| Submit 3 Copies To Appropriate District Office | State of New Mexico | | | | Form C-103 | |
|--|---|-----------|------------------------|------------------------|--------------------------------|--|
| District I | Energy, Minerals and Natural Resources | | | WELL API NO | May 27, 2004 | |
| 1625 N. French Dr., Hobbs, NM 88240 District II | OIL CONCEDIATION DIVISION | | | WEELTHING | 30-025-37130 | |
| 1301 W. Grand Ave., Artesia, NM 88210 District III | NM 88210 OIL CONSERVATION DIVISION 1220 South St. Francis Dr. | | | 5. Indicate Typ | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe NIM 87505 | | | STATE 6. State Oil & O | | | |
| 1220 S. St. Francis Dr., Santa Fe, NM | | | | 0. State Off & C | Jas Lease 140. | |
| 87505 + (Y)Q()QQ() SUNDRY NOTICES AND REPORTS ON WELLS | | | | 7 Lease Name | or Unit Agreement Name | |
| (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.) | | | | CHAVLEA 19 | STATE | |
| 1. Type of Well: Oil Well | Gas Well X Other | B | CEIVED | 8. Well Numbe | 001 | |
| Name of Operator Chesapeake Operating Inc. | | | C 5 2005 | 9. OGRID Number 147179 | | |
| 3. Address of Operator P.O. Box 11050 Midland, TX 79702-8050 | | بان | Caprock; Mo | | or Wildcat row, West (Gas) | |
| 4. Well Location | | | | | | |
| Unit Letter M: 660 feet from the S line and 660 feet from the W line | | | | | | |
| Section 19 | Township 12S | | inge 32E | NMPM | CountyCHAVES | |
| | 11. Elevation (Show who | etner DR, | KKB, RI, GR, etc., | | | |
| Pit or Below-grade Tank Application 🔲 o | | | | P*, 4.8 | | |
| Pit type Depth to Groundwater 100 + Distance from nearest fresh water well Distance from nearest surface water | | | | | | |
| Pit Liner Thickness: mil | Below-Grade Tank: Vol | ume | bbls; Co | onstruction Material | | |
| 12. Check A | Appropriate Box to Inc | licate N | ature of Notice, | Report or Othe | er Data | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR | | | | | ALTERING CASING | |
| TEMPORARILY ABANDON | CHANGE PLANS | | COMMENCE DR | | P AND A | |
| PULL OR ALTER CASING | MULTIPLE COMPL | | CASING/CEMEN | T JOB | | |
| OTHER:CLOSE PIT | | X | OTHER: | | П | |
| 13. Describe proposed or comp | oleted operations. (Clearly | state all | pertinent details, an | d give pertinent d | ates, including estimated date | |
| of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. | | | | | | |
| PLEASE, DISREGARD PREVIOUS C-103, PITS HAVE NOT BEEN CLOSED. | | | | | | |
| CHESAPEAKE, HEREBY, REQUEST TO CLOSE THE PIT FOR THIS WELL ACCORDING TO NMOCD GUIDELINES #B3b. WE WILL DIG 2 PITS AT A DEPTH OF 18-25 FT USING 40 MIL PLASTIC IN PIT AND 20 MIL ON TOP. WE WILL THEN TOP WITH 3' OF CLEAN DIRT OFF OF SITE. | | | | | | |
| | | | | | | |
| | | | | | 0 13 14 000 | |
| | | | | 7017 | 767 | |
| | | | | Ser Re | C CONOCO CO | |
| | | | | \(\delta\) | Page 6 mg | |
| | | | | S DE | ceived by | |
| | | | | 10 | (10- | |
| | | | | 1. | OCD (C) | |
| | | | | 180 | | |
| | | | | and the second | 58.070.65% | |
| 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 [X], a general permit [or an (attached) alternative OCD-approved plan []. | | | | | | |
| SIGNATURE SIGNATURE | tiellin. | TITLE Pr | oduction/Regulator | y Asst. | DATE 11/30/2005 | |
| Type or print name Shay Stricklin For State Use Only | - | E-mail a | ddress:sstricklin@c | hkenergy.com | Telephone No. (432)687-2992 | |
| //. | Mel | AP NIL | make with the own | | • | |
| APPROVED BY: Mus (| William | TITLE'ST | PICT SUPERVISOR | NGENERAL MAN | DATE | |
| Conditions of Approval (if any): | | | | - *** * * * ****** | DEC 1 4 2005 | |