Submit 3 Copies To Appropriate District Office District I Ene	State of New Mexico rgy, Minerals and Natural Resources	Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-025-37863
1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410	CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE X
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
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.)		7. Lease Name or Unit Agreement Name BP America 15
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 003
Name of Operator Chesapeake Operating, Inc.		9. OGRID Number 147179
3. Address of Operator P. O. Box 11050		10. Pool name or Wildcat
Midland, TX 79702-8050		Nadine;Drinkard-Abo
4. Well Location Unit Letter A: 990 feet from the North line and 990 feet from the East line		
Unit Letter A : 990 feet from the North line and 990 feet from the East line Section 15 Township 19S Range 38E NMPM CountyLea		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3588 GR Pit or Below-grade Tank Application or Closure		
	l Distance from nearest fresh water well <u>1000+</u> Dist	tance from nearest surface water 1000+
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume 12139 bbls; Construction Material plastic		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
OTHER:Pit	X 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, requests that the attached procedure be approved for the drilling pit for this well. chesapeake, hereby, agrees to close the pit according to NMOCD guidelines.		
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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 STEMBER OF	TITLE Regulatory Analyst	DATE 01/21/2005
Type or print name Brenda Coffman For State Use Only	E-mail address:bcoffman@ch	Telephone No. (432)687-2992 JAN 2 5 2005
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):	PAUL F. KAUTZ	



