

RECEIVED

State of New Mexico  
Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

HOBBS OCD

WELL API NO. 30-025-32750
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: St. V. SUNDOWN STATE
8. Well Number 1
9. OGRID Number 147179
10. Pool name or Wildcat Echol; San Andres, East Oil Pool Wolfcamp, Northeast
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3941'
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type <u>STEEL</u> Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 PROPOSALS.)

1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator CHESAPEAKE OPERATING, INC.
3. Address of Operator P.O. Box 18496, Oklahoma City, OK 73154-0496
4. Well Location Unit Letter <u>M</u> : <u>477</u> feet from the <u>SOUTH</u> line and <u>191</u> feet from the <u>WEST</u> line Section <u>14</u> Township <u>10 S</u> Range <u>37 E</u> NMPM County <u>LEA</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3941'

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>
SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input checked="" type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

6-9-08 Tag existing plug @5,296'. Spot 25 sx. cmt. @5,296'.

6-11-08 Set 5 1/2" C.I.B.P. @4,900'. Circulate hole w/mud. Spot 25 sx. cmt. @4,900'. Perf. @4,310'.

6-12-08 Sqz. 40 sx. cmt. @4,310'. W.O.C. & tag @4,150'. Perf. @2,300'. W.O.C. & tag @2,178'.

6-13-08 Perf. @400'. Pump 120 sx. cmt. down 5 1/2" csg. X 8 5/8" csg. to surface. Leave 5 1/2" full of cmt. Install Dryhole Marker.

Maxey Brown w/OCD Witnessed

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed of closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Randall Minear TITLE P & A SUPERV. DATE 6-27-08

Type or print name RANDALL MINEAR

E-mail address:

Telephone No. (432) 530-0907

For State Use Only

APPROVED BY Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE JUL 15 2008

Conditions of Approval, if any: