

Submit To Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies <u>District I</u> 1625 N French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W Grand Avenue, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S St Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>	<b>Form C-105</b> Revised June 10, 2003  WELL API NO. <b>30-025-27586</b>  5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>  State Oil & Gas Lease No.
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<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>	
1a. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER _____  b. Type of Completion: NEW <input type="checkbox"/> WORK <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG <input type="checkbox"/> DIFF WELL OVER BACK RESVR <input type="checkbox"/> OTHER _____  2. Name of Operator <b>Chesapeake Operating Inc.</b>  3. Address of Operator <b>2010 Rankin Hwy Midland, TX 79701</b>  4. Well Location Unit Letter <b>L</b> : <b>1650</b> Feet From The <b>South</b> Line and <b>990</b> Feet From The <b>West</b> Line Section <b>20</b> Township <b>18S</b> Range <b>36E</b> NMPM <b>Lea</b> County	7. Lease Name or Unit Agreement Name <b>Bobbi</b>  8. Well No. <b>4</b>  9. Pool name or Wildcat <b>Arkansas Junction; San Andres, West</b>

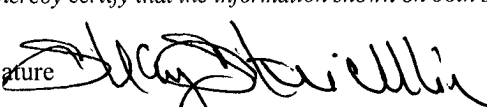
10. Date Spudded <b>10/05/1981</b>	11. Date T.D. Reached <b>11/11/1981</b>	12. Date Compl. (Ready to Prod) <b>04/20/2007</b>	13. Elevations (DF& RKB, RT, GR, etc) <b>3837.7 GR</b>	14. Elev. Casinghead
15. Total Depth <b>5600</b>	16. Plug Back T.D.	17. If Multiple Compl. How Many Zones? <b>No</b>	18. Intervals Drilled By <b>Rotary</b>	Rotary Tools Cable Tools
19. Producing Interval(s), of this completion - Top, Bottom, Name				20. Was Directional Survey Made <b>No</b>
21. Type Electric and Other Logs Run <b>N/A</b>				22. Was Well Cored <b>No</b>

<b>23. CASING RECORD (Report all strings set in well)</b>					
CASING SIZE	WEIGHT LB /FT	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
<b>8 5/8</b>	<b>24</b>	<b>1901</b>	<b>12 1/4</b>	<b>925</b>	
<b>4 1/2</b>	<b>10.5</b>	<b>5600</b>	<b>7 7/8</b>	<b>125</b>	

<b>24. LINER RECORD</b>				<b>25. TUBING RECORD</b>			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					<b>2 3/8</b>	<b>5573</b>	

26. Perforation record (interval, size, and number) <b>5286-5389 17 holes</b>	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.
	DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED
	<b>5286-5389      2000 gals 15% Ne-Fe</b>
	<b>5286-5389      CIBP @ 5235 w/ 2 sx cmt on top</b>

<b>28. PRODUCTION</b>							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)			Well Status (Prod. or Shut-in) <b>P&amp;A Shut-In</b>		
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl	Gas - Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr)	
29. Disposition of Gas (Sold, used for fuel, vented, etc) <b>Sold</b>						Test Witnessed By	
30. List Attachments <b>C-102</b>							
31. I hereby certify that the information shown on both sides of this form as true and complete to the best of my knowledge and belief							

Signature 	Printed Name <b>Shay Stricklin</b>	Title <b>Regulatory Tech.</b>	Date <b>08/28/2007</b>
E-mail Address <b>sstricklin@chkenergy.com</b>			

**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

**District IV**

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

State of New Mexico  
Energy, Minerals & Natural Resources Department

**OIL CONSERVATION DIVISION**

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102

Revised October 12, 2005

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

* API Number 30-025-27586		* Pool Code 2503		* Pool Name Arkansas Junction; San Andres, West	
* Property Code		* Property Name Bobbi			* Well Number 4
* OGRID No. 147179		* Operator Name Chesapeake Operating Inc.			* Elevation 3837.7

**<sup>10</sup> Surface Location**

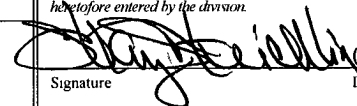
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	20	18S	36E		1650	South	990	West	Lea

**<sup>11</sup> 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
L	20	18S	36E		1650	South	990	West	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 division.

<div style="position: relative; height: 100px;"> <span style="position: absolute; left: 10px; top: 10px;">16</span> <span style="position: absolute; left: 10px; top: 50px;">990</span> <span style="position: absolute; left: 50px; top: 10px;">1650</span> </div>	<b><sup>17</sup> OPERATOR CERTIFICATION</b> 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.		
	<div style="display: flex; justify-content: space-between;"> <div>             Signature         </div> <div>           08/28/2007            Date         </div> </div>		
	Shay Stricklin Printed Name		
	<b><sup>18</sup> SURVEYOR CERTIFICATION</b> I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief		
Date of Survey Signature and Seal of Professional Surveyor			
Certificate Number			