

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-025-34340
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas 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 PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> New untested well	7. Lease Name or Unit Agreement Name CARLISLE 7
2. Name of Operator Chesapeake Operating, Inc.	8. Well No. 1
3. Address of Operator P. O. Box 18496, Oklahoma City, OK 73154-0496	9. Pool name or Wildcat N.E. Shoe Bar-Strawn
4. Well Location Unit Letter <u>3</u> : <u>2238</u> Feet From The <u>south</u> Line and <u>1087</u> Feet From The <u>west</u> Line Section <u>7</u> Township <u>16S</u> Range <u>36E</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR: 3960'	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Tubing - Perforations ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Final completion paperwork not filed - waiting on partner's approval to put on artificial lift. Well is not producing.

4-23-98 NU BOP's, PU & TIH w/4-3/4" bit, csg scraper, string mill, six 3-1/2" DC's & 257 jts 2-7/8" 6.5# L-80 8RD tbg. Tag up @7980', drill cement & DV tool to 8093', total 260 jts tbg, test csg to 1500#, OK, finish TIH w/KB & tools, total 378 jts tbg, tag TD @11,613', SDFN.

4-24-98 Circ well w/270 bbls 2% KCL, TOOH w/tbg & BHA, MIRU wireline, TIH w/CCL/CBL/GR, TD @11,631', DV tool @8044', est TOC @2600', log well w/1000#, TOOH w/wireline.

4-25-98 RU wireline, TIH w/CCL/GR & 6"x3-1/8" HSC gun, 16 gram 4 spf 90° phasing. Perforate STRAWN 11,422'-428', TOOH, RDMO wireline, no fluid change, PU & TIH w/5-1/2" Model "R" pkr, 2-1/4" SN & 374 jts 2-7/8" L-80 6.5# 8RD tbg, ND BOPs, set pkr @ 11,297' w/15,000# compression, NU wellhead, hook up flowline, TIH w/swab, initial fluid level @ surface pulling from 10000", swab 5 hours, final fluid level @9700' pulling from SN @11,291', SITP 40#.

(continued on next page)

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

SIGNATURE Barbara J. Bale TITLE Regulatory Analyst DATE 07/09/98

TYPE OR PRINT NAME Barbara J. Bale

TELEPHONE NO. (405)848-8000

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE AUG 04 1998

CONDITIONS OF APPROVAL, IF ANY: