Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED OMB NO 1004-0135

	Expires July 31, 2010
	Lease Serial No NMNM95630
-	IC 1 4! A 11.44 T!(X)

SUNDRY	6. If Indian, Allottee or Tribe Name							
Do not use thi abandoned we								
SUBMIT IN TRI	7 If Unit or CA/Agreement, Name and/or No.							
1 Type of Well	8. Well Name and No. CROW FLATS 14-16-28 USA 5H							
. ☑ Oil Well ☐ Gas Well ☐ Oth 2. Name of Operator		-10-20 USA SH						
CHESAPEAKE OPERATING	Contact LY INC E-Mail lyndee.songe	IGER		9 API Well No 30-015-39509-00-X1				
3a. Address	3 F	3b Phone No. Ph: 405-935	(include area code) 10 Field and Pool, or Exploratory -2411 CROW FLATS					
OKLAHOMA CITY, OK 7315								
 Location of Well (Footage, Sec., 1 Sec 14 T16S R28E NWNW 6 					11. County or Parish, and State EDDY COUNTY, NM			
12. CHECK APPI	ROPRIATE BOX(ES) TO I	NDICATE :	NATURE OF 1	NOTICE, RI	EPORT, OR OTHE	R DATA		
TYPE OF SUBMISSION	_	TYPE OF ACTION						
Notice of Intent	Acidıze	□ Deep	en	□ Product	fuction (Start/Resume)		ut-Off	
_	☐ Alter Casing	□ Fract	ure Treat	□ Reclama	ation	☐ Well Integrity		
Subsequent Report	Subsequent Report Casing Repair		☐ New Construction		Recomplete		Other Drilling Operations	
☐ Final Abandonment Notice	☐ Change Plans ☐ Convert to Injection	_	and Abandon	☐ Temporarily Abandon				
3 Describe Proposed or Completed Op	□ Plug		□ Water D					
If the proposal is to deepen direction Attach the Bond under which the wo following completion of the involved testing has been completed. Final Addetermined that the site is ready for final SPUD WELL SET SURFACE	nent markers and e filed within 30 d 50-4 shall be filed	zones lays l once						
1/5/2012 SPUD WELL AT 9:30 PM					JAN 2 5	5 2012		
	ODITIVES. 1	S. 13.5 PRANTED CARTESTÀNC?						
1/8/2012 RAN 47 JTS 9 5/8 4 1.99 YIELD. WOC 35 HRS. L	ES. 12.00 PPG, 7 0 PSI @ 11:25.	EN? Ch	،د ک					
(CHK PN 639443)			•	A	ccepted for NMOCD	record	un	
14 Thereby certify that the foregoing is	s true and correct. Electronic Submission #12 For CHESAPEAKI			Il information	•	-11		
Comm	2 (12KMS0418SE)							
Name (Printed/Typed) LYNDEE					Title REGULATORY COMPLIANCE ANALYST			
Signature (Electronic	Submission)		Date 01/18/2	2012				
	THIS SPACE FOR	R FEDERAI	OR STATE	OFFICE U	SE			
Approved By ACCEPT		JAMES A _{Title} SUPERVI						
onditions of approval, if any, are attachertify that the applicant holds legal or eq hich would entitle the applicant to cond	juitable title to those rights in the s	ot warrant or a	Office Carlsba	d				