Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I 1625 N French Dr , Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.
District II	OIL CONSERVATION DIVISION	30-025-37844
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd , Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE FEE X 6. State Oil & Gas Lease No.
1220 S St Francis Dr., Santa Fe, NM 87505	Santa 1 6, 1 (1) 1 0 / 5 0 5	o. State Off & Gas Lease No.
SUNDRY NOTI (DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS)	7. Lease Name or Unit Agreement Name Trinity Burrus Abo Unit	
1. Type of Well: Oil Well X	8. Well Number 10	
2. Name of Operator Chesapeake (9. OGRID Number 147179	
3. Address of Operator 2010 Rank	10. Pool name or Wildcat	
Midland,	TX 79701	Trinity; Wolfcamp
4. Well Location		
	feet from the South line and	
Section 22	Township 12S Range 38E	NMPM County C
The state of the s		etc.) A library system of the control of the contro
Pit or Below-grade Tank Application O		
Pit type Depth to Groundwa		
Pit Liner Thickness: mil		Construction Material
12. Check A	ppropriate Box to Indicate Nature of Notice	ce, Report or Other Data
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	PLUG AND ABANDON REMEDIAL W	DRILLING OPNS. P AND A
OTHER:Change footage	X OTHER:Chan	ge footage.
13. Describe proposed or compl	eted operations. (Clearly state all pertinent details	, and give pertinent dates, including estimated date Attach wellbore diagram of proposed completion
•	ermission to change the location of this well from 2 I, Sec 22, T12S, R38E.	
		TO AUB 2007 Received 520 Rec
I hereby certify that the information a	above is true and complete to the best of my knowledged according to NMOCD guideling.	edge and belief. I further certify that any pit or below-
A WA	closed according to NMOCD guidelines , a general permit TITLE Regulatory Tech.	–
SIGNATURE 19 SILVER		DATE 08/08/2007
Type or print name Shay Stricklin For State Use Only	E-mail address; sstricklin	Ochkenergy.com Telephone No. (432)687-2992
APPROVED BY:	J. Windstille	ENTATIVE II/STAFF MANAGE 1 0 2007 DATE
Conditions of Approval (if any):		DAIL

District I 1625 N. French Dr., Hobbs, NM 88240 District II

1301 W. Grand Avenue, Artesia, NM 88210

District III 1000 Rio Brazos Rd., Aztec, NM 87410

30-025-37844 Property Code

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

'API Number

State of New Mexico

Energy, Minerals & Natural Resources Department

OIL CONSERVATIONDIVISION 1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102

Revised October 12, 2005

☐ AMENDED REPORT

² Elevation

3802 GR

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

WELL	LOCATION AND	ACREAGE DEDICATION	NPLAT	
	59890	Trinity; Wolfcamp	' Pool Name	
' Property Name			' Well Number	
Trinity Burrus A	Abo Unit		10	

OGRID No. Operator Name 147179 Chesapeake Operating Inc.

Surface Location UL or lot no. Section Township Range Lot Idn Feet from the North/South line Feet from the East/West line County I 22 12S 38E 1800 South 1200 East Lea

¹¹ Bottom Hole Location If Different From Surface UL or lot no. Section Township Range Lot Idn Feet from the North/South line Feet from the East/West line County I 22 12S 38E 1800 South 1200 East Lea " Dedicated Acres ' Joint or Infill Consolidation Code Order No. 40

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the

[
16		,	17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to
			the best of my knowledge and belief, and that this organization either owns a
			working interest or unleased mineral interest in the land including the
			proposed bottom hole location or has a right to drill this well at this location
			pursuant to a contract with an owner of such a mineral or working interest,
			or to a voluntary pooling agreement or a compulsory pooling order
`			heretofore entered by the division
			08/08/2007
			Signature Date
			Shay Stricklin Printed Name
			Printed Name
			¹⁸ SURVEYOR CERTIFICATION
			I hereby certify that the well location shown on this plat
			was plotted from field notes of actual surveys made by
		1200	1
		1200	me or under my supervision, and that the same is true
			and correct to the best of my belief.
			Date of Survey
	-	<u> </u>	Signature and Seal of Professional Surveyor
	9	§	
	(4	
		1	
			Certificate Number