

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

MAY 14 2014

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-025-22049 ✓
2. Name of Operator CHAPARRAL ENERGY, LLC ✓		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 701 CEDAR LAKE BLVD. OKLAHOMA CITY, OK 73114		6. State Oil & Gas Lease No. K-1763
4. Well Location Unit Letter <u>K</u> : <u>1980</u> feet from the <u>SOUTH</u> line and <u>1980</u> feet from the <u>WEST</u> line Section <u>21</u> Township <u>11S</u> Range <u>33E</u> NMPM County <u>LEA</u>		7. Lease Name or Unit Agreement Name STATE "K" ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4271' GR		8. Well Number 1 ✓
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		9. OGRID Number 004115 ✓
		10. Pool name or Wildcat NORTH BAGLEY PERMO PENN

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

- 4/8/14- SQZ. 125SX CMT @ 3500' TAG @ 3757' SPOKE W/ MAXIE BROWN, ADVISED TO SPOT 30SX CMT @ 3757' & MOVE ON
- 4/9/14- SPOT 20SX CMT @ 3757' CIRC. MUD FROM 3650' TO 1600' PERF @ 1635' SQZ. 50SX CMT
- 4/10/14- NO TAG ATT. TO EST. INJ. RATE- PRES. UP TO 1000 P.S.I. SPOKE W/ MAXIE BROWN, ADVISED TO SPOT 30SX CMT & TAG. SPOT 30SX @ 1650'
- 4/11/14- TAG @ 1531' TAG ADVISED BY MAXIE BROWN, ALSO ADVISED TO PERF @ 438' SQZ 60SX & TAG. SKIP STEP #5, PERF @ 438' PRES. UP TO 1000 P.S.I. SPOKE W/ MAXIE BROWN, ADVISED TO SPOT 50SX CMT & TAG
- 4/14/14- TAG @ 300' SPOKE W/ MAXIE BROWN, ADVISED TO TAG & CUT OFF W.H. SPOT CMT FROM 60' TO SURF W/ 25SX CMT.

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 Lindsay Reames TITLE General Manager DATE 4/15/14

Type or print name lindsay.reames@chaparralenergy.com E-mail address: 405.426.4549 Telephone No.

APPROVED BY: Maxie Brown TITLE Dist. Supervisor DATE 5/5/2014

Conditions of Approval (if any):
 MAY 05 2014