Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 200

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.					5. Lease Serial No. FEE6. If Indian, Allottee or Tribe Name		
					7. If Unit or CA/Agreement, Name and/or No.		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					NMNM109707		
1. Type of Well ☐ Oil Well ☑ Gas Well ☐ Other					8. Well Name and No. MARKHAM 33 1		
2. Name of Operator CONTACT: SHARON E. DRIES CHESAPEAKE OPERATING INC CONTACT: SHARON E. DRIES E-Mail: sdries@chkene					9. API Well No. 30-025-35981-00-S1		
3a. Address 3b. Phone P O BOX 18496 Ph: 405. OKLAHOMA CTIY, OK 73154 Fx: 405.8)	10. Field and Pool, or MORTON	Exploratory	
4. Location of Well (Footage, Sec., T.			11. County or Parish,	and State			
Sec 33 T14S R35E NWSW 16			LEA COUNTY, NM				
12. CHECK APPR	ROPRIATE BOX(ES) TO	O INDICATE I	NATURE OF 1	NOTICE, RI	EPORT, OR OTHE	R DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
■ Notice of Intent	☐ Acidize	□ Deepe	en	□ Product	ion (Start/Resume)	☐ Water Shut-Off	
_	☐ Alter Casing	☐ Fracti	are Treat	□ Reclam	ation	■ Well Integrity	
Subsequent Report	Casing Repair	☐ New	Construction	□ Recomp	olete	Other	
☐ Final Abandonment Notice	□ Change Plans	Plug :	and Abandon Temporarily Abandon		arily Abandon	Site Facility Diagra m/Security Plan	
	☐ Convert to Injection	Plug l	Back		Disposal	·	
13. Describe Proposed or Completed Ope If the proposal is to deepen directions Attach the Bond under which the wor following completion of the involved testing has been completed. Final Abdetermined that the site is ready for fi Attached is a Site Facility Diag	ally or recomplete horizontally, k will be performed or provide operations. If the operation repandonment Notices shall be fill in all inspection.) gram for the Marcham 33	, give subsurface lo e the Bond No. on esults in a multiple led only after all re	ocations and measurable with BLM/BIA completion or reconquirements, include	red and true ve Required sub completion in a	ertical depths of all pertinosequent reports shall be new interval, a Form 316	ent markers and zones. filed within 30 days 0-4 shall be filed once	
14. I hereby certify that the foregoing is	Electronic Submission				System		
For CHESAPEAKE OPERATING INC, sent to the Hobbs Committed to AFMSS for processing by ARMANDO LOPEZ on 11/13/2003 (04AL0039SE)							
Name(Printed/Typed) SHARON E. DRIES			Title AUTHO	RIZED REF	PRESENTATIVE		
Signature (Electronic S	Submission)		Date 11/10/2	003		,	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
_Approved_By_ACCEPTED			DAVID R (Title PETROLE	GLASS UM ENGINI	EER	Date 11/13/2003	
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				
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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.

M-1/1100C

Agave Gas Meter

Containment

132' X 30' X 19"

40'

.4

Markham 1-33

Lea County, N.M.

Sec. 33 T14s R35e W/2