Form 3160-5/ (August 2007) DE BU SUNDRY	Dil Conservation E 1625 N. French D: Hohnstrand of the f PARTMENT OF THE I JREAU OF LAND MANA NOTICES AND REPO s form for proposals to I. Use form 3160-3 (API	RECE	2010 5. La	OMB NC	PPROVED 0. 1004-0135 01y 31, 2010 Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well	8. W W	8. Well Name and No. WRINKLE 13 FEDERAL COM 1H				
2. Name of Operator CHESAPEAKE OPERATING		9. API Well No. 30-005-27994-00-X1				
3a Address P.O. BOX 18496 OKLAHOMA CITY, OK 73154	3b. Phone No. (include area code) Ph: 405-935-4275	10. I W	10. Field and Pool, or Exploratory WILDCAT-WOLFCAMP			
4. Location of Well (Footage, Sec., T., R, M, or Survey Description)				11. County or Parish, and State		
Sec 13 T15S R31E NESE 198 33.01434 N Lat, 103.76752 W	C	CHAVES COUNTY, NM				
12. CHECK APPI	ROPRIATE BOX(ES) TO	O INDICATE NATURE OF N	OTICE, REPOR	T, OR OTHER	R DATA	
TYPE OF SUBMISSION		TYPE OF	ACTION			
 Notice of Intent Subsequent Report Final Abandonment Notice 	 Acidize Alter Casing Casing Repair Change Plans Convert to Injection 	 Deepen Fracture Treat New Construction Plug and Abandon Plug Back 	 Production (S Reclamation Recomplete Temporarily A Water Dispos 	Abandon	 Water Shut-Off Well Integrity Other Drilling Operations 	
Attach the Bond under which the wo following completion of the involvec testing has been completed. Final Al determined that the site is ready for f SET INTERMEDIATE CASIN 1/8/2010 RUN 96 JTS 9 5/8 + ADDITIVES, TAIL IN W/480	ally or recomplete horizontally, rk will be performed or provide l operations. If the operation ro- andonment Notices shall be fi- inal inspection.) G: " 40# J-55 LTC CSG, SE SX + ADDITIVES. CIRC FOR THE LEAD SLURE SLURRY REACHED 500	, give subsurface locations and measure the Bond No. on file with BLM/BIA. sults in a multiple completion or recon led only after all requirements, includir T @ 4005', CMT'D W/1040 SX CULATE CMT BACK TO SURF RY REACHED 500 PSI IN 25 HI PSI IN 6 HRS 35 MIN.	ed and true vertical of Required subseque apletion in a new ining reclamation, have	lepths of all pertin nt reports shall be erval, a Form 3166 been completed, a	ent markers and zones. filed within 30 days 0-4 shall be filed once and the operator has	
(CHK PN 6187106)						
14 I hereby certify that the foregoing is	Electronic Submission	#79921 verified by the BLM Well AKE OPERATING INC, sent to th ocessing by DAVID GLASS on 0 ⁴	e Roswell			
Name (Printed/Typed) LINDA GO			ULATORY COM		EC	
Signature (Electronic	Submission)	Date 01/12/20	10			
	THIS SPACE F	OR FEDERAL OR STATE (OFFICE USE			
Approved By ACCEPT	ED		LASS JM ENGINEER		Date 01/14/2010	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to cond	uitable title to those rights in th uct operations thereon.	s not warrant or e subject lease Office Roswell	K	7		

Title 18 U S.C. Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

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Revisions to Operator-Submitted EC Data for Sundry Notice #79921

		Operator Submitted	BLM Re
	Sundry Type:	DRG SR	DRG SR
	Lease:	NMNM105887	NMNM105
	Agreement.		
۰	Operator: .,	CHESAPEAKE OPERATING, INC. P.O. BOX 18496 OKLAHOMA CITY, OK 73154-0496 Ph: 405-935-4275	Chesape P.O. Box Oklahon Ph. 405.7
	Admin Contact:	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail: linda.good@chk.com	LINDA GO SR. REGL E-Mail: line
		Ph: 405-935-4275	Ph: 405-9
	Tech Contact.	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail: linda.good@chk.com	LINDA GO SR. REGU E-Mail: In
		Ph. 405-935-4275	Ph: 405-9
	Location:		
	State: County	NM CHAVES	NM CHAVES
	Field/Pool:	WILDCAT - WOLFCAMP	WILDCAT
	Well/Facility:	WRINKLE 13 FEDERAL COM 1H Sec 13 T15S R31E NESE 1980FSL 330FEL	WRINKLE Sec 13 T1

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PEAKE OPERATING INC X 18496 DMA CITY, OK 73154-0496 .767.4275

OOD SULATORY COMPLIANCE SPEC Inda.good@chk.com

-935-4275

GOOD GULATORY COMPLIANCE SPEC Inda.good@chk.com

-935-4275

T-WOLFCAMP

WRINKLE 13 FEDERAL COM 1H Sec 13 T15S R31E NESE 1980FSL 330FEL 33 01434 N Lat, 103.76752 W Lon