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 Resou	WELL API NO. June 19, 2008
District II 130.1 W. Grand Ave., Artesia, NM	ENDECONSERVATION DIVISI	ON 30-025-26707
District III 1000 Rio Brazos Rd. Aztec NM 87410	CONSERVATION DIVISION DIVISION DIVISION DE L'EST	5. Indicate Type of Lease STATE X FEE
District IV 1320 S. St. Empris Dr. Soute Fo NM	30 2009 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505 HOB	BSOCD	
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BACK T ATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Wainoco State
1. Type of Well: Oil Well Gas Well Gother SWD		8. Well Number 3
2. Name of Operator Chesapeake C	Operating, Inc.	9. OGRID Number 147179
3. Address of Operator P.O. Box 18	8496 City, OK 73154-0496	10. Pool name or Wildcat SWD; Queen
4. Well Location		SWD, Queen
Unit Letter A : 9	990' feet from the North line	and 990 feet from the East lime
Section 11	Township 19S Range 34E	NMPM County Lea
	11. Elevation (Show whether DR, RKB, RT, 3969' GR	GR, etc.)
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INT	TENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDI	AL WORK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON PULL OR ALTER CASING		NCE DRILLING OPNS. P AND A
DOWNHOLE COMMINGLE	WIDETIFLE COMPL [] CASING	/CEMENT JOB
OTHER: Name Change		
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.		
•	ctfully request to change the name of this wel	I from the
Wainoco State # 3 to the Quail Qu R-Order 12952.		i nom the
Name Change effective July 1, 20	09 OPER. OGRID NO.	147179
PROPERTY NO. 37741		
POOL CODE 96117		
EFF. DATE ()7-01-09		
API NO. 30-025-26707		
		3 24 10 1
Spud Date:	Rig Release Date:	
I hereby certify that the information a	bove is true and complete to the best of my k	nowledge and belief.
SIGNATURE Dy A.	TITLE Senior Regulator	y Compl. Sp. DATE 06/29/2009
Type or print name Bryan Arrant	E-mail address: <u>bryan.ar</u>	rant@chk.com PHONE: (405)935-3782
For State Use Only	PETROLEUM	
APPROVED BY: Conditions of Approval (if any):	TITLE	DATE JUL 0 1 2009