

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM 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.*5. Lease Serial No.
NMNM117116

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.8. Well Name and No.
COTTON HILLS 23 26 27 FED COM 1H1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator
CHESAPEAKE OPERATING INCContact: KYLE R JOHNSON
E-Mail: kyle.johnson@chevron.com3a. Address
OKLAHOMA CITY, OK 73154-04963b. Phone No. (include area code)
Ph: 713-372-65149. API Well No.
30-015-41535-00-X110. Field and Pool, or Exploratory
HAY HOLLOW

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 23 T26S R27E NWNE 152FNL 1979FEL
32.034440 N Lat, 104.158190 W Lon11. County or Parish, and State
EDDY COUNTY, NM

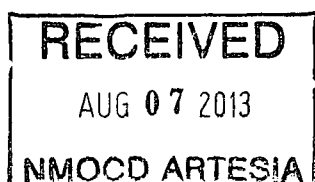
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

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 recompletion 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.)

Chevron respectfully request the use of a Coflex hose between the BOP and choke manifold. Please see the attached certification information.

UPDated 8/7/13
Accepted for record
NMOC



SEE ATTACHED FOR
CONDITIONS OF APPROVAL

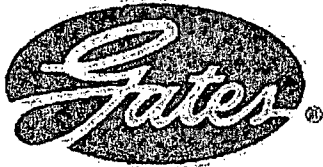
14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #214843 verified by the BLM Well Information System For CHESAPEAKE OPERATING INC, sent to the Carlsbad Committed to AFMSS for processing by JOHNNY DICKERSON on 07/26/2013 (13JLD1015SE)	
Name (Printed/Typed) KYLE R JOHNSON	Title DRILLING ENGINEER
Signature (Electronic Submission)	Date 07/25/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By	Title Petroleum Engineer	Date 8/5/13
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 CFO

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 **



A Tomkins Company

Robisco, Inc.

OILFIELD RUBBER PRODUCTS

4749 Eastpark Drive

Houston, TX 77028

United States of America

Gates Corporation Authorized Rotary and Vibrator Hose Subcontracted Fabricator

Hydrostatic Test Certification

Robisco, Inc. certifies that the following hose assembly has been tested to the Gates Oilfield Roughneck Agreement/Specification requirements and passed the hydrostatic test per API Spec 7K, Fifth Edition, June 2010, Test pressure 9.6.7 and per Table 9 to 15,000 psi in accordance with this product number. Hose burst pressure 9.6.7.2 exceeds the minimum of 2.25 times the working pressure per Table 9.

Assembly Part Number

36332R3-1/16HUB10K-LL-L

Serial Number / Date Code

L32461102512R112712-5

Chart Recorder Information

Hose Size	Testers	Serial Number	Calibration Date
<u>3.5IN X 32FT</u>	<u>OC CS</u>	<u>Recorder 22349</u>	<u>Oct. 19th 2012</u>

Lloyd's Register Type Approved for Fire Test OD/1000/499 Rev 1

Hydrostatic Test: Passed
Visual Inspection: Passed


QA Representative Signature

11/28/2012 P.S.
Date & Initial

Shipper:

GHX - Robsco, Inc.
4749 Eastpark Drive

Houston, TX 77028
Rufus Dominguez 713-672-1777

Shipment Reference: 9415989
Consignee Reference: 491394-156JR
Total Weight: 1687
Total Shipment Pieces: 1

Special Instruction

DO NOT STAND CRATES ON END!!!!

DIM Weight: 1105
qty: 1 (88 x 84 x 29)

00608423360 2

Label 1 of 1

Saia, Inc.
853-1923-A
11/29/2012

**TOTAL SERVICE SUPPLY LP
1620 VICEROY**

**ODESSA, TX 79763
ATTN: BRUCE**

(Fold Sheet Here)

Co-Flex line
Conditions of Approval

Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).