Submit 3 Copies To Appropriate District Office	State of New M			Form C-103
District I	Energy, Minerals and Natural Resources		Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO.	
1301 W. Grand Ave., Artesia, NM 88210			30-025-36229	
District III 1000 Rio Brazos Rd., Aztec, NM 87410			5. Indicate Type of Lease	
vistrict IV Santa Fe, NM 8/505		7505	STATE FEE 6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505		0.	State Off & Gas Leas	e No.
SUNDRY NOTION (DO NOT USE THIS FORM FOR PROPOSE)	CES AND REPORTS ON WELLS	S 7.	Lease Name or Unit A	greement Name:
DIFFERENT RESERVOIR. USE "APPLIC	ATION FOR PERMIT" (FORM C-101)	LUG BACK TO A FOR SUCH		
PROPOSALS.)	(	<b>!</b>	77 1 77 00	
1. Type of Well: Oil Well X Gas Well Other			Frank T 22	1
2. Name of Operator	Other			
Chesapeake Operating,	Tnc	8.	Well No.	
3. Address of Operator				
P. O. Box 18496, Okla. City, OK 73154-0496			9. Pool name or Wildcat	
4. Well Location			amond Strawn	
		•		
Unit Letter C:	550 feet from the North	line and 1650	feet from the	Westline
Section 22	Township 16S R	ange 36E NM	IPM Lea County	v
	10. Elevation (Show whether D	R, RKB, RT, GR, etc.)		
11. Check A	GR: 3896' ppropriate Box to Indicate N	Jatura of Notice Don	art or Other D-4	
NOTICE OF IN	TENTION TO:			
PERFORM REMEDIAL WORK	PLUG AND ARANDON (T		QUENT REPORT	
	1 COO AND ADAMBON	REMEDIAL WORK	☐ ALTER	ING CASING 🔲
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	<del></del>	···-
PULL OR ALTER CASING	MULTIPLE  COMPLETION	CASING TEST AND CEMENT JOB		ONMENT
OTHER:		OTHER: Spud, 13-	·3/8" csg	X
12. Describe proposed or completed	operations. (Clearly state all pert	inent details, and give per	rtinent dates, including	estimated date of
starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.				
	/Patterson Drlg rig #311	L @3:00 p.m.		
06/30/03 RU csg crew, run 10 jts 13-3/8" 48# H-40 STC csg, set @440', circ, RD csg crew,				
RUnCmt Crew, cmt $w/220$ sx Cl. C, tail $w/220$ sx Cl. C + additives, bump plug, gloat held,				
circ 58 sx cmt to surface, RD cmt crew, WOC.				
07/02/03 WOC, cut off csg, weld on csg head, test to 1000#, NU BOPs, test same 250#-1500#,				
MU bit & stabilizers @60' & 90', TIH, tag cmt @390', break circ, attemptto unplug				
2 jet nozzles, no success, TOOH, break off bit, unplug 2 jets plugged w/cmt, TIH to 390', drlg cmt, plug & float, test csg to 750#				
390), drig emt, pi	ig & float, test csg to	/50#		
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			[	"ED 3"."
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE BALLAN	) / L . O .	Regulatory Analyst	/5	07/03/03
Type or print name Barbara J.		Couractory Amaryst	DATE	7777560 V
(This space for State use)	Date		Telephone No.	(405) 848-8000
^1	OC FIELD DEDI	DECEN		JUL 08 2000
APPPROVED BY Laww. Conditions of approval, if any.	wink TITLE	RESENTATIVE II/STAFF A	MANAGEP DATE	
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