

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

RECEIVED

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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.
NMLC71949

NM20071949

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

BY: *[Signature]*
APR 04 2008

7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.
KELLER 27 FEDERAL 2

2. Name of Operator
CHESAPEAKE OPERATING, INC.

ATTN: LINDA GOOD

9. API Well No.
30-025-37906

3a. Address
P. O. BOX 18496
OKLAHOMA CITY, OK 73154-0496

3b. Phone No. (include area code)
405-767-4275

10. Field and Pool or Exploratory Area
BELL LAKE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1967' FSL & 2055' FWL, NESW, SECTION 27, T23S, R34E

11. Country or Parish, State
LEA CO., NM

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

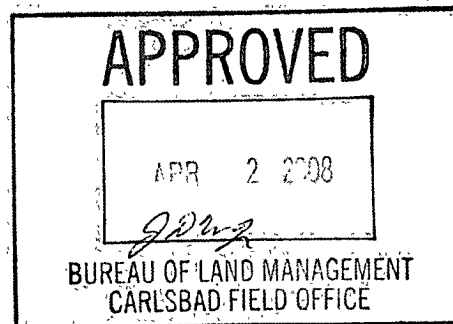
TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> 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 checked="" type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input 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 recomplete 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

CHESAPEAKE, RESPECTFULLY, REQUESTS PERMISSION TO CONVERT THIS WELL TO AN INJECTION WELL PER THE ATTACHED PROCEDURE. WE ARE ASKING FOR 1 YEAR SO THAT WE CAN GET OUR INJECTION PERMIT FROM THE OCD.

(CHK PN 610218)

AFTER RECOMPLETION AND TESTING
PLEASE SUBMIT 3160-4 COMPLETION
REPORT FOR THE Injection
INTERVAL(S) WITHIN 30 DAYS



After 10-1-08 the well must be online
or plans to P & A must be submitted.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)
LINDA GOOD

Title: REGULATORY COMPLIANCE SPECIALIST

Signature

Linda Good

Date 03/11/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

[Signature]

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not, in itself, constitute approval or certification.

Office

OCD Condition of Approval: Approval for evaluating
well bore for injection. Need injection application
approval from OCD Santa Fe office. CANNOT
inject until OCD Santa Fe approves injection order.

person knowingly and willfully to make to any department or agency of the United States any false, statement.



**Keller 27 Federal #2
Conversion to Injection
Lea County, New Mexico**

Location: Section 27, 23S-34E, 1967' FSL & 2055 FWL

Production

Casing: 5 ½" 17# L-80 0-8,750', ID=4.892", Drift=4.767", Burst=6,290#

PBTD/TD: 8,657'/8,750'

Current Perfs: Delaware 7,533' - 7,624'
8,150' - 8,547'

Procedure

Hold Tailgate Safety meeting prior to beginning work each morning and as required for specific operations.

1. Prep location. Check anchors and clean area for workover.
2. MIRU PU. POH w/pump and rods. ND WH. NU BOP. POH w/ tubing.
3. RIH w/ packer and set @ 7,433'. MIT test at 500# for 30 minutes.
4. ND BOP. NU WH.
5. RDMO workover rig. Clean location.

Contacts

Workover Foreman

Lynard Barrera
Office: 505-391-1462
Cell: 505-631-4942

Asset Manager

Kim Henderson
Office: 405-879-8583
Cell: 405-312-1840

Production Foreman

Melvin Harper
Office: 505-391-1462
Cell: 505-631-5348

Field Engineer

Doug Rubick
Office: 505-391-1462
Cell: 505-441-7326