RECEIVED

FEB 15 ZUIU

Submit One Copy To Appropriate District Office	State of	f New Mexi	ico HOBE	SOUCE	Form C-103
District I 1625 N. French Dr., Hobbs, NM, 88240	State of Energy, Mineral	s and Natura	l Resources	WELL APIN	March 18; 2009
District II	OIL CÓNSERVATIÓN DIVISION				. 30-023-26343
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.			.5. Indicate T	
1000 Rio Brazos: Rd., Azteć, NM-87410 District IV	Santa Fe, NM 87505				c Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM					
SUNDRY NOTICES AND 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 SUCH				7. Lease Name or Unit Agreement Name Langley Griffin	
PROPOSALS.) 1. Type of Well: Oil Well Gas. Well Other				8. Well Number 1	
2. Name of Operator Chesapeake Operating, Inc.				9. OGRID Number 147179	
3. Address of Operator P.O. Box 18496				10. Pool name or Wildeat	
Oklahoma City, OK 73154 0496			Langely; Strawn		
4. Well Location RECEIVED					
Unit Letter J: :: 1980' feet from the South line and 1980' feet from the East line Section 28 Township 22S Range 36E NMPM County Lea FEB 15 2010					
	11. Elevation (Show) 3488' GR	vhether DR; I	RKB, RT, GR, etc.)	12.	HOBBSOCO
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
	PLUG AND ABANDO	N. 🗆	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON . CHANGE PLANS . COMMENCE DRILLING OPNS. P AND A					
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMENT	JOB [
OTHER:			Location is re	ady for OCD i	nspection after P&A
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.					
Rat hole and cell'ar have been filled and leveled. Cathodic protection holes have been properly abandoned. X steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the					
					
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR					
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.					
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines, and other production equipment.					
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.					
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed					
from lease, and well location.					
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have					
to be removed.) X All other environmental concerns have been addressed as per OCD rules.					
Pipelines and flow lines have been abandoned in accordance with 19:15.35.10 NMAC. All fluids have been abandoned in accordance with 19:15.35.10 NMAC. All fluids have been abandoned in accordance with 19:15.35.10 NMAC.					
retrieved flow lines and pipelines.					
When all work has been completed, re	turn this form to the a	ppropriate Di	strict office to scho	edüle an insped	etion.
SIGNATURE Days	Vend)	TITLE Sen	ior Regulatory Cor	mpl. Sp.	DATE 02/15/2010
TYPE OR PRINT NAME Bryan Arra	unit-	E-MAIL: 1	oryan:arrant@chk.o	cóm	PHONE: (405)935-3782
For State Use Only	D.1.1			~	1 1
APPROVED BY: Wash	Tritaken	TITEE (ompliance	Officer	- DATE 2/16/2010
Conditions of Approval (if any):			1		