

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

Form C-103
 June 19, 2008

RECEIVED
JUN 12 2009
HOBBSOCD
 OIL CONSERVATION DIVISION
 220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO.	30-025-30300 ✓
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓
6. State Oil & Gas Lease No.	B9311
7. Lease Name or Unit Agreement Name	West Dollarhide Queen Sands Unit ✓
8. Well Number	143 ✓
9. OGRID Number	004115 ✓
10. Pool name or Wildcat	Dollarhide Queen ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3181' GR	

SUNDRY NOTICES AND REPORTS ON WELLS
 (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.)

1. Type of Well: Oil Well Gas Well Other TA'd WIW

2. Name of Operator
Chaparral Energy, LLC

3. Address of Operator
701 Cedar Lake Blvd. Oklahoma City, OK 73114

4. Well Location
 Unit Letter J : 1880 feet from the South line and 2140 feet from the East line
 Section 32 Township 24S Range 38E NMPM Lea County ✓

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: MIT & return to TA'd Status <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.

Request that well stay TA'd status for 5 years

This Approval of Temporary Abandonment Expires 6-19-2010

Spud Date:

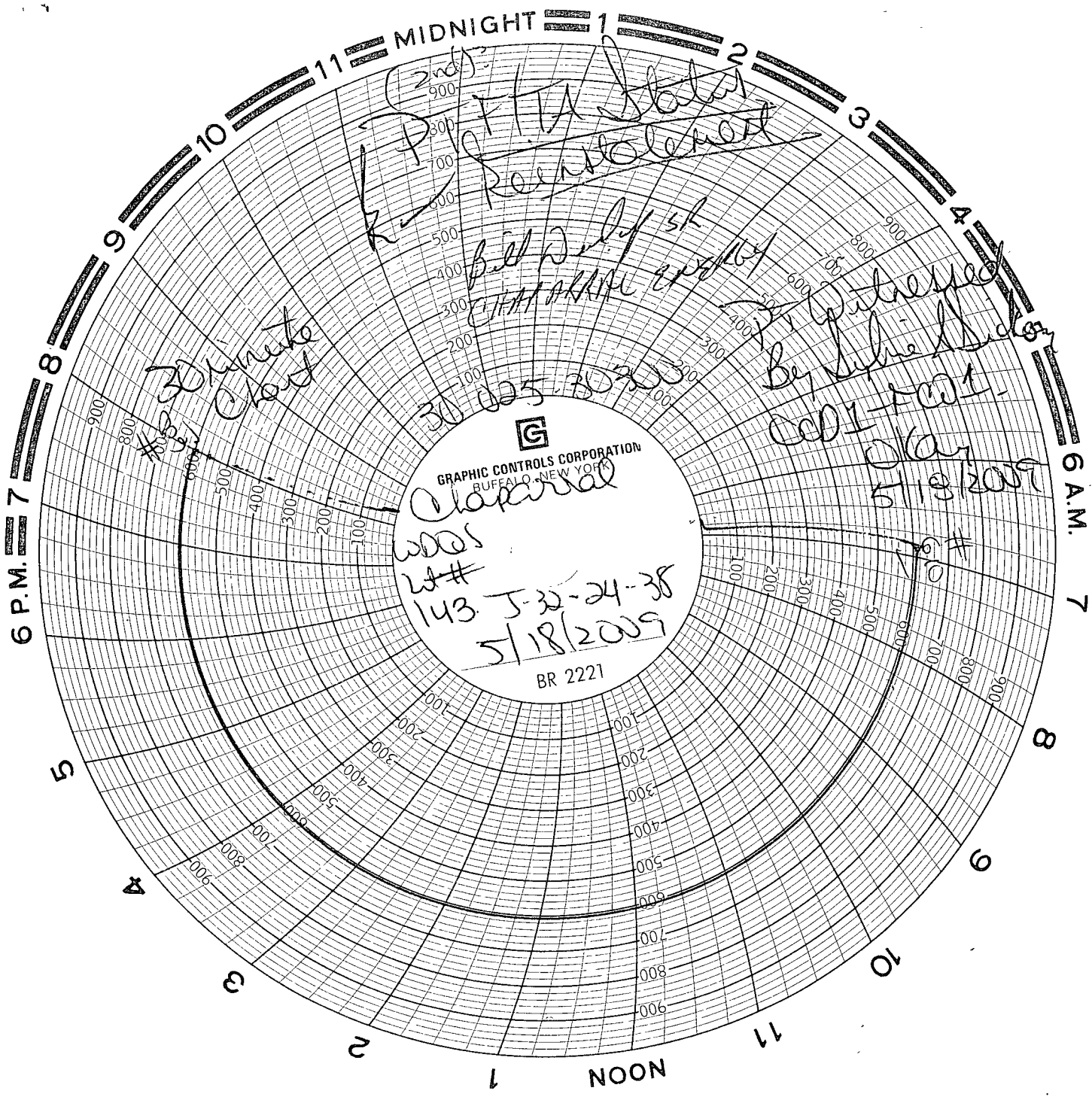
Rig Release Date:

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

SIGNATURE David P. Spencer TITLE Manager of Regulatory Affairs DATE 6/4/09

Type or print name David P. Spencer E-mail address: _____ PHONE: 405-478-8770

For State Use Only
 APPROVED BY: Tony W. Hill TITLE DISTRICT 1 SUPERVISOR DATE JUN 19 2009
 Conditions of Approval (if any): _____



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Chaparral
W005
W#
143 J-32-24-35
5/18/2009
BR 2221

30 minutes
Cloud

(2nd)
PITA Stairs
Removal

Bell July 5th
30 025 30 00

Be the 1st
COI - 101 -
OKAY
5/18/2009

6 A.M. 7