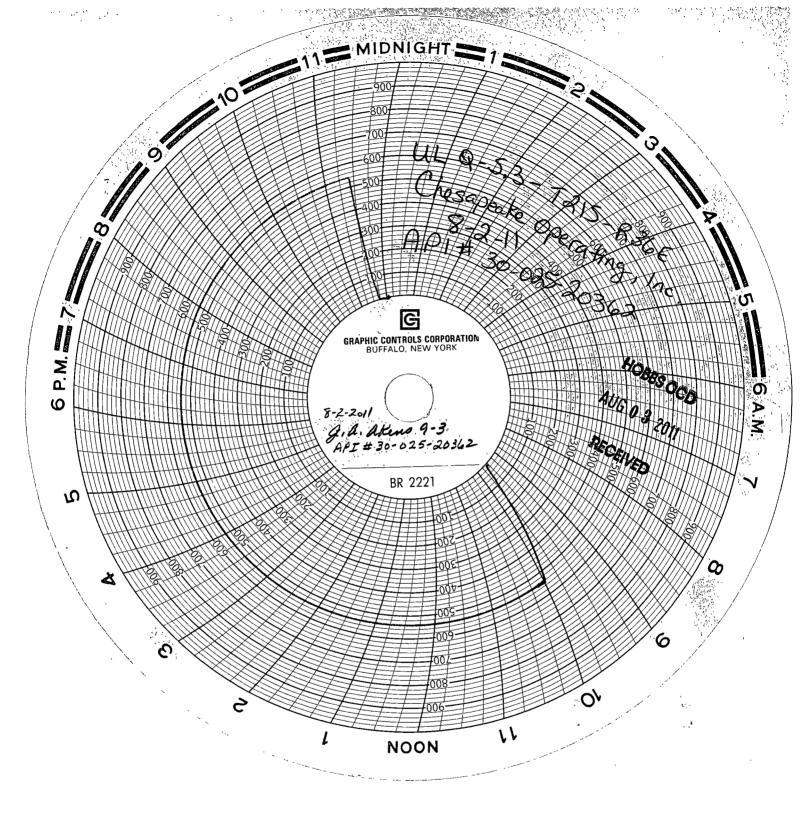
Office Office	State of New Me		Form C-103
District I	Energy, Minerals and Natu	iral Resources	October 13, 2009 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II			30-025-20362
1301 W. Grand Ave., Artesia, NM 88210	and Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III 1220 South St. Francis Dr.		STATE FEE X	
District IV	000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM			
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			J A Akens
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			,
PROPOSALS.)  1. Type of Well: Oil Well X Gas Well Other		8. Well Number 9	
2. Name of Operator Chesapeake Operating, Inc.			9. OGRID Number
			147179 V
3. Address of Operator P.O. Box 18496 Oklahoma City, OK 73154			
4. Well Location			Oil Center, Blinebry (47960)
	1649' feet from the South	line and 99	0' feet from the East / line
Section 3		ange 36E	NMPM CountyLea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
	3539' GR		The second secon
12. Check Ap	opropriate Box to Indicate N	lature of Notice,	Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK			
TEMPORARILY ABANDON			
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMEN		<del>_</del>	
DOWNHOLE COMMINGLE	_		_
_	<u></u>		<u>_</u>
OTHER:	4-1	OTHER: MIT Cha	
			d give pertinent dates, including estimated date mpletions: Attach wellbore diagram of
proposed completion or recor		•	
Chesapeake Operating, Inc. respec	tfully submits MIT chart to extend	d TA for two years.	30 minute test with starting psi of 540# and
ending psi of 540#.	-		
A 24 hour notice was given to the NMOCD.			HOBBS OCD
Thio Amazza			AUG 0 3 2011
This Approval of Temporary Abandonment Expires			Hod o zon
The definition Expires _0-2-2013			Code do care acres.
n store Programs			RECEIVED
			<u> </u>
Spud Date:	Rig Release Da	ate:	
Ł	<b></b>		
I hereby certify that the information at	ove is true and complete to the bo	est of my knowledg	ge and belief.
SIGNATURE TITLE Production Assistant			DATE 08/03/2011
<u> </u>			
Type or print name Pat Richards E-mail address: pat.richards@chk.com PHONE: (575)391-1462  For State Use Only			
For State Use Univ		•	,
APPROVED BY: FINGE DATE 8-4-7011			
Conditions of Approval (if any):	/		
_ //			



Chesapeake

JA Akens #9

Paul Skaggs TF##22

8:2-11

60 seclock 30 min Test

Myn Cel. butel 6-30-11