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Energy, Minerals and Natural Resources Hobbs.NM 88240 OIL CONSERVATION DIVISION	appropriate District	State of New Mexico	Form C-103	
Hobbs. NM 83210 OIL CONSERVATION DIVISION S. Indicate Type of Lease STATE FEE C.			es <u>May 27, 2004</u>	
Distinct III 1220 South St. Francis Dr. Santa Fe, NM 87505 STATE M FEE	D Alleway		WELL API NO. 30-025-36373	
1000 Rib Brazos Rd. Arter, NM 47410 Santa Fe, NM 87505 G. State Oil & Gas Lease No.			5. Indicate Type of Lease	
12.05 St. Francis Dr., Santa Fe, NM 12.05 St. Francis Dr., Santa Dr., Santa Fe, NM 12.05 St. Francis D				
SUNDRY NOTICES AND REPORTS ON WELLS ON NOT USE THIS FORM FOR PROPOSALS TO DRIELL OR TO DEFEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH REPORDAS. 13. 1. Type of Well: Oil Well	1220 S. St. Francis Dr., Santa Fe, NM	Saita 1 6, 1 (1) 1 0 / 3 (3)	o. State Off & Gas Lease No.	
1. Type of Well: Oil Well	SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Trinity Burrus Abo Unit	
Chesapeake Operating Inc. 3. Address of Operator P.O. Box 11050		Gas Well Other	8. Well Number 22	
3. Address of Operator P.O. Box 11050 Midland, TX 79702-8050 4. Well Location Unit Letter M : 990 feet from the South line and 1200 feet from the West line Section 23 Township 12S Range 38E. NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3793 GR Pit or Below-grade Tank Application or Closure Distance from nearest fresh water well bistance from nearest surface water Pit type Depth to Groundwater Distance from nearest fresh water well bistance from nearest surface water Pit Liner Thickness: mill Below-Grade Tank: Volume bbls: Construction Material 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE BRILLING OPNS. PAND A CASING/CEMENT JOB OTHER: 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. Due to the completion and approval of the Burrus Water Flood the lease name will change from State DZ #2 to Trinity Burrus Abo Unit #22. OPER. OGRID NO. 14179 PROPERTY NO. 3D.025: 32323 Thereby 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-		On anatin - In a	9. OGRID Number 147179	
Midland, TX 79702-8050 Trinity; Wolfcamp				
4. Well Location Unit Letter M : 990	Midland,	TX 79702-8050		
Section 23 Township 12S Range 38E NMPM CountyLea	4. Well Location		Trimey, worreamp	
Thereby certify that the information above is true and complete to the best of my knowledge and belief. Turther certify that any pit or betowning process Turther certif	Unit Letter M:		d 1200 feet from the West line	
Pit type	Section 23			
Pit type	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3793 GR			
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB OTHER: OTHER: Change name MULTIPLE COMPL CASING/CEMENT JOB 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 and approval of the Burrus Water Flood the lease name will change from State DZ #2 to Trinity Burrus Abo Unit #22. OPER. OGRID NO. 14179 PROPERTY NO. 59990 POOL CODE MAY 11100 PROPERTY NO. 59990 POOL CODE MAY 11100 APRIL 1110 Thereby 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-				
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	POOL CO	DDEMAY 01 2006	12. 13. 16 17 18 19 10 10 10 10 10 10 10 10 10 10 10 10 10	
grade tank has been/will be constructed or closed according to NMOCD guidelines \(\Bar{\chi} \), a general permit \(\Bar{\chi} \) or an (attached) alternative OCD-approved plan \(\Bar{\chi} \).				

TITLE Regulatory Assistant SIGNATURE DATE 06/13/2006 Type or print name Shay Stricklin
For State Use Only E-mail address: sstricklin@chkenergy.com Telephone No. (432)687-2992 ETRUET SUPERVISOR/GENERAL MANAGER

APPROVED BY: Conditions of Approval (if any):

DUNE 1 5 2006