Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	June 19, 2008 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONSERVATION DIVISION	30-025-34037 V
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE X FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM		o. State on & Gas Boase 140.
87505 SUNDRY NOT	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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		HOOVER 27
PROPOSALS,)		0 17/11/1
1. Type of Well: Oil Well Gas Well Other		8. Well Number 2
2. Name of Operator CHESAPEAKE OPERATING, INC.		9. OGRID Number 147179
3. Address of Operator P.O. BOX	18496	10. Pool name or Wildcat
	MA CITY, OK 73154-0496	EAST VACUUM DRINKARD E
4. Well Location Unit Letter K: 2145 feet from the SOUTH line and 1980 feet from the WEST line		
Section 27	Township 178 Range 35E	NMPM County LEA
Section 2	11. Elevation (Show whether DR, RKB, RT, GR, etc.	
	3936	
12. Charle Ammoniate Boy to Indicate Nature of Natice Beneat or Other Date		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF IN	·	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	PLUG AND ABANDON REMEDIAL WOR CHANGE PLANS COMMENCE DR	_
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	
DOWNHOLE COMMINGLE		_
OTHER:	OTHER: RE-INS	TATEMENT OF TA STATUS
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 RESPECTFULLY SUBMITS CHART FOR TA STATUS REINSTATEMENT.		
30 MINUTE CHART- BEGINNING PRESSURE OF 560# ENDING PRESSURE OF 535#.		
WITNESSED BY SYLVIA DIC	KEY, NMOCD	
		RECEIVED
This Approval of Temporary 29-20/0 JUL 37 200- Abandonment Expires HOBBSOCD **Last T/A Extension HOBBSOCD		
Abandonment Expires HOBBSOCD		
X15+ T/A EXTENSION		
	* LAS!	
Spud Date:	Rig Release Date:	
1		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
L	hard	,
SIGNATURE YOU NO	TITLE PRODUCTION ASSIST.	ANT DATE <u>07/29/2009</u>
Type or print name PAT RICHARI	OS E-mail address: pat.richards@ch	k.com PHONE: (575)391-1462
For State Use Only		
APPROVED BY:	MI, Hill HILLE DISTRICT 1. OUPER	AUGO4 2009
Conditions of Approval (if any)	W. Way IIILE	DATE

