

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

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-103
Revised June 10, 2003

WELL API NO. 30-025-36348	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Christmas R	
8. Well Number 2	
9. OGRID Number 147179	
10. Pool name or Wildcat Skaggs;Abo, East	
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 PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Chesapeake Operating, Inc.	
3. Address of Operator P. O. Box 18496, Oklahoma City, OK 73154-0496	
4. Well Location Unit Letter <u>A</u> : 330 feet from the <u>North</u> line and 420 feet from the <u>East</u> line Section <u>7</u> Township <u>20S</u> Range <u>38E</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 3568'	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: Spud, 8-5/8 csg, 5-1/2" csg, Release ☒ Rig

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.

08/07/03 Spud well w/Key Drilling Rig #27 @12:00 p.m.

08/08/03 Run 37 jts 8-5/8" 24# J-55 8RD csg, circ, RD, RU cmt crew, pump 20 BFW spacer, cmt w/200 sx Lite + additives, 12.5 PPG, 1.99 yield, tail w/200 sx Prem Plus + additives, 14.6 PPG, 1.24 yield, plug down, circ 113 sx to pit, RD cmt crew, WOC, cut off cond & csg, weld on wellhead

08/09/03 Test wellhead to 1000#, NU OPP, test 250#-3000# for 5 min, TIH w/ 300 BHA, tag cmt @1440', drlg cmt, test casing to 1500#.

08/26/03 Run 176 jts 5-1/2" 17# J-55 LTC csg, RD, RU cmt crew, pump 20 BFW, cmt w/400 sx 50:50 Poz + additives, 14.4 PPG, 1.279 yield, tail w/ 450 sx 50:50 Poz + Additives, 14.4 PPG, 1.257 yield, displace 176 BW w/Clay Fix, bump plug, held OK, RD cmt head, ND, set slips 118,000#, ND, release RI

08/27/03 Release Key Drilling Rig #27 @3:00 a.m.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Barbara J. Bale TITLE Regulatory Analyst DATE 09/11/03

Type or print name Barbara J. Bale E-mail address: _____ Telephone No. (405) 848-8000
(This space for State use)

APPROVED BY Larry W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE SEP 16 2003
Conditions of approval, if any: _____