

AUG 21 2009

Form 3160-5
(August 2007)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires July 31, 20105 Lease Serial No.
NMNM12269

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM720708. Well Name and No.
EXXON FEDERAL COM 19. API Well No.
30-005-60551-00-S210. Field and Pool, or Exploratory
SAND RANCH-ATOKA, SOUTH
SAND RANCH-MORROW11 County or Parish, and State
CHAVES COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1 Type of Well

☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator
CHESAPEAKE OPERATING INCContact: LINDA GOOD
E-Mail: linda.good@chk.com3a. Address
P O BOX 18496
OKLAHOMA CITY, OK 73154-04963b. Phone No. (include area code)
Ph: 405-935-42754. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 24 T10S R29E SWNW 1980FNL 660FWL

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 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" 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 recomple 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 recomple 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.)

8/01/2009 MIRU MESA WELL SERV. TBG & CSG @ 2000#, COULD NOT GET WELL TO BLOW DOWN BELOW 120#. WILL NEED TO GET KILL TRUCK.

8/04/2009 TBG & CSG @ 1600#, BLOW WELL DOWN TO TANK. PUMPED 20 BBLS BRINE WTR DOWN CSG & 15 BBLS DOWN TBG TO KILL WELL. NDWH/NUBOP, GOT KICK FROM CSG CONTINUED PUMPING BRINE DOWN BACKSIDE. STARTED POH W/36 STANDS 2 3/8" N-80 TBG. GOT ANOTHER KICK, TURNED WELL INTO TANK & WAIT 15 MIN FOR ANOTHER LOAD BRINE. PUMPED 10 BBLS & CONTINUED OUT OF HOLE W/REST OF TBG & SN.

8/05/2009 PULLING UNIT HAD BUSTED RADIATOR HOSE. TIH W/2 3/8" X 4 1/2" LOC SET PKR TESTING TBG BACK IN HOLE. FOUND ONE PIN HOLE. CIRCULATED 105 BBLS PKR FLUID, NDBOP/NUWH, SET PKR @ 9053'. TESTED TO 500#, GOOD TEST. WILL MIT IN AM.

Accepted for record
NMOC DLT

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #73016 verified by the BLM Well Information System
For CHESAPEAKE OPERATING INC, sent to the Roswell
Committed to AFMSS for processing by DAVID GLASS on 08/10/2009 (09DG0375SE)

Name (Printed/Typed) LINDA GOOD

Title SR. REGULATORY COMPLIANCE SPEC

Signature (Electronic Submission)

Date 08/10/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By DAVID R GLASS

Title PETROLEUM ENGINEER

Date 08/12/2009

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 Roswell

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 **

TA APPROVED FOR 12 MONTH PERIOD
ENDING AUG 06 2010

Additional data for EC transaction #73016 that would not fit on the form

32. Additional remarks, continued

8/06/2009 MIRU TRUCK W/CHART RECORDER, BLM DID NOT SHOW. PRESSURED UP TO 545# ON CHART, HELD FOR 30 MIN, HAD A 3# LOSS, GOOD TEST. RDMO. FINAL REPORT.

MIT CHART ATTACHED.

(CHK PN 890385)

INNOCD
Accepted for record

Revisions to Operator-Submitted EC Data for Sundry Notice #73016

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	TA SR	TA SR
Lease:	NMNM12269	NMNM12269
Agreement	NMNM72070	NMNM72070
Operator	CHESAPEAKE OPERATING, INC. P.O. BOX 18496 OKLAHOMA CITY, OK 73154-0496 Ph: 405-935-4275	CHESAPEAKE OPERATING INC P O BOX 18496 OKLAHOMA CITY, OK 73154-0496 Ph: 405.767 4275
Admin Contact:	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail: linda.good@chk.com Ph 405-935-4275	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail linda good@chk.com Ph: 405-935-4275
Tech Contact:	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail: linda.good@chk.com Ph 405-935-4275	LINDA GOOD SR REGULATORY COMPLIANCE SPEC E-Mail linda good@chk.com Ph. 405-935-4275
Location. State: County:	NM CHAVES	NM CHAVES
Field/Pool:	SAND RANCH	SAND RANCH-ATOKA, SOUTH SAND RANCH-MORROW
Well/Facility	EXXON FEDERAL COM 1 Sec 24 T10S R29E SWNW 1980FNL 660FWL	EXXON FEDERAL COM 1 Sec 24 T10S R29E SWNW 1980FNL 660FWL

