

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO 1004-0135  
Expires July 31, 2010

**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.**

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

|   |   |   |
|---|---|---|
| 1 Type of Well<br><input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other |   | 5 Lease Serial No.<br>Multiple--See Attached            |
| 2 Name of Operator<br>CHESAPEAKE OPERATING INC  |   | 6 If Indian, Allottee or Tribe Name                     |
| Contact: LINDA GOOD<br>E-Mail: lgood@chkenenergy.com  |   | 7 If Unit or CA/Agreement, Name and/or No<br>NMNM117035 |
| 3a Address<br>P O BOX 18496<br>OKLAHOMA CITY, OK 73154-0496   | 3b Phone No (include area code)<br>Ph: 405.767.4275<br>Fx: 405.753.5469 | 8 Well Name and No<br>Multiple--See Attached            |
| 4 Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Multiple--See Attached                                 |   | 9 API Well No.<br>Multiple--See Attached                |
|   |   | 10 Field and Pool, or Exploratory<br>QUAIL RIDGE        |
|   |   | 11 County or Parish, and State<br>LEA COUNTY, NM        |

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

| TYPE OF SUBMISSION                                    | TYPE OF ACTION                                |   |  |   |
|---|---|---|--|---|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input type="checkbox"/> Other          |
|   | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       |   |
|   | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input checked="" type="checkbox"/> Water Disposal |   |

13 Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

PLEASE FIND THE ATTACHED SALT WATER DISPOSAL INFORMATION.

(CHK PN 890781)

**RECEIVED**

MAR 27 2008

**HOBBS OCD**

|   |                                  |
|---|----------------------------------|
| 14. I hereby certify that the foregoing is true and correct.  |                                  |
| <p align="center"><b>Electronic Submission #58694 verified by the BLM Well Information System</b><br/> <b>For CHESAPEAKE OPERATING INC, sent to the Hobbs</b><br/> <b>Committed to AFMSS for processing by KURT SIMMONS on 02/20/2008 (08KMS0415SE)</b></p>                               |                                  |
| Name (Printed/Typed) LINDA GOOD   | Title FEDERAL REGULATORY ANALYST |
| Signature (Electronic Submission)   | Date 02/20/2008                  |
| <b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>   |                                  |
| Approved By JAMES A AMOS  | Title SUPERVISOR EPS             |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.                                 |                                  |
| Office Hobbs  |                                  |
| Date 03/24/2008   |                                  |
| 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 |                                  |

**Additional data for EC transaction #58694 that would not fit on the form**

**5. Lease Serial No., continued**

NMNM56263  
NMNM57285

**Wells/Facilities, continued**

| Agreement  | Lease     | Well/Fac Name, Number  | API Number         | Location                             |
|------------|-----------|------------------------|--------------------|--------------------------------------|
| NMNM117035 | NMNM56263 | CODORNIZ 28 FEDERAL 02 | 30-025-36196-00-S1 | Sec 28 T19S R34E NWSW 1980FSL 660FWL |
| NMNM117035 | NMNM57285 | CODORNIZ 28 FEDERAL 3  | 30-025-37523-00-S1 | Sec 28 T19S R34E SWSE 860FSL 1980FEL |