Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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. 30-025-35005

5. Indicate Type of Lease STATE ☐ FEE ☒

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.)

7. Lease Name or Unit Agreement Name: Boyce 15

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator: Chesapeake Operating, Inc.

8. Well No. 2

3. Address of Operator: P.O. Box 18496, Okla. City, OK 73154-0496

9. Pool name or Wildcat: NW Shoebar Strawn

4. Well Location
Unit Letter A : 664 Feet From The North Line and 499 Feet From The East Line

Section 15 Township 16S Range 35E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR: 3987'

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			OTHER: Perforate; Tubing	☒		

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.

08/02/00 Perforate Strawn 11,248-253; 11,264-269'; 11,275-292' @ 4 spf, 104 holes, PU TIH w/5-1/2" Model "R" PACKER, SN & 256 jts 2-7/8" tbg, ND BOP's, NU tree, initial fluid level @ surface pulling from 1000', 52 BW, final fluid level @ 3800' pulling from 5000'.

08/03/00 Initial fluid level @ 1500' pulling from 2600', final fluid level @ surface pulling from 1500', break down, total 186 bbls, ISIP 638#, 5 min 0#, avg rate 4 BPM, avg PSI 3000#, max rate 5.5 BPM, max PSI 4200#, initial fluid level at surface pulling from 1300', final fluid level 3500'.

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

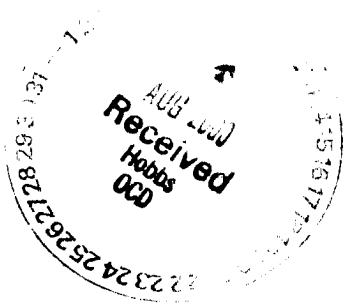
SIGNATURE Barbara J Bale TITLE Regulatory Analyst DATE 08/04/00

TYPE OR PRINT NAME Barbara J. Bale TELEPHONE NO. (405) 848-8000

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:


AUG 2009
Received
Hobbs
OCD