

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
June 19, 2008

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-28636 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Chesapeake Operating, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 18496 Oklahoma, OK 71154-0496		7. Lease Name or Unit Agreement Name Harvard ✓
4. Well Location Unit Letter O : 330' feet from the South line and 2310' feet from the East line Section 31 Township 18S Range 39E NMPM County Lea ✓		8. Well Number 1 ✓
		9. OGRID Number 147179 ✓
		10. Pool name or Wildcat Foster; San Andres ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3606'		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Ran MIT for TA <input checked="" 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.

Dear Sirs/Madams:

Please find attached MIT chart which was run on May 11, 2009 with a NMOCD Representative present. The purpose of the MIT is to TA this well for 5 years or the maximum period of time allowed.

RECEIVED

This Approval of Temporary  
Abandonment Expires 5-13-2014 MAY 12 2009  
HOBBSOCD

MAY 12 2009

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Pat Richards TITLE Production Assistant DATE 05/12/2009

Type or print name Pat Richards E-mail address: pat.richards@chk.com PHONE: (575)391-1462

For State Use Only

APPROVED BY: Camille A. Hill TITLE DISTRICT 1 SUPERVISOR DATE MAY 13 2009  
Conditions of Approval (if any):

RECEIVED

MAY 12 2009

HOBBSOCD



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

Chesapeake Madaskey  
Harvard  
#1

Rafael  
unit #36

5-11-09

BR 2221

Chesapeake  
Harvard #1

30-025-28636

Vol 0, Sec 31, T185, R396

T/A Initial test

30 min

Mark Whitely

OOD

Final  
526 p.m.

