Form 3160-5 (February 2005)

(Instructions on page 2)

**GWW** 

## OCD-HOBBS

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

FORM APPROVED OMB No. 1004-0137 Expires: March 31, 2007

5. Lease Serial No. NMNM-101609

6. If Indian, Allottee or Tribe Name

## SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals

apandoned well.	Use Form 3160-3 (A	PD) for such	proposals.						
SUBMIT IN TRIPLICATE – Other instructions on page 2.					7. If Unit of CA/Agreement, Name and/or No.				
1. Type of Well					8. Well Name and No.				
Oil Well  Gas Well Other					DINWIDDIE 23 FEDERAL 1				
Name of Operator     CHESAPEAKE OPERATING, INC.     ATTN: LINDA GOOD					9. API Well No. 30-025-38242				
3a. Address P. O. BOX 18496	3b. Phone No. (inc	MIL DOAT			ol or Exploratory Area				
OKLAHOMA CITY, OK 73154-0496 405-767-4275  4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)					11. Country or Parish, State				
1400 FNL & 660 FEL, SENE, SECTION 23, T25S, R35E					LEA COUNTY, NEW MEXICO				
12. CHEC	K THE APPROPRIATE BO	X(ES) TO INDICA	TE NATURE OF	NOTIC	E, REPORT OR OTHE	ER DA	ATA		
TYPE OF SUBMISSION	TYPE OF ACT				TON				
Notice of Intent	Acidize				uction (Start/Resume)	Ē	Water Shut-Off		
	Alter Casing	Fracture		=	Reclamation		Well Integrity  ✓ Other Spud & set surf csg		
Subsequent Report	Casing Repair Change Plans	New Con		_	complete		Other Spud & set	surr csg	
		Plug Bac		_ `	orarily Abandon r Disposal				
1/15/2007 MIRU Nomac Drilling ri 1/18/2007 In 17 1/2" hole ran 20 ji 12.4 ppg, 2.03 yield, tail in w/200 sx	ed operations. If the operation Abandonment Notices must be final inspection.)  et 3 jts 20" pipe, cmt'd w/6 ig #21, spudded well @ 9:  ts 13 3/8" 48# H-40 STC 8	on results in a multi be filed only after al 6 yards Redi-mix. 00 P.M. Brd csg, set @ 846 litives, 14.8 ppg, 1	ple completion or I requirements, in	recompi cluding	t crew, cmt w/470 sx by WOC.	a For comp	m 3160-4 must be file leted and the operator	ed once has	
14. I hereby certify that the foregoing is true and correct.  Name (Printed/Typed)  LINDA GOOD			Title FEDERAL REGULATORY PERMITTING AGENT						
			Title FEDERAL REGULATORY PERMITTING AGENT						
Signature Sonda Sood Date 01/22/2007  THIS SPACE FOR FEDERAL OR STATE OF							- DECOF	<u> </u>	
	THIS SPACE	FOR FEDERA	L OR STAT	E OFF	ICE VISIE CEPT	ED	FOR KLOU		
Approved by									
Conditions of approval, if any, are attached that the applicant holds legal or equitable ti entitle the applicant to conduct operations t	t lease which would	Office		1	AN	3 1 2007			
Title 18 U.S.C. Section 1001 and Title 43 I fictitious or fraudulent statements or repres	U.S.C. Section 1212, make it a sentations as to any matter wit	crime for any person	knowingly and w	illfully to	make to any department	KOR	ency for the Vent Dates to	es any false,	