

Submit To Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, 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 Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-105 Revised June 10, 2003																														
		WELL API NO. 30-025-36794																														
		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>																														
		State Oil & Gas Lease No.																														
WELL COMPLETION OR RECOMPLETION REPORT AND LOG																																
1a. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER _____		7. Lease Name or Unit Agreement Name CC 3 State																														
b. Type of Completion: NEW <input type="checkbox"/> WORK <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> PLUG <input type="checkbox"/> DIFF. WELL OVER BACK RESVR. <input type="checkbox"/> OTHER																																
2. Name of Operator Chesapeake Operating Inc.		8. Well No. 001																														
3. Address of Operator P. O. Box 11050 Midland, TX 79702-8050		9. Pool name or Wildcat <i>Wildcat</i> Undesignated, Bonesprings																														
4. Well Location Unit Letter M 990 Feet From The South Line and 990 Feet From The West Line Section 3 Township 21S Range 35E NMPM Lea County																																
10. Date Spudded 08/09/2005	11. Date T.D. Reached	12. Date Compl. (Ready to Prod.) 08/23/2005																														
13. Elevations (DF& RKB, RT, GR, etc.) 3622 GR		14. Elev. Casinghead																														
15. Total Depth 11934	16. Plug Back T.D. 8430	17. If Multiple Compl. How Many Zones?																														
18. Intervals Drilled By		19. Producing Interval(s), of this completion - Top, Bottom, Name																														
20. Rotary Tools		21. Cable Tools																														
22. Was Directional Survey Made No		23. Type Electric and Other Logs Run None																														
24. Was Well Cored No		25. CASING RECORD (Report all strings set in well)																														
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28. Perforation record (interval, size, and number) 10650' CIBP 8478 - 8503 4 spf 101 holes																																
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28 PRODUCTION																																
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)																														
Well Status (Prod. or Shut-in) Shut In																																
Date of Test	Hours Tested	Choke Size																														
Prod'n For Test Period	Oil - Bbl	Gas - MCF																														
Water - Bbl.	Gas - Oil Ratio																															
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate																														
Oil - Bbl.	Gas - MCF	Water - Bbl.																														
Oil Gravity - API - (Corr.)																																
29. Disposition of Gas (Sold, used for fuel, vented, etc.)		Test Witnessed By																														
30. List Attachments																																
31. I hereby certify that the information shown on both sides of this form as true and complete to the best of my knowledge and belief																																
Signature <i>Brenda Coffman</i>		Printed Name Brenda Coffman																														
E-mail Address bcoffman@chkenergy.com		Title Regulatory Analyst																														
		Date 10/05/2005																														

2A Wildcat Wolfcamp