Submit One Copy To Appropriate District Office	ne Copy To Appropriate District State of New Mexico			Form C-103		
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources			March 18, 2009 WELL API NO. 30-025-38530		
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	rict II W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION			5. Indicate Type of Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505			STATE X FEE 6. State Oil & Gas Lease No.		
District IV 1220 S. St. Francis Dr., Santa Fe, NM	District 14				jas Lease No.	
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 Keller 11 State		
V 1	Well: XOil Well Gas Well Other REVELVED			8. Well Number 1		
2. Name of Operator Chesapeake C	Operating, Inc.	M	AY 17 2010	9. OGRID Nun	nber 147179 '	
3. Address of Operator P.O. Box 18496 Oklahoma City, OK 73154-0496			OBBSOCD	10. Pool name or Wildcat Antelope Ridge; Bone Springs, North		
4. Well Location	fact from the North	ling and 22	O fact from the W	4 lino	/	
	_feet from the <u>North</u> 23S Range 34E	NMPM				
	11. Elevation (Show was 3368 GR	hether DR,	RKB, RT, GR, etc.)	,		, , , , , , , , , , , , , , , , , , ,
12. Check Appropriate Box to I		Notice, R	eport or Other D	ata	removes the common resource and localistic assessment and an accusate and the common section of the common sec	***************************************
NOTICE OF INTE	ENTION TO:		SUBS	SEQUENT RI	EPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR					ALTERING CAS	ING 🗆
 -	CHANGE PLANS MULTIPLE COMPL		COMMENCE DRIL CASING/CEMENT		P AND A	
OTHER:		☐				
X All pits have been remediated in co			e terms of the Opera	ator's pit permit a	and closure plan.	
☒ Rat hole and cellar have been filled☒ A steel marker at least 4" in diame						
OPERATOR NAME, LEAS	E NAME, WELL NU	JMBER, A	API NUMBER, QUA	ARTER/QUART	TER LOCATION	OR
UNIT LETTER, SECTION, PERMANENTLY STAMPE	TOWNSHIP, AND I	RANGE.	All INFORMATIO			
The location has been leveled as no other production equipment.	early as possible to ori	ginal grou	nd contour and has b	een cleared of all	l junk, trash, flow l	ines and
Anchors, dead men, tie downs and If this is a one-well lease or last ren					isted in compliance	with
OCD rules and the terms of the Operator						
from lease and well location. X All metal bolts and other materials l	have been removed. F	ortable ba	ses have been remov	red. (Poured onsit	te concrete bases do	o not have
to be removed.) X All other environmental concerns l				•		
Pipelines and flow lines have been				All fluids have b	een removed from	non-
retrieved flow lines and pipelines.						
When all work has been completed, retu	arn this form to the app	propriate D	District office to sche	dule an inspectio	n.	
SIGNATURE JOS TIC	hards	TITLE <u>Pr</u>	oduction Assistant		_DATE_05/17/202	10
TYPE OR PRINT NAME Pat Richards For State Use Only.	3	E-MAIL:	pat.richards@chk.ce	om	PHONE: <u>(575)391</u>	-1462
W . 0 / 2	KT1.	/	1 al.	Dffi =	DATE 06/01	/201
APPROVED BY: Conditions of Approval (if any):	man Mu	TITLE (ompliance	UITIEY	DATE_06/0/	12010
* Dry 7 Lon						
· June						