

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, 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

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO.	30-025-35612
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:  Alice 13
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8. Well No. 1
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9. Pool name or Wildcat SW Austin-Mississippian
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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 T.A.'d
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Name of Operator Chesapeake Operating, Inc.
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2. Address of Operator P.O. Box 18496, Oklahoma City, OK 73154-0496
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3. Well Location  Unit Letter <u>O</u> : <u>660</u> feet from the <u>South</u> line and <u>1795</u> feet from the <u>East</u> line  Section <u>13</u> Township <u>15-S</u> Range <u>35-E</u> NMPM <u>Lea</u> County
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10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3946' GR
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11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input checked="" type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

05/20/02 MIRU Triple N rig #25. Flowed well down and ND wellhead and NU spool/BOP. Start out of hole w/ packer.  
05/21/02 Finished POOH w/ tbg & packer. RIH w/ 389 jts 2-3/8" production tubing. SD till 5/23/02.  
05/23/02 Notified OCD, Billy Pritchard. Loaded hole w/ mud, pumped 25 sx C cmt 12,222 - 11,867'. Pumped 25 sx C cmt @ 11,625'. WOC and tagged cmt @ 11,319'. Pumped 25 sx C cmt 8,609 - 8,355'. Pumped 25 sx C cmt 5,624 - 5,370'. POOH w/ tbg and SDFN.  
05/24/02 Cut casing @ 4,448', not free. Pressured up to 1,500 psi on csg cut, no rate. Pumped 25 sx C cmt @ 4,497'. WOC and tagged cmt @ 4,257'. Cut casing @ 3,498', not free. No rate at 1,000 psi. Pumped 25 sx C cmt 3,550 - 3,296'. POOH w/ tbg, SDFN.  
05/28/02 Cut casing @ 1,835'. POOH w/ 45 jts 5 1/2" csg. Pumped 40 sx C cmt 1,885 - 1,700'. WOC and tagged cmt @ 1,695'. Pumped 40 sx 502 - 378'. WOC & tagged cmt @ 382'. Pumped 15 sx C cmt 60' to surface. RDMO.  
06/03/02 Cut off wellhead and installed dryhole marker, cut off anchors. Backfilled pit and cellar.

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

SIGNATURE James F. Newman TITLE Engineer DATE 05/21/02

Type or print name James F. Newman, P.E. Triple N Services, Inc. Telephone No. 915-687-1994  
(This space for State use)

APPROVED BY Billy E. Pritchard TITLE COMPLIANCE OFFICIAL DATE AUG 16 2002  
Conditions of approval, if any:

GW