

Submit To Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Avenue, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 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. 30-025-37748 5. Indicate Type of Lease STATE ☐ FEE ☒ State Oil & Gas Lease No.
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WELL COMPLETION OR RECOMPLETION REPORT AND LOG					
1a. Type of Well: OIL WELL ☐ GAS WELL ☒ DRY ☐ OTHER _____ b. Type of Completion: NEW ☒ WORK ☐ DEEPEN ☐ PLUG ☐ DIFF. WELL OVER BACK RESVR. ☐ OTHER _____			7. Lease Name or Unit Agreement Name Berry 1		
2. Name of Operator Chesapeake Operating Inc.			8. Well No. 2		
3. Address of Operator P. O. Box 11050 Midland, TX 79702-8050			9. Pool name or Wildcat Shipp; Strawn		
4. Well Location Unit Letter <u>F</u> <u>1451</u> Feet From The <u>North</u> Line and <u>1614</u> Feet From The <u>West</u> Line Section <u>1</u> Township <u>17S</u> Range <u>37E</u> NMPM <u>4</u> Lea County					
10. Date Spudded	11. Date T.D. Reached	12. Date Compl. (Ready to Prod.)	13. Elevations (DF& RKB, RT, GR, etc.)	14. Elev. Casinghead	
	04/16/2006		3746 GR		
15. Total Depth	16. Plug Back T.D.	17. If Multiple Compl. How Many Zones?	18. Intervals Drilled By	Rotary Tools	Cable Tools
11950	0				
19. Producing Interval(s), of this completion - Top, Bottom, Name					20. Was Directional Survey Made Yes
21. Type Electric and Other Logs Run DLL/MG; CS; SGR/DSN				22. Was Well Cored No	

23. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8	48	435	17 1/2	370 sx Prem+	
8 5/8	32	4510	11	1035 sx C	
5 1/2	17	11950	7 7/8	450 sx LAP-1	

24. LINER RECORD					25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

26. Perforation record (interval, size, and number) 11690 - 730 4 spf (161 holes) CIBP @ 11680 w/1sx cmt. 11619 - 666 CIBP @ 11575 w/4 sx cmt (35' of cmt.) Top plug (Item #27) 131 sx cmt to surface.	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> <tr> <td>6732 - 6632</td> <td>35 sx cmt plug.</td> </tr> <tr> <td>4560 - 4454</td> <td>30 sx cmt plug.</td> </tr> <tr> <td>2200 - 2100</td> <td>30 sx cmt plug.</td> </tr> </table>	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	6732 - 6632	35 sx cmt plug.	4560 - 4454	30 sx cmt plug.	2200 - 2100	30 sx cmt plug.
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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) Plugged & Aband.	
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 Logs, Inclination Report	
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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 <u>Brenda Coffman</u>	Printed Name <u>Brenda Coffman</u>	Title <u>Regulatory Analyst</u>	Date <u>08/28/2006</u>
E-mail Address <u>bcoffman@chkenergy.com</u>			

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 25 through 29 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn "B"
T. Salt	T. Strawn 11602	T. Kirtland-Fruitland	T. Penn. "C"
B. Salt	T. Atoka	T. Pictured Cliffs	T. Penn. "D"
T. Yates 3367	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers 3694	T. Devonian	T. Menefee	T. Madison
T. Queen	T. Silurian	T. Point Lookout	T. Elbert
T. Grayburg 4858	T. Montoya	T. Mancos	T. McCracken
T. San Andres 5223	T. Simpson	T. Gallup	T. Ignacio Otzte
T. Glorieta 6682	T. McKee	Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T.
T. Blinbry	T. Gr. Wash	T. Morrison	T.
T. Tubb 8406	T. Delaware Sand	T. Todilto	T.
T. Drinkard	T. Bone Springs 8866	T. Entrada	T.
T. Abo	T.	T. Wingate	T.
T. Wolfcamp	T.	T. Chinle	T.
T. Penn 11339	T.	T. Permian	T.
T. Cisco (Bough C)	T.	T. Penn "A"	T.

OIL OR GAS SANDS OR ZONES

No. 1, from.....to..... No. 3, from.....to.....
 No. 2, from.....to..... No. 4, from.....to.....

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....
 No. 2, from.....to.....feet.....
 No. 3, from.....to.....feet.....

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology	From	To	Thickness In Feet	Lithology
0	2142	2142	Redbeds				
2142	3367	1225	Anhy/Salt				
3367	4858	1491	Sd/Anhy/Salt/Dolo				
4858	5223	365	Dolo/Sd				
5223	6682	1459	Dolo/Anhy				
6682	8866	2184	Dolo/sand/shale				
8866	11339	2473	Lm/Dolo/Sd				
11339	11602	263	Shale				
11602	11802	200	Lm				
11802	11950	148	Sd/Lm/Shale				