

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

Form C-103  
Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <u>30-025-28036</u>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <u>Chesapeake Operating, Inc.</u>		6. State Oil & Gas Lease No.
3. Address of Operator <u>P. O. Box 18496, Oklahoma City, OK 73154-0496</u>		7. Lease Name or Unit Agreement Name:  <u>Moby</u>
4. Well Location  Unit Letter <u>D</u> : <u>810</u> feet from the <u>North</u> line and <u>330</u> feet from the <u>West</u> line  Section <u>7</u> Township <u>20S</u> Range <u>38E</u> NMPM <u>Lea</u> County		8. Well No. <u>1</u>
		9. Pool name or Wildcat <u>Monument Tubbs</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>GR: 3562'</u>		

11. 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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Add perfs & frac <input checked="" 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 recompletion.
- 07/16/02 RU Crain, load 138 bbls 2% down csg, pressure test csg to 4000#, held OK, release pressure, RU Black Warrior, perf 5846-67', RD Black Warrior, ck csg pressure in 5 min, had 20#, leave BOP closed, SD & prepare to acidize & frac
- 07/18/02 RU acidizers, start down hole w/26 bbl acid, hit fluid, pump 2 more bbl, pressure to 4000#, unable to pump into perforations, RD, RIH w/tbg, spot acid @5885' w/8 bbls, unable to break down perfs, reverse Acid OOH, RD Acidizers, RD frac equipment, POOH w/tbg, SDFN
- 07/19/02 RIH w/pkr, hydro test tbg, RD testers, spot 2 bbls acid across perfs, pull 4 stds, set pkr, pressure up csg to 2500#, tie on tbg, start pumping wtr to get rate of 1 bbl at 3200#, start w/acid, pump 4 BPM @4400#, kept @4 BPM while dropping balls, finish pumping 7 bbls flush @ 4 BPM, SIP 2700#, 5 min 2170#, 10 min 2118#, SI, RD
- 07/21/02 ck pressure on tbg, on vacuum, RU swab, RIH, tag fluid @1800', swab down to 5785', no fluid, LD swab, rlse pkr, POOH w/tbg, SD, prepare to frac
- 07/23/02 Put on tree saver, pump thru 5 stages

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 11/08/02

Type or print name Barbara J. Bale

Telephone No. (405)848-8000

(This space for State use)

APPROVED BY

TITLE

NOV 13 2002

Conditions of approval, if any: