Submit 3 Copies To Appropriate District Office District State of New Energy, Minerals and	
1625 N. French Dr., Hobbs, NM 88240	WELL API NO. 30-025-36724
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1220 South St.	ON DIVISION  5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM	SIAIE   FEE
1220 S. St. Francis Dr., Santa Fe, NM 87505	rederal
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 Querecho Plains Federal Com	
PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other	8. Well Number 3
2. Name of Operator Chesapeake Operating, Inc.	9. OGRID Number 147179
3. Address of Operator P. O. Box 11050 Midland, TX 79702-8050	10. Pool name or Wildcat  Querecho Plains;Upper BS
4. Well Location	
Unit Letter N: 760 feet from the South line and 1930 feet from the West line	
Section 22 Township 18S  11. Elevation (Show whether	Range 32E NMPM CountyLea
Pit or Below-grade Tank Application or Closure  Pit type Depth to Groundwater 100'+10 Distance from nearest fresh water well 100' Distance from nearest surface water 100'+1-	
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume 12 139 bbls; Construction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING	
TEMPORARILY ABANDON	
PULL OR ALTER CASING	CASING/CEMENT JOB
OTHER:Close existing pit	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 request permission to close the pit for this well. We will follow the NMOCD Guidelines B36.  TV. A. B (1/2004)	
IV. A. B. 11/2004	
	4
The state of the s	
	of areal state
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 TITLE Regulatory Analyst DATE 06/16/2005	
Type or print name Brenda Coffman	nil and the same of the same o
For State Use Only	Williams.
APPROVED BY: Chie Cillian DATE	
Conditions of Approval (if any):	