Unnce	state of New Mexico Minerals and Natural Resources	Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II	NSERVATION DIVISION	WELL API NO - 38103
District III 122	0 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
SUNDRY NOTICES AND REPORTS ON WELLS (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		7. Lease Name or Unit Agreement Name Millard Deck Estate 28 Federal
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other		8. Well Number 1
Name of Operator Chesapeake Operating Inc.		9. OGRID Number 147179
3. Address of Operator P. O. Box 11050 Midland, TX 79702-8050		10. Pool name or Wildcat Langley
4. Well Location		
Unit Letter B: 965 feet from the North line and 1590 feet from the East line		
Section 28 Township 22S Range 36E NMPM CountyLea		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3505 GR		
Pit or Below-grade Tank Application X or Closure		
Pit type Drilling Depth to Groundwater 160 Distance from nearest fresh water well 1 mile Distance from nearest surface water 1000		
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume 12129 bbls; Construction Material synthetic		
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:Drilling Pit 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.		
Chesapeake, hereby, request permission to build a drilling pit for this well according to the attached pit diagram.		
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 , a general permit or an (attached) alternative OCD-approved plan .		
SIGNATURE BLIMB Offm	TITLE Regulatory Analyst	DATE 07/27/2006
Type or print name Brenda Coffman For State Use Only	E-mail address:bcoffman@c	hkenergy.com Telephone No. (432)687-2992
The All	OC DISTRICT SUPERVISOR	VGENERAL MANAGER
APPROVED BY: // // // // Conditions of Approval (if any):	TITLE	DA PEP 1 2 2006

