Form 3160-5- (August 2007) DE BI					FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010 5. Lease Serial No. NMNM105887 6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRI	SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well				8. Well Name and No. WRINKLE 13 FEDERAL COM 3H				
2. Name of Operator Contact: LINDA GOOD Chesapeake Operating Inc. E-Mail: linda good@chk.com			D		9. API Well No. 30-005-27978-00-X1			
					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 SENE 19	Sec 13 T15S R31E SENE 1980FNL 330FEL					CHAVES COUNTY, NM		
12. CHECK APP	ROPRIATE BOX(ES) TO INC	DICATE	NATURE OF N	IOTICE, R	EPORT, OR OTHE	R DATA		
TYPE OF SUBMISSION			TYPE OF	ACTION				
<ul> <li>Notice of Intent</li> <li>Subsequent Report</li> <li>Final Abandonment Notice</li> <li>Alter Casing</li> <li>Casing Repair</li> <li>Change Plans</li> <li>Convert to Injection</li> </ul> 13. Describe Proposed or Completed Operation (clearly state all pertinent deta If the proposal is to deepen directionally or recomplete horizontally, give Attach the Bond under which the work will be performed or provide the B following completion of the involved operations. If the operation results is to deepen directional clearly state all pertinent deta following completion of the involved operations. If the operation results is to deepen directional clear clearly state all pertinent deta following completion of the involved operations. If the operation results is the operation results in the operation results is the operation results in the operation results in the operation results is the operation of the involved operations. If the operation results is the operation results in the operation resolutes in the operation resolutes in the operation results		<ul> <li>Fracture Treat</li> <li>Reclam</li> <li>New Construction</li> <li>Recom</li> <li>Plug and Abandon</li> <li>Tempo</li> <li>Plug Back</li> <li>Water I</li> <li>uls, including estimated starting date of any pubsic face locations and measured and true vond No. on file with BLM/BIA Required sure a multiple completion or recompletion in a</li> </ul>		plete rarily Abandon Disposal proposed work and approximate duration thereof. ertical depths of all pertinent markers and zones. ubsequent reports shall be filed within 30 days new interval, a Form 3160-4 shall be filed once		Integrity or of Operato ion thereof. and zones. 30 days filed once		
determined that the site is ready for f Chesapeake, respectfully, rec	quests to change the operator fr ged the well name from Orion F	rom CO	G Operating, LL(	C to Chesar	beake	and the open	ator has	
(CHK PN 618708)			Chesapeake Operating, Inc. Accepts All Applicable Terms, Conditions, Stipulations, And Restrictions Concerning Operations Conducted On The Leased Land Or Portion Thereof Under Their \$150,000.00 N/W BLM Bond Number NM2634.					
<ul> <li>14. I hereby certify that the foregoing to C</li> <li>Name (Printed/Typed) LINDA Get</li> </ul>	Electronic Submission #82854 For COG OPER committed to AFMSS for process	ATING L	LC, sent to the R AVID GLASS on (	oswell )3/18/2010 (1		'EC		
Signature (Electronic	Signature (Electronic Submission)			Date 03/17/2010				
	THIS SPACE FOR F	EDERA	L OR STATE	OFFICE U	SE			
Approved By DAVID R GLASS Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.			TitlePETROLEUM ENGINEER     Date 03/19/2010       Office Roswell     Image: Constraint of the second secon					
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent				willfully to m	ake to any department or	agency of th	ie United	
** BLM REV	/ISED ** BLM REVISED ** I	BLM R	EVISED ** BL		D ** BLM REVISE	D **		

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## Revisions to Operator-Submitted EC Data for Sundry Notice #82854

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	SUCCESS NOI	SUCCESS SR
Lease:	NMNM105887	NMNM105887
Agreement:		
Operator:	CHESAPEAKE OPERATING, INC. P.O. BOX 18496 OKLAHOMA CITY, OK 73154-0496 Ph: 405-935-4275	COG OPERATING LLC 550 W TEXAS SUITE 1300 MIDLAND, TX 79701 Ph. 432-685-9158
Admin Contact:	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail: linda.good@chk.com	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail: linda.good@chk.com
	Ph: 405-935-4275	Ph: 405-935-4275
Tech Contact:	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail: linda.good@chk.com	LINDA GOOD SR. REGULATORY COMPLIANCE SPEC E-Mail: linda good@chk.com
	Ph. 405-935-4275	Ph: 405-935-4275
Location: State <sup>-</sup> County:	NM CHAVES	NM CHAVES
Field/Pool:	WILDCAT; WOLFCAMP	WILDCAT-WOLFCAMP
Well/Facility:	WRINKLE 13 FEDERAL COM 3H Sec 13 T15S R31E SENE 1980FNL 330FEL	WRINKLE 13 FEDERAL COM 3H Sec 13 T15S R31E SENE 1980FNL 330FEL

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