Submit, I Copy To Appropriate District Office	State of New Mexico	Form C-103
District 1 – (575) 393-6161 En	ergy, Minerals and Natural Resources	Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 8824 BBS OCD District II – (575) 748-1283	W. CONGERNATION DIVIGION	30-025-40551
811 S. First St., Artesia, NM 88210	IL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 1 1 2012	Santa Fe, NM 87505	STATE X FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Salita PC, INIVI 67303	6. State Oil & Gas Lease No.
87505 RECEIVED	D DEDORTO ON WELL C	7. Land Name of Heit Assessment Name
(DO NOT USE THIS FORM FOR PROPOSALS TO I DIFFERENT RESERVOIR. USE "APPLICATION FO		7. Lease Name or Unit Agreement Name MCCLOY RANCH 2 24 32 STATE COM
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well	1 Other	8. Well Number 1
Name of Operator Chesapeake Operating		9. OGRID Number 147179
3. Address of Operator P.O. Box 18496	,	10. Pool name or Wildcat
Oklahoma City, OK	73154	TRISTE DRAW; BONE SPRING
4. Well Location		
Unit Letter N : 100'	feet from the South line and 198	
Section 2	Township 24S Range 32E evation (Show whether DR, RKB, RT, GR, etc.)	NMPM County LEA
3616'	•	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	AND ABANDON ☐ REMEDIAL WOR	
TEMPORARILY ABANDON CHAN	GE PLANS 🔲 COMMENCE DR	ILLING OPNS. □ P AND A □
	PLE COMPL CASING/CEMEN	T JOB
DOWNHOLE COMMINGLE		
OTHER:	OTHER: Product	ion Casing Pressure Test X
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.		
On 9/12/2012, Test 5 1/2" Production Casi	ng 1000 psi for 30 minutes. Test Good.	
		RECEIVED
		OCT 01 2012
		NMOCD ARTESIA
		NIVIOGE ATTLOIA
Spud Date:	Rig Release Date:	
'		
		11 C
I hereby certify that the information above is	thue and complete to the best of my knowledg	ge and belief.
B	h	
SIGNATURE / Jy	TITLE Regulatory Specialist II	DATE <u>09/17/2012</u>
Type or print name Bryan Arrant	E-mail address: bryan arrant@ch	PHONE: (405)935-3782
For State Use Only	Petroleum Engine	
APPROVED BY:	TITLETITLE	er FEB 20 2013
Conditions of Approval (ILany):	* *	· ————————————————————————————————————