Form 3160-5 (August 2007)	UNITED STATES		0 55		FORM APPROVED OMB NO 1004-0135	
				5 Lease Seri	Expires' July 31, 2010 5 Lease Serial No NMNM24683	
JUL 2 7 2005 SUNDRY NOTICES AND REPORTS ON WELLS HOBBSOR well. Use form 3160-3 (APD) for such proposals.					Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7 If Unit or (CA/Agreement, Name and/or No	
1. Type of Well □ Oil Well 🙀 Gas Well □ Other				8 Well Name MERCHA	e and No NT 8 FEDERAL 1	
2 Name of Operator Contact. LINDA GOOD CHESAPEAKE OPERATING INC E-Mail: linda good@chk.com				9. API Well 30-025-3	9. API Well No. 30-025-36318-00-S1	
3a Address 3b. Phone P O BOX 18496 Ph: 405- OKLAHOMA CITY, OK 73154-0496 Ph: 405-			(include area code) 10 Field and Pool, or Exploratory -4275 UNDESIGNATED			
4. Location of Well (Footage, Sec, T, R., M, or Survey Description) Sec 8 T22S R33E SESW 880FSL 1760FWL 32.24050 N Lat, 103.35488 W Lon				,	or Parish, and State	
Sec 8 T22S R33E SESW 880 32.24050 N Lat, 103.35488 W		LEA CO	UNTY, NM			
12. CHECK APPI	ROPRIATE BOX(ES) TO) INDICATE	NATURE OF	NOTICE, REPORT, OR	OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent	□ ^{Acidize}		pen	□ Production (Start/Res		
-	□ Alter Casing	-	ture Treat	Reclamation	U Well Integrity	
Subsequent Report	Casing Repair	-	Construction	Recomplete	□ ^{Other}	
□ Final Abandonment Notice	Change Plans			Temporarily Abandon	n	
	Convert to Injection			U Water Disposal		
13 Describe Proposed or Completed Op If the proposal is to deepen direction Attach the Bond under which the wo following completion of the involve testing has been completed. Final A determined that the site is ready for	ally or recomplete horizontally ork will be performed or provid d operations. If the operation r bandonment Notices shall be fi	 give subsurfac e the Bond No esults in a multi 	e locations and mea on file with BLM/B ple completion or re	sured and true vertical depths IA Required subsequent repo completion in a new interval.	of all pertinent markers and zones rts shall be filed within 30 days a Form 3160-4 shall be filed once	
CHESAPEAKE, RESPECTFL	JLLY, REQUESTS, PERM	ISSION TO	RECOMPLETE	THIS WELL PER THE F	OLLOWING, PROCEDURE:	
1. MIRU PU. NDWH/NUBOF	3		SF	E ATTACHED FO	R	
2. PRESSURE TEST CASING		NDITIONS OF AF				
3. RU WIRELINE CO. RUN (BL FROM PBTD TO DV	TOOL @ 6,9	99' W/2,000 PS	I TRAPPED ON THE CA	SING.	
4. PERFORATE BRUSHY CA GUN, .4" PERF HOLES.	NYON 8,582-8,624' (42')	, W/2 SPF (8	4 HOLES), 120	DEGREE PHASING USI	NG CASING	
5. RIH W/PACKER ON 2 7/8"	TBG TO 8,525'. SPOT A	ACID ACROS	S PERFS AND	PULL PACKER UP TO 8	i,500'.	
14 Thereby certify that the foregoing	s true and correct.					
		EAKE OPERAT	ING INC, sent to	o the Hobbs	-,	
Committed to AFMSS for processing by KURT Name (Printed/Typed) LINDA GOOD				GULATORY COMPLIAN		
Signature (Electronic Submission)			Date 07/16/2	2009		
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE USE		
Approved By CHRISTOPHER WALLS			TitlePETROLI		Date 07/24/2(
Conditions of approval, if any, are attached. Approval of this notice does not warrant or				1/4	2009	
certify that the applicant holds legal or ec which would entitle the applicant to cond	Office Hobbs	<u> </u>	272009			
Title 18 U S C. Section 1001 and Title 4.	U.S.C. Section 1212, make it	a crime for any	person knowingly a	nd willfully to make to any de	partment or agency of the United	
States any false, fictitious or fraudulent	statements or representations a	as to any matter		nı.		

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Additional data for EC transaction #72272 that would not fit on the form

32. Additional remarks, continued

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REVERSE ACID BACK INTO TUBING. SET PACKER AND PRESSURE BACKSIDE TO 1000 PSI. ACIDIZE PERFS W/4,000 GAL 15% NEFE ACID DROPPING 125 PERF BALLS EVENLY THROUGHOUT JOB. DISPLACE ACID TO BOTTOM PERF. SI 30 MINS. FLOW/SWAB BACK ACID AND TEST. POH W/PACKER.

6. IF WARRANTED, FRAC BRUSHY CANYON PERFS PER FRAC RECOMMENDATION DOWN CASING (ANTICIPATE 75,000# SAND, 50 BPM). FLOW BACK WELL UNTIL IT DIES.

7. RIH W/2 7/8" TBG W/SN to 8,550' (ABOVE PERFS) AND TAC @ 8,500'. RIH W/PUMP AND RODS.

8. NDBOP/NUWH. RD MO.

Merchant 8 Federal 1 30-025-36318 Chesapeake Operating Inc. July 23, 2009 Conditions of Approval

- 1. Surface disturbance beyond the existing pad must have prior approval.
- 2. Casing pressure test (2000 psi) required before perforating.
 - a. Spot 25 sxs cmt on CIBP @ 12,059' to cover top of Wolfcamp formation. Top of Wolfcamp 11,982'
- 3. Closed loop system required.
- 4. Operator to have H2S monitoring equipment on location.
- 5. For the Brushy Canyon depth, a minimum of a 3M BOP is required and must be tested.
- 6. Subsequent sundry and completion report required.
- 7. When well is abandoned or prior to selling a plug must be set to cover top of Bone Spring Formation.
- 8. Subject to like approval by State.

CRW 072309

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