

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.	30-015-33211
5. Indicate Type of Lease	STATE ☐ FED ☒
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Limestone Draw Federal
8. Well Number	001
9. OGRID Number	147179
10. Pool name or Wildcat	Undesig Bubbling Springs; Morrow, West

11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3578 GR
Pit or Below-grade Tank Application ☐ or Closure ☒	
Pit type _____ Depth to Groundwater 60 Distance from nearest fresh water well 1000 Distance from nearest surface water 1000	
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: Close Drilling Pit ☒

SUBSEQUENT REPORT OF:

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

OTHER: ☐

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.

Chesapeake, respectfully, request permission to close the drilling pit for this well. As per OCD rule 50 we will dig the hole to encapsulate mud using 20 mil plastic in pit and 20 mil on top. We will then top with 3' of clean dirt off of site.

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 Shay Stricklin TITLE Regulatory Assistant DATE 12/13/2006
Type or print name Shay Stricklin E-mail address: sstricklin@chkenergy.com Telephone No. (432)687-2992
For State Use District II Supervisor
APPROVED BY: _____ TITLE _____ DATE 12/18/06
Conditions of Approval (if any): _____