Form 3160-5 (February 2005)

OCD-HOBBS

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM AP	PROVED
OMB No	1004-0137
Expires, Mai	rch 31, 200°

5. Lease Serial No NMLC-030133B

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

abandoned well. Use Form 3160-3 (APD) for such proposals.						
SUBMIT IN TRIPLICATE – Other instructions on page 2.			7.	7. If Unit of CA/Agreement, Name and/or No.		
Type of Well					· · · · · · · · · · · · · · · · · · ·	
Oil Well Gas Well Other			8	8 Well Name and No MILLARD DECK ESTATE 28 FEDERAL 1		
Name of Operator CHESAPEAKE OPERATING, INC. ATTN: LINDA GOOD			9	9 API Well No 30-025-38103		
Ba. Address 3b. Phone No		3b. Phone No (include a	rea code) 10	10 Field and Pool or Exploratory Area		
P. O BOX 18496 OKLAHOMA CITY, OK 73154-0496 405-767-4275		405-767-4275	L	LANGLEY		
Location of Well (Footage, Sec., T,R,M., or Survey Description)				11. Country or Parish, State		
965' FNL & 1590' FEL, NWNE, SECTION 28, T22S, R36E			L	LEA COUNTY, NEW MEXICO		
12. CHEC	K THE APPROPRIATE BO	X(ES) TO INDICATE NA	TURE OF NOTICE	E, REPORT OR OTH	IER DATA	
TYPE OF SUBMISSION			TYPE OF ACTIO	ION		
✓ Notice of Intent	Acıdize	Deepen	Product	tion (Start/Resume)	Water Shut-Off	
Tvollee of filterit	Alter Casing	Fracture Treat	Reclam	nation	Well Integrity	
✓ Subsequent Report	Casing Repair	New Construction	n Recom	plete	Other EXTEND APD	_
	Change Plans	Plug and Abando	n Tempor	rarily Abandon		
Final Abandonment Notice	Convert to Injection	Plug Back	Water I	Disposal		_
testing has been completed. Final determined that the site is ready for Chesapeake, respectfully, request pour to rig scheduling Chesapeake of SEE ATTAC CONDITION	r final inspection) permission to extend the M will be unable to drill this w	illard Deck Estate 28 Fe ell before June 30, 200	ederal 1 APD for on	ne year, giving it are year.	expiration date of June 30, 2008.	
14 I hereby certify that the foregoing is t Name (Printed/Typed)	rue and correct					
LINDA GOOD		Title REGULATORY A		LYST		
Signature Rinda	Good	Date 05	5/31/2007			
	THIS SPACE	FOR FEDERAL O	R STATE OFFI	ICE USE		
Approved by	/s/ James Sto	vall I	FIELD MAN	IAGER	Date JUN 2 5 2007	
Conditions of approval, if any, are attache hat the applicant holds legal or equitable t entitle the applicant to conduct operations	atle to those rights in the subject	not warrant or certify		CARLSBAD	FIELD OFFICE	
Title 18 U.S.C. Section 1001 and Title 43	U.S.C. Section 1212, make it a	crime for any person know	ingly and willfully to	make to any departm	ent or agency of the United States any fa	lse

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false fictitious or fraudulent statements or representations as to any matter within its jurisdiction