Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	June 19, 2008 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	AT 601/9-51/1-51/1-51/1-51/1-51/1-51/1-51/1-5	30-025-22198
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE X FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505		
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC	ICES AND REPORTS ON WELLS ISALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Gallagher 8 State
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well X Other	8. Well Number 2
2 Name of Operators	Operating, Inc.	9. OGRID Number 147179
3. Address of Operator P.O. Box	18496 City, OK 73154-0496	10. Pool name or Wildcat
4. Well Location	Спу, ОК 73134-0490	Vacuum; Atoka-Morrow, North
!	660' feet from the South line and	660' feet from the West line
Section 8	Township 17S Range 34E	NMPM County Lea
Section	11. Elevation (Show whether DR, RKB, RT, GR, or	
(1) (A) (E) (A)	4104' GR	
12. Check A	Appropriate Box to Indicate Nature of Notice	ce, Report or Other Data
NOTICE OF IN	ITENTION TO: SI	UBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL W	<del>_</del>
TEMPORARILY ABANDON		DRILLING OPNS. P AND A
PULL OR ALTER CASING   DOWNHOLE COMMINGLE	MULTIPLE COMPL	IENT JOB
DOWNHOLE COMMINGLE		
OTHER:	OTHER: Ran I	
	oleted operations. (Clearly state all pertinent details, ork). SEE RULE 1103. For Multiple Completions:	
Dear Sirs/Madams:		
	which was ran on March 12, 2009 where the NMOCI	
The purpose of the MIT is to TA	this well for 5 years or the maximum period of time	e allowed.
	This Annroyal Of	f Temporary , , an KL
R	ECEIVED Abandonment E	Temporary 6-2014 xpires 3-16-2014
		•
,	MAR 1 2 2009	rest.
1-10	OBBSOCD	
5 0.		
Spud Date:	Rig Release Date:	
<u> </u>		
I haraby cartify that the information	above is true and complete to the best of my knowle	adas and halisf
Thereby certify that the information	A	euge and bener.
1/1	harda.	
SIGNATURE 1	TITLE Production Assistant	DATE_03/12/2009
Type or print name Pat Richards	E-mail address: pat.richards@	2chk.com PHONE: (575)391-1462
For State Use Only	/	111011L. (3/3)371*1402
ABBROWED BY	TITLE DISTRICT 1 9UP	PERVISOR DATE MAR 1 6 2009
APPROVED BY:	TITLE DISTRICT 180P	DATE WAIL IN 2007

