| Type or print name  For State Use Only  APPROVED BY:  Conditions of Approval (if Appl):  TI   | _  | SUPERVISOR/GENERAL M        |   | NOV 2 1 2008       |
|---|--|-----------------------------|---|--------------------|
| For State Use Only  | OC DISTRICT  |                             | WNWGES                                    |                    |
|   | _  |                             |   | 05)767-4275        |
|   | /' aa -/ " " " " " " " " " " " " " " " " " "               | ss: linda.good@chk.com      | DHONE. (4                                 |                    |
| SIGNATURE Lorda S   | TITLE Sr. R.   | egulatory Compl. Sp.        | DATE_11/1                                 | 7/2008             |
| I hereby certify that the information ab  | ove is true and complete to the b                          | pest of my knowledge and be | lief.                                     |                    |
| Spud Date:  | Rig Release D  |                             |   |                    |
|   |  |                             |   |                    |
|   |  |                             |   | بعداك ويشر         |
|   |  |                             |   |                    |
| and NMOCD's C-144(CLEZ)pit pe   | रात्तार.   |                             |   |                    |
| Chesapeake Operating, Inc. respect Please find the plugging procedure   | , the actual and proposed well bo                          |                             |   |                    |
| of starting any proposed work or recompletion.  | x). SEE RULE 1103. For Multip                              | ple Completions: Attach wel | lbore diagram of pro                      | posed completion   |
| OTHER:  13. Describe proposed or complete   | ted operations (Clearly state all                          | OTHER:                      | ertinent dates includ                     | ing estimated data |
| DOWNHOLE COMMINGLE  |  | O/O/OCIVICINI JOB           | <b>∟</b> i                                |                    |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR  |  | COMMENCE DRILLING C         |   |                    |
|   |  | SUBSEQU<br>REMEDIAL WORK    | ENT REPORT                                | OF:<br>NG CASING □ |
| 12. Check Ap  | opropriate Box to Indicate N                               | Nature of Notice, Report    | or Other Data                             |                    |
| 10 PM | 11. Elevation (Show whether DI 3532' GR                    | x, πκβ, κ1, GK, etc.)       |   |                    |
| Section 16  |  | Range 33E NMPI              | M County                                  | Lea                |
| Unit Letter D : 9   | 90' feet from the North                                    | line and _990'              | feet from the We                          | est line           |
| Oklahomma City, OK 73154-0496  4. Well Location   |  |                             | Teas (Yates-Seven Rivers), West           |                    |
| 3. Address of Operator P.O. Box 18496   |  |                             | 147179  10. Pool name or Wildcat          |                    |
| Type of Well: Oil Well  |  | CII                         | 9. OGRID Number                           |                    |
| (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.)   |  | LUG BACK TO A WTYS          | WTYSR Unit  8. Well Number 611            |                    |
| 1220 S Stiffiand Dia Santa Fe, NM<br>87505  SUNDRY NOTICES AND REPORTS ON WELLS   |  | S 7. Lea                    | ase Name or Unit Ag                       | reement Name       |
| 1000 Rio Brazos Rd. Aztec, NM 87410 Santa Fe, NM 87505  |  |                             | STATE $X$ Factor of the Oil & Gas Lease 1 | FEE No.            |
| 1301 W. Grand Ale Alesia, NM 88210 OIL CONSERVATION DIVISION District III 1220 South St. Francis Dr   |  | l 5 Ind                     | 5. Indicate Type of Lease                 |                    |
| District II   | Per Dr., Hobbs, NM 88240                                   |                             | L API NO.<br>30-025-                      |                    |
| Submit 3 Copies To Appropriate District Office District   | State of New Mexico Energy, Minerals and Natural Resources |                             | Form C-103<br>June 19, 2008               |                    |

## WTU 611 Lea County, New Mexico Plugging Procedure

Date: October 16, 2008

Location: 330' FNL & 2310' FWL Sec. 16-T20S-R33E

**Production Casing:** 5 1/2" 15.5# J-55 0'-3320'

**PBTD/TD:** 3090'/ 3320'

Current Perfs: Seven Rivers, 3220'-3230'

## Recommended Procedure:

1. MIRU PU. NDWH/NUBOP. LOAD HO/E FROM 3090' W/MLF

2. RIH w/ open ended tbg to 1363'and pump set 100' salt and casing shoe plug. Tag.

- 3. Pull tubing up to 60'. Fill casing back to surface with cement. POH w/ tbg. Top off casing with cement.
- 4. RD and move off. Install dry hole marker and cut off dead men. Restore location.

## Contacts

Workover Superintendent

Lynard Barrera

Office: 575-391-1462 Cell: 575-631-4942

Production Foreman

Ralph Skinner Office: 575-391-1462

Office: 575-391-1462 Cell: 575-441-4921 Sr. Asset Manager

Jeff Finnell

Office: 405-767-4347 Cell: 405-919-3305

Field Engineer

Doug Rubick

Office: 575-391-1462 Cell: 575-441-7326

## **Proposal for Workover**



WTU 611

Field:

West Teas &-Sr

County:

LEA

State: NEW MEXICO

SEC 16-20S-33E, 330 FNL & 2310 FWL Location:

GL 3,533.00 Elevation:

KB Height: 5.00

Initial Compl. Date: API #: 3002533286 CHK Propterty #: 890153 KB 3,538.00 1st Prod Date: 8/1/1996 PBTD: Original Hole - 3210.0

TD: 3,320.0

Spud Date: 7/23/1996

