Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM	OIL CONSERVATION DIVISION	30-025-26221 5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fa NIM 87505		STATE X FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NMJUN 3 87505		6. State Oil & Gas Lease No.
SUNDRY 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 SUCII PROPOSALS.)		7. Lease Name or Unit Agreement Name Quail State
1. Type of Well: Oil Well Gas Well Other SWD		8. Well Number 3Y
2. Name of Operator Chesapeake Operating, Inc.		9. OGRID Number 147179
3. Address of Operator P.O. Box 18496 Oklahoma City, OK 73154-0496		10. Pool name or Wildcat SWD; Queen
4. Well Location Unit Letter I: 1841' feet from the South line and 759' feet from the East line		
Section 11 Township 19S Range 34E NMPM County Lea		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3960' GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS P AND A DOWNHOLE COMMINGLE CASING/CEMENT JOB CASING/CEM		
OTHER: Name Change	☐ OTHER	
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.		
Chesapeake Operating, Inc. respec Quail State # 3Y to the Quail Quee	tfully request to change the name of this well from the Unit # 3	ne
R-Order 12952. Name change effective July 1, 200	9. OPER. OGRID NO. 1471	79
PROPERTY NO. 37741		
POOL CODE 96117		
EFF. DATE 07-01-09		
APINO. 30-025-26221		
		1
Spud Date:	Rig Release Date:	
I hereby certify that the information al	pove is true and complete to the best of my knowledge	ve and helief
1		se and benefit
SIGNATURE // Seg. /	TITLE Senior Regulatory Comp	1 Sp. DATE <u>06/29/2009</u>
Type or print name Bryan Arrant For State Use Only	E-mail address: bryan.arrant@cl	nk.com PHONE: (405)935-3782
APPROVED BY: Conditions of Approval (if any):	TITLE PETROLEUM ENGINE	DATE JUL 0 1 2009