	30-015-36350-00-X1							
OKLAHOMA CITY, OK 73154	Ph: 405-76	(include area code 7-4275	c)	CROW FLATS				
4 Location of Well (Footage, Sec., 7		11 County or Parish, and State						
Sec 14 T16S R28E SESE 660FSL 200FEL		.IAN 05 2009		EDDY COUNTY, NM				
	0	D-ARTE	SIA					
12. CHECK APPI	ROPRIATE BOX(ES) TO	O INDICATE	NATURE OF	NOTICE, RI	EPORT, OR OTHEI	R DATA		
TYPE OF SUBMISSION	TYPE OF ACTION							
□ Notice of Intent	Acidize	☐ Deepen ☐ P		□ Product	uction (Start/Resume) Water Shut-0			
_	Alter Casing	☐ Frac	ture Treat	Reclam	Reclamation			
Subsequent Report ■	☐ Casing Repair	□ New	Construction	Recomp	olete	Other Drilling Operations		
☐ Final Abandonment Notice	☐ Change Plans		and Abandon	_	arıly Abandon	Drining Operations		
	Convert to Injection	□ Plug	Back	ck Water Disposal				
testing has been completed. Final A determined that the site is ready for SET 2ND STRING INTERME 12/10/2008 RAN 165 JTS 7' 2.48 YIELD. TAIL IN W/100 S 12/12/2008 TEST CASING TO (CHK PN 619810)	final inspection) DIATE CASING. ' 26# P-110 LTC CSG, SI SX 50/50 POZ PREMIUN	ET @ 7170', (I, 14.4 PPG, 1	:MT'D W/500 S :25 YIELD. W(K INTERFILI DC. JRS. TOC @	_ H, 11.9 PPG			
					N 6 2009			
14. Thereby certify that the foregoing i	s true and correct Electronic Submission : For CHESAPEA nmitted to AFMSS for proc	#65601 verified KE OPERATING Sessing by KU	by the BLM We G, INC., sent to RT SIMMONS on	the Carlsbac	Deputy Field Inspect System II ARTES OSKMS0519SE)	or NA		
Name (Printed/Typed) LINDA GO	OOD		Title SR. RE	EGULATORY	COMPLIANCE SP	EC		
Signature (Electronic	Submission)		Date 12/15/2	2008				
	THIS SPACE F	OR FEDERA	L OR STATE	OFFICE U	SE			
Approved By ACCEPT	To all the state of the state o		JAMES A _{Title} SUPERV	AMOS ISOR EPS		Date 12/21/2(
Conditions of approval, if any, are attacherify that the applicant holds legal or ecwhich would entitle the applicant to cond	juitable title to those rights in t		Office Carlsba	ad		2008		
Fitle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	SUSC Section 1212, make it	a crime for any p	erson knowingly a	and willfully to	make to any department	or agency of the United		