## P/A'd - OK TO RELEASE. THUS. 7/22/2008

Submit 2 Copies To Appropriate District Office	State of New M		Form C-103 October 25, 2007
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Na	iturai Resources	WELL API NO. 30-025-20222
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATIO	حيات المانية ا	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South Str Fr	ancis Dr.	STATE X FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa-Fe, NM	87505	6. State Oil & Gas Lease No.
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA PROPOSALS.)	ES AND REPORTS ON WELL ALS TO DRILL OR TO DESPENOR! ATION FOR PERMIT! (FORM (\$10))	LUGBAÇK TOTA FOR SUGH	Kemnitz Lower Wolfcamp East Unit
1. Type of Well: XOil Well Gas Well Other		8. Well Number 5r	
2. Name of Operator Chesapeake	Operating, Inc.	/	9. OGRID Number 147179
3. Address of Operator P.O. Box 19	90		10. Pool name or Wildcat
	w Mexico 88241		Kemnitz, Wolfcamp lower
4. Well Location Unit Letter C : 660	feet from the North line and	1080 feet from the V	West line
	ip 16S Range 34E NMI		
Section 21 Townshi	11. Elevation (Show whether L		
12. Check Appropriate Box to	4092 GR	Penart or Other I	Data
12. Check Appropriate Box to	mulcate Nature of Notice,	1	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐			
PERFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐	PLUG AND ABANDON  CHANGE PLANS		ILLING OPNS. PANDA
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	<del></del>
OTHER:	П	│	eady for OCD inspection after P&A
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.			
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.  A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the			
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OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR			
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.			
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and			
other production equipment.			
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.  If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with			
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed			
from lease and well location.			
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.)			
All other environmental concerns have been addressed as per OCD rules.			
		h 19.15.9.714.B(4)(b)	) NMAC. All fluids have been removed from
non-retrieved flow lines and pipelines	<b>}.</b>		
When all work has been completed, r inspection has to be made to a P&A I			hedule an inspection. If more than one penalty may be assessed.
SIGNATURE	TITLE	Production	Foreman DATE 7-18-08
TYPE OR PRINT NAME Steve.	Sera E-MAI	L: Steve. Sern	Foreman DATE 7-18-08 a @ chc. Coaphone: 575-390-905
1 Of State OSC Offly	FOR RECORD C	DNLB	DATE 7/22/2008
APPROVED BY:	TITLE		DATE 11221んのひろ

Conditions of Approval (if any):