

Submit 1 Copy To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Aztec, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
RECEIVED
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
HOBBS

Form C-103
October 13, 2009

WELL API NO. 30-025-36187 ✓	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> ✓	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Trinity Burrus Abo Unit ✓	
8. Well Number 7 ✓	
9. OGRID Number 147179 ✓	
10. Pool name or Wildcat Trinity; Wolfcamp ✓	
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 PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injection ✓	
2. Name of Operator Chesapeake Operating, Inc. ✓	
3. Address of Operator P.O. Box 18496 Oklahoma City, OK 73154	
4. Well Location Unit Letter <u>C</u> : 330' feet from the <u>North</u> line and 2310' feet from the <u>West</u> line Section <u>27</u> Township <u>12S</u> Range <u>38E</u> NMPM County <u>Lea</u> ✓	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3799'	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Converted Well to Injection <input checked="" type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Well converted to injection. R-112496.

Please find the work performed on this well from 3/19/2007 through 3/22/2007

MIRU PU. NDWH & NUBOP. POH w/tbg & pkr.. TIH w/pkr. Check for seals & leaks. Changed out a few seals & replaced 5 jts 2 3/8" TK pipe.

Flushed 160 bbls pkr fluid. Set pkr @ 9005' & tested to 520 psi. Held good. Ran MIT. top of perfs at 9048'

Original chart submitted w/sundry on 3/23/07 Well bore diagram is attached.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Bryan Arrant TITLE Sr. Regulatory Compl. Sp. DATE 01/19/2011

Type or print name Bryan Arrant E-mail address: bryan.arrant@chk.com PHONE: (405)935-3782

For State Use Only

APPROVED BY: [Signature] TITLE STAFF MGR DATE 1-20-2011

Conditions of Approval (if any):