Office Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resource	s May 27, 2004
1625 N French Dr, Hobbs, NM 88240 District II		WELL API NO. 30-025-33427
1301 W. Grand Ave, Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd, Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE X
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S St Francis Dr., Santa Fe, NM 87505		
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		7. Lease Name or Unit Agreement Name Kyte
PROPOSALS) 1. Type of Well: Oil Well		8. Well Number 4
2. Name of Operator		9. OGRID Number
Chesapeake Operating, Inc.		147179
3. Address of Operator P.O. Box 18496		10. Pool name or Wildcat
Oklahoma City, OK 73154-0496		Blinebry O&G Warren; Tubb, East; DK;Ab
4. Well Location	1000t o o i Neste u	1. ((0)
	1980' feet from the North line and	
Section 23	Township 20S Range 38E	NMPM County Lea
The state of the s	11. Elevation (Show whether DR, RKB, RT, GR 3653 GL	s, etc.)
Pit or Below-grade Tank Application or		1. 2 17
	terDistance from nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness: mil		
12. Check A	ppropriate Box to Indicate Nature of No	uce, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
——————————————————————————————————————		
TEMPORARILY ABANDON	1	E DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CE	MENT JOB
OTHER:Isolate lower Abo perforation	ons OTHER:	
		ls, and give pertinent dates, including estimated date
		s: Attach wellbore diagram of proposed completion
Dear Sirs/Madams:		
Chesapeake Operating, Inc. repectfully submits a request to isolate the lower perforations by setting a RBP @ 7500'.		
Please refer to DHC Order 2425 and as amended same order dated 9/8/2000. In addition, please find enclosed NMOCD's form C-144.		
m dadrion, preuse inia enerosea (vi		
	of the same of the	
		AND
		and the second s
	I UN 2	15 15.1 (m. m. 1913) 183 at
	< n 20ng	भारत क व द्वाराज्य
		nddenen
		UDDO UUL
I hereby certify that the information a	bove is true and complete to the best of my know	vledge and belief. I further certify that any pit or belownit or an (attached) alternative OCD-approved plan
<i>J</i> - , (Neeks TITLE Reg. Compliance	
SIGNATURE Synda	TITLE Reg. Compliance	DATE 06/19/2008
Type or print name Linda Weeks For State Use Only	E-mail address: linda.we	relephone No. (405)879-6854
11.	ALES SOLDENSEED DES SOLDENSEED DES SOLDENSEED DES	PRESENERAL MANAGER JUL 75 2008
APPROVED BY: Aug. Conditions of Approval (if any):	Sellans OC DISTRICT SUPERVISO	DATEDATE