Form 3160-5 (February 2005)

OCD-ARTESIA

*DEPARTMENT OF THE INTERIOR

UNITED STATES BUREAU OF LAND MANAGEMENT
SUNDRY NOTICES AND REPORTS ON WELLS

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

5. Lease Serial No NMNM 029234

6. If Indian, Allottee or Tribe Name

Do not use this form for proposals to drill or abandoned well Wese Form 3160-3 (APD) for s			·		
SUBMIT IN TRIPLICATE - Other instructions on page 2.		7. [7. If Unit of CA/Agreement, Name and/or No		
i Type of Well ☑ Oil Well ☐ Gas Well ☐ Other	AUG 07 2007		8 Well Name and No. LOTOS C FEDERAL 912		
2 Name of Operator CHESAPEAKE OPERATING, INC. ATTN: LINDA GOOD			9 API Well No 30-015-35356		
3a Address 3b. Phone 1	3b. Phone No (include area code)		10. Field and Pool or Exploratory Area COTTON DRAW		
4 Location of Well (Footage, Sec., T.,R.,M., or Survey Description) 560' FSL & 1980' FEL, SWNE, SECTION 9,T24S, R31E			11 Country or Parish, State EDDY COUNTY, NEW MEXICO		
12. CHECK THE APPROPRIATE BOX(ES) TO I	NDICATE NATURE OF	NOTICE, I	REPORT OR OTHE	R DATA	
TYPE OF SUBMISSION	TYPE OF ACTI				
Notice of Intent Alter Casing F	racture Treat	Production Reclamat		Water Shut-Off Well Integrity Other Perf & Acid Bone	
Change Plans P	lug and Abandon [Tempora	nly Abandon	Springs	
the proposal is to deepen directionally or recomplete horizontally, give subs Attach the Bond under which the work will be performed or provide the Bo following completion of the involved operations. If the operation results in testing has been completed. Final Abandonment Notices must be filed only determined that the site is ready for final inspection.) 7/14/2007 Perf'd Bone Springs @ 7977' - 8222' w/1 SPF 56 holes. 7/15/2007 Acidize Bone Springs 7977' - 8222' w/5000 gal 7 1/2% HCL	nd No. on file with BLM a multiple completion or after all requirements, in	I/BIA. Requ r recompletion	ACCEPTI	rts must be filed within 30 days a Form 3160-4 must be filed once	
14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) LINDA GOOD	Title FEDERAL F	Title FEDERAL REGULATORY ANALYST			
Signature Linda Good	Date 07/16/2007	Date 07/16/2007			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE					
Approved by Conditions of approval, if any, are attached. Approval of this notice does not warrant that the applicant holds legal or equitable title to those rights in the subject lease whice entitle the applicant to conduct operations thereon.	Title or certify h would Office		D	ate	

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,

(Instructions on page 2)

fictitious or fraudulent statements or representations as to any matter within its jurisdiction