

WELL API NO.

30-025-26221

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
QUAIL QUEEN UNIT

8. Well Number 3Y

9. OGRID Number 147719

10. Pool name or Wildcat

QUEEN SWD

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.)1. Type of Well: Oil Well ☐ Gas Well ☐ Other INJECTION SWD

2. Name of Operator Chesapeake Operating, Inc.

3. Address of Operator P.O. Box 18496
Oklahoma City, OK 73154

4. Well Location

Unit Letter I : 1841 feet from the South line and 759 feet from the East line
Section 11 Township 19S Range 34E NMPM County Lea11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3960' GR

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 ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS ☐ P.A.N.D.A. ☐
CASING/CEMENT JOB ☐OTHER: Tubing/Casing repair, Reset packer and run MIT ☒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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Chesapeake Operating, Inc. respectfully notices the OCD of a tubing/casing communication. Planned activity is to hydro test packer & production tubing in hole, Circulate hole w/packer fluid, set packer and test annulus. OCD will be notified in advance in order to witness test. A well bore diagram and C-144 (CLEZ) permit is attached.

Per Underground Injection Control Program Manual
11.6 C Packer shall be set within or less than 100
feet of the uppermost injection perfs or open hole.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE Senior Regulatory Compl. Spec.

DATE 09/29/2011

Type or print name Bryan Arrant

E-mail address: bryan.arrant@chk.com

PHONE: (405)935-3782

For State Use Only

APPROVED BY:

TITLE

DATE 10-3-2011

Condition of Approval: Notify OCD Hobbs
office 24 hours prior to running MIT Test & Chart.

OCT 03 2011



BLM Schematic
QUAIL QUEEN UNIT 3

CONFIDENTIAL

Field: QUAIL QUEEN
County: LEA
State: NEW MEXICO
Location: SEC 11-19S-34E, 1841 FSL & 759 FEL
Elevation: GL 3,960.0 KB 3,970.0
KB Height: 10.0

Spud Date: 2/14/1979
Initial Compl. Date:
API #: 3002526221
CHK Property #: 891045
1st Prod Date: 4/1/1979
PBDT: Original Hole - 5450.0
TD: 5,600.0

