Form 3160-5 (April 2004)

1. Type of Wel

3a Address

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

M B No. 1004-0137 bires: March 31, 20

SUNDRY NOTICES AND REPORTS ON WELLS

	UNITED STATES DEPARTMENT OF THE INTERI	ion	O-HOBBS FORM APPROVED OMB No. 1004-0137 Expires: March 31, 2007
	BUREAU OF LAND MANAGEMEN NOTICES AND REPORTS		5. Lease Serial No. NMNM-68821
Do not use ti	his form for proposals to drill c rell. Use Form 3160-3 (APD) for	6. If Indian, Allottee or Tribe Name	
	IPLICATE- Other instructions	on reverse side.	7. If Unit or CA/Agreement, Name and/or No.
	✓ Gas Well Other		8. Well Name and No.
2. Name of Operator CHESAPEA	KE OPERATING, INC. ATTN:	PALOMA 30 FEDERAL 2 9. API Well No.	
la Address P. O. BOX 18496, OKLAHON	3b. Phon 405-76	30-025-37413 10. Field and Pool, or Exploratory Area	
Location of Well (Footage, Sec.,	T., R., M., or Survey Description)		BELL LAKE; MORROW, MID (GAS)
2430 FSL & 2420 FEL, NWSE, SECTION 30, T23S, R34E			11. County or Parish, State
			LEA COUNTY, NEW MEXICO
12. CHECK A	PPROPRIATE BOX(ES) TO INDICAT	TE NATURE OF NOTICE,	REPORT, OR OTHER DATA
TYPE OF SUBMISSION		TYPE OF ACTION	
Notice of Intent	Acidize Deeper Alter Casing Fractur	n Production (Start/Resume) Water Shut-Off Well Integrity
Subsequent Report	, _	Construction Recomplete	Other Installed Gas Lift
Final Abandonment Notice	Change Plans Plug ar Convert to Injection Plug Ba	nd Abandon Temporarily ack Water Dispos	
Attach the Bond under which the following completion of the intesting has been completed. Find determined that the site is ready	ectionally or recomplete horizontally, give subsi the work will be performed or provide the Bond volved operations. If the operation results in a re and Abandonment Notices shall be filed only af	surface locations and measured and tho on file with BLM/BIA. Requirelliple completion or recompletion for all requirements, including reclaims.	any proposed work and approximate duration thereof. The vertical depths of all pertinent markers and zones. The depths of all pertinent markers are all pertinent mark
7/30/2006 Hook up com	pressor.		
		17 m	OCT 200 60 Secured Security Secured Secured Security Secured Security Security Secured Security Securi
(CHK PN 819658)		Company of the Compan	
14. I hereby certify that the fore	going is true and correct		CAC VC ST. T. C.
Name (Printed/Typed) LINDA GOOD		Title PERMITTING AG	ENT
Signature Sin	de Good	Date	09/26/2006 ACCEPTED FOR RECOR
	THIS SPACE FOR FEDERA	AL OR STATE OFFIC	EUSE CONTROL
			007

(CHK PN 819658)		DCT ? Recei Hotio	hav	A 11916/17/8	v		
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)		SC OF SC VC	577	<u> </u>			:
LINDA GOOD	Title	PERMITTING AGENT					
Signature Linda Good	Date	 	YAC	CEPTED	FO	P PEC	·OPD
THIS SPACE FOR FEDERA	LOR	STATE OFFICE USE				17 1/1 /	יטאט ק
Approved by		Title	Da	u OCT	3	2006	•
Conditions of approval, if any, are attached. Approval of this notice does not warr certify that the applicant holds legal or equitable title to those rights in the subject I which would entitle the applicant to conduct operations thereon.	rant or lease	Office		Mosley WESLEY	W I	LIGAN.	1
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for an States any false, fictitious or fraudulent statements or representations as to any matter.	y person ter within	knowingly and willfully to make t	o any c	ETROLET department or age	W F	WENNER.	ĖR