

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.	30-015-22553
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEDERAL <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Teledyne 17
8. Well Number	1
9. OGRID Number	147179
10. Pool name or Wildcat	Harroun Ranch, Delaware
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2970 GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
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 _____	

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 N : 660 feet from the South line and 1980 feet from the West line
Section 17 Township 23S Range 29E NMPM County Eddy

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: Plug back ☒

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.

6-16-06 RU Gray, RIH w/ 7 5/8" CIBP set @ 7520'. Load csg w/40 BW, test to 2500#, OK.

6-17-06 Dump 8 sx cmt on top CIBP @ 7,520'. Perforate, w/3 3/8" perf gun, Brushy Canyon 6428 - 6435' 4 spf (29 shots).

6-18-06 RU Cudd Pumping Service, spot 200 gals 7.5% w/additives across prfs. Rev. acid into tbg, set pkr, acidize w/1300 gals 7.5% HCL + 40 BS. Swab.

6-22-06 MIRU BJ Services, frac Delaware w/8,022 gals Pad of Medallion 3000, 18,375 gals 30# linear gel containing 41,780# 16/30 Wh. Sd. RDMO

6-23-06 Swabbing.

6-28-06 RIH w/2 1/2" x 1 1/2" x 16' RXMB pump. Return well to production.

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 07/27/2006

Type or print name Brenda Coffman

E-mail address: bcoffman@chkenergy.com

Telephone No. (432)687-2992

For State Use Only

FOR RECORDS ONLY

JUL 31 2006

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____