

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

Form C-103
May 27, 2004

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

WELL API NO.	30-015-21391
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	Indian Draw Unit #2 (FEDERAL WELL)
8. Well Number	2
9. OGRID Number	147179
10. Pool name or Wildcat	Indian Draw; Delaware

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 SWD

2. Name of Operator
Chesapeake Operating Inc.

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

4. Well Location
Unit Letter O : 660 feet from the South line and 1980 feet from the East line
Section 18 Township 22S Range 28E NMPM County Eddy

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

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 _____

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: Casing Repair ☒

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.

Repaired casing per the attached BLM forms. Enclosed with this report is the ORIGINAL CHART for the MIT. Well tested to 340 psi for 30 mins.

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 01/31/2006

Type or print name Brenda Coffman

For State Use Only

E-mail address: bcoffman@chkenergy.com Telephone No. (432)687-2992

APPROVED BY:

Conditions of Approval (if any):

Gerry Guye
Deputy Field Inspector
District II - Artesia

DATE 2-2-06

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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
☐ Oil Well ☐ Gas Well ☒ Other

RECEIVED

2. Name of Operator
Chesapeake Operating, Inc.

FEB 02 2006

3a. Address
P. O. Box 11050 Midland TX 79702-8050

3b. Phone No. (include area code)
(432) 687-2992

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 1980' FEL, Section 18, T22S, R28E

5. Lease Serial No.
NM-0415688A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
Indian Draw Unit #2

9. API Well No.
30-015-21391

10. Field and Pool, or Exploratory Area
Indian Draw, Delaware

11. County or Parish, State
Eddy
New Mexico

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 checked="" type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input checked="" type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<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.)

1-06-06 MIRU Key. NU BOP. POOH w/97 jts. 2 3/8" tbg, 2 3/8" SN, 1 jt. 2 3/8" plasti-coated tbg and 2 3/8" x 5 1/2" Lok-Set pkr.
1-07-06 RIH w/Cline RBP, 32A pkr and 99 jts. 2 3/8" tbg. Set RBP @ 3118', set pkr @ 3,107'. Load 5 1/2" csg w/ 13 BW, shut BOP, pump into csg, flowing out 8 5/8" csg, work w/pkr, plug up hole, unable to get good pack off, pkr slipped up hole. POOH w/tbg, pkr and RBP.
1-08-06 Did further testing. Found hole in casing between 380' and 411'.
1-10-06 RU Gray WL, RIH w/CCL/GR, tag @ 3301', log up to 2900 for correlation. POOH. RIH w/5 1/2" composite plug set @ 3120'. POOH, RD Gray. RIH w/5 1/2" AD 1 pkr on tbg, set @ 1000'. Test plug to 1000# - OK. POOH w/pkr and tbg. ND BOP, NU flange, RU Rising Star Cementers, tie onto csg, pump 100 sx Class C cmt w/2% CaCl2 w/15 BFW @ 14.8 ppg @ 100# @ 2 BPM, circ cmt to surface. Shut valve on 8 5/8" csg, displace w/FW, squeeze w/800#. RD Left well SI WOC 24+ hours.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Brenda Coffman

Title Regulatory Analyst

Signature

Brenda Coffman

Date 01/31/2006

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

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.

SECOND DAY
12 2

DAY

FOURTH

RECEIVED

FEB 02 2006

CCD:ADT501A

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

CHART NO. MC 0-100% UNIV. CHART
ETER. BUFFALO, NEW YORK CORPORATION
POST w/o 8 DAY

METER

POST w/o

~~CHART PUT ON~~

1-24-06

~~TAKEN OFF~~

LOCATION

OLD Indian Draw # 2
30.015-2130

REMARKS

15-21391

213
Bury

ORIGINAL chart not to be used in procedure used to prepare well for this test.

SIXTH DAY
12
2

SEVENTH DAY
10 12