

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

Form C-105
 May 27, 2004

WELL API NO.	30-015-33504
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Teledyne 20	
8. Well Number	005
9. OGRID Number	147179
10. Pool name or Wildcat Harroun Ranch; Delaware, NE	

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

2. Name of Operator
Chesapeake Operating, Inc.

3. Address of Operator P. O. Box 11050
Midland, TX 79702-8050

4. Well Location
Unit Letter J : 1980 feet from the South line and 2310 feet from the East line
Section 20 Township 23S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
2959 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 _____

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 FEB 18 2005
 CHESAPEAKE

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Set CIBP/ Perf Acid <input checked="" type="checkbox"/>	

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.

- 1-22-05 MIRU Gary WL & set CIBP @ 6,375' dumped 2 sx cmt on top of plug. Test to 2500# - OK. RIH, perforate Brushy Canyon 6,248 - 6,264' @ 2 spf.
- 1-25-05 MIRU Cudd, acidize Brushy Canyon w/1,300 gals 15% NeFe 90/10 HCL, load and pressure BS to 1000#. Swabbing
- 1-28-05 MIRU Cudd frac Lower Brushy Canyon w/45,000 gals B-frac 25 and 1,550 gals 25# linear gel w/100,000# 16/30 Ottawa sand. Swabbing.
- 2-08-05 MIRU Gray WL, RIH, set CIBP @ 6200', dump 2 sx cmt on plug, test plug to 2500# for 5 mins - ok. Perf. Brushy Canyon 6,054 - 6,074' @ 2 spf.
- 2-09-05 Spot 200 gals 7.5% neFe 90/10 acid. Acidize Brushy Canyon w/200 gals acid. Swab.
- 2-16-05 MIRU BJ Services, frac middle Brushy Canyon w/60,500 gals 10# slick brine water.

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 Brenda Coffman TITLE Regulatory Analyst DATE 02/16/2005

Type or print name Brenda Coffman E-mail address: bcoffman@chkenergy.com Telephone No. (432)687-2992

FOR STATE USE ONLY
 APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____

FEB 18 2005