Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Reso	Form C-103 ources May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u>		WELL API NO. 30-025-37054
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVIS 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE FEE X 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
(DO NOT USE THIS FORM FOR PROPO	ICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK ICATION FOR PERMIT" (FORM C-101) FOR SUCH	
Type of Well: Oil Well Gas Well Other 2. Name of Operator		8. Well Number 001
Chesapeake Operating, Inc.		9. OGRID Number 147179
	x 11050 TX 79702-8050	10. Pool name or Wildcat Townsend; Mississippian, North (Gas)
4. Well Location Unit Letter N:	1310 feet from the South lin	1250
Section 25	1310 feet from the South lii Township 16S Range 35	
	11. Elevation (Show whether DR, RKB, R	
Pit or Below-grade Tank Application	3961 or Closure	
Pit typeDepth to Groundy	vaterDistance from nearest fresh water well_	Distance from nearest surface water
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; Construction Material
	CHANGE PLANS COMM	SUBSEQUENT REPORT OF: DIAL WORK
OTHER:	OTHER	R:Perf/Acid/Frac
 Describe proposed or comp of starting any proposed we or recompletion. 	oleted operations. (Clearly state all pertinent ork). SEE RULE 1103. For Multiple Comp.	details, and give pertinent dates, including estimated date letions: Attach wellbore diagram of proposed completion
9-29-05 MIRU Key WS, POOH w 9-30-05 Finish POOH w/rods and p 10-01-05 RIH w/sub, Arrow Set 1 10-03-05 Swab 10-05-05 Left flow to production t 10-08-05 Made 18 MCF gas. Place	oump. X pkr, SN and 280 jts. 2 3/8" tbg. ank. SDFN	5 0 2 2 2 2 3 2 4 2 5 3 6 3 3 5 3 6 3 3 5 6 3 5 6 3 5 6 3 5 6 5 6
		1415/475 1677
		08783
I hereby certify that the information grade tank has been will be constructed or	cipsed actording to NMIOCD guidennes [], a general	knowledge and belief. I further certify that any pit or below- al permit or an (attached) alternative OCD-approved plan .
SIGNATURE SOM WOOL	Olyman TITI F Regulatory	THE PARTY OF THE P
Type or print name Brenda Coffman For State Use Only	111ED-118	AND LEUM ENGINEER DATE 10/20/2005
For State Use Only		Offman@chkenergy.com Telephone No. (432)687-2992