



TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

OPERATOR: License# _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: (_____) _____
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- _____
Spot Description: _____
____ - ____ - ____ - ____ Sec. _____ Twp. _____ S. R. _____ E W
_____ feet from N / S Line of Section
_____ feet from E / W Line of Section
GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
Datum: NAD27 NAD83 WGS84
County: _____ Elevation: _____ GL KB
Lease Name: _____ Well #: _____
Well Type: (check one) Oil Gas OG WSW Other: _____
 SWD Permit #: _____ ENHR Permit #: _____
 Gas Storage Permit #: _____
Spud Date: _____ Date Shut-In: _____

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size						
Setting Depth						
Amount of Cement						
Top of Cement						
Bottom of Cement						

Casing Fluid Level from Surface: _____ How Determined? _____ Date: _____
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
Do you have a valid Oil & Gas Lease? Yes No
Depth and Type: Junk in Hole at _____ (depth) Tools in Hole at _____ (depth) Casing Leaks: Yes No Depth of casing leak(s): _____
Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
(depth) (depth)
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet
2. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY

Date Tested: _____ Results: _____ Date Plugged: _____ Date Repaired: _____ Date Put Back in Service: _____

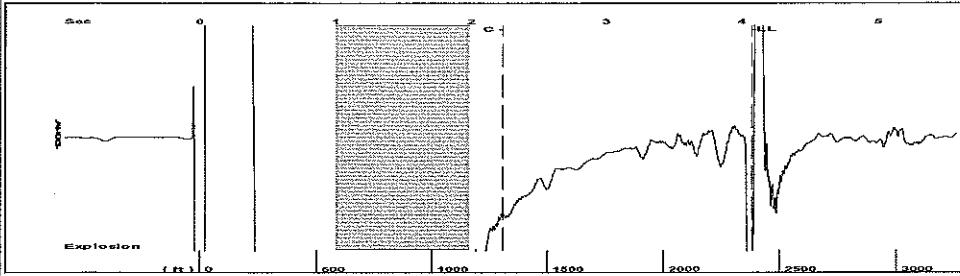
Review Completed by: _____ Comments: _____

TA Approved: Yes Denied Date: _____

Mail to the Appropriate KCC Conservation Office:

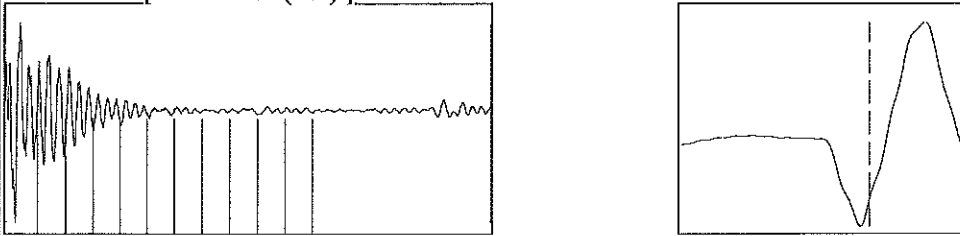
	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
	KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.630.4000
	KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720	Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550

Group: MyWells Well: Flory 2-1 (acquired on: 07/03/14 10:54:43)



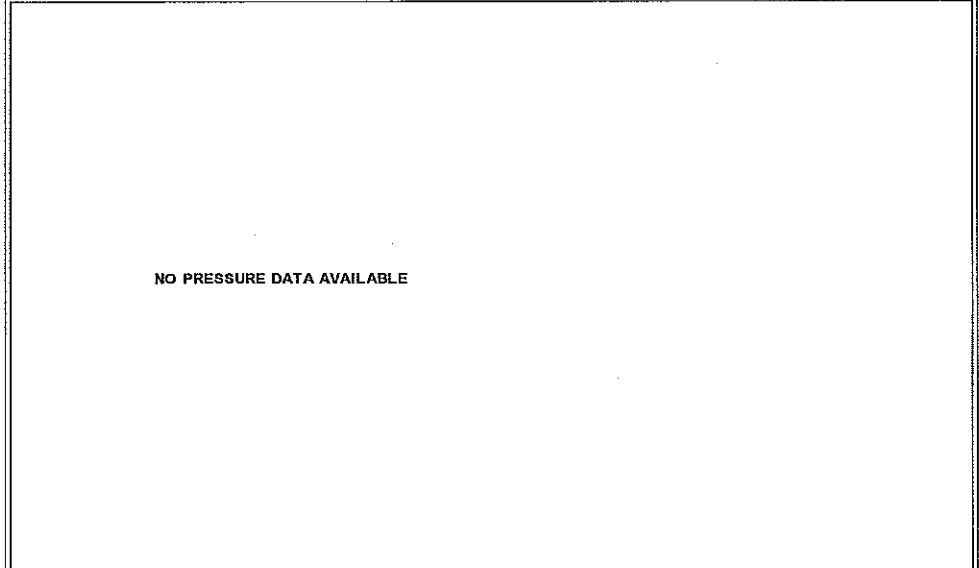
Filter Type High Pass Automatic Collar Count Yes Time 4.07 sec
 Manual Acoustic Velocity 124.11 ft/s Manual JTS/sec 17.7305 Joints 75.0615 Jts
 Depth 2379.45 ft

[1.0 to 2.0 (Sec)]



Analysis Method: Automatic

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Change in Pressure -345.49 psi NONE
 Range 0 - ? psi
 Change in Time 1.25 min

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Production Current	Potential	Casing Pressure
Oil - * -	- * - BBL/D	5360.9 psi (g)
Water - * -	- * - BBL/D	Casing Pressure Buildup
Gas - * -	- * - Mscf/D	-345.5 psi
		1.25 min
IPR Method	Vogel	Gas/Liquid Interface Pressure
PBHP/SBHP	- * -	5666.7 psi (g)
Production Efficiency	0.0	
Oil 40 deg.API		Liquid Level Depth
Water 1.05 Sp.Gr.H2O		2379.45 ft
Gas 0.70 Sp.Gr.AIR		
Acoustic Velocity 1169.26 ft/s		Pump Intake Depth
		- * - ft
		Formation Depth
		2775.00 ft



Producing

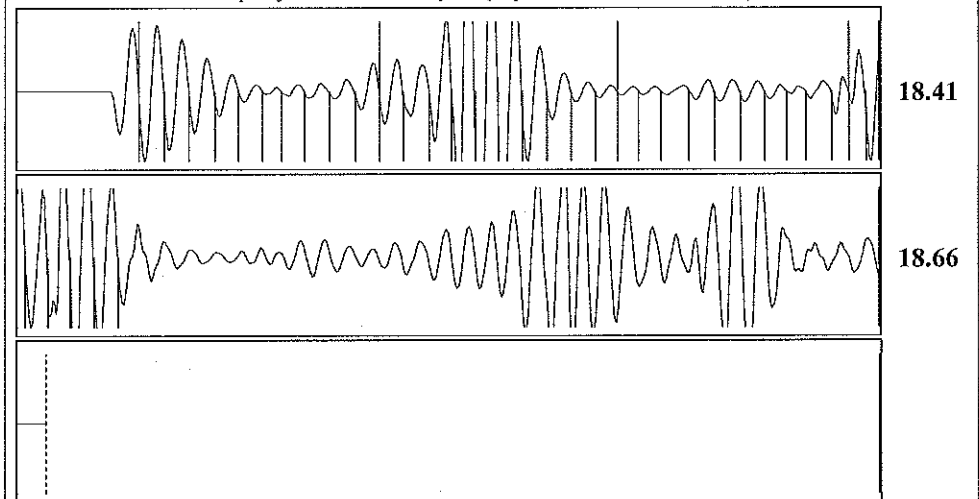
Annular Gas Flow	0 Mscf/D
% Liquid	100 %
Pump Intake	- * - psi (g)
Producing BHP	5846.5 psi (g)
Static BHP	- * - psi (g)

Formation Submergence

Total Gaseous Liquid Column HT (TVD)	396 ft
Equivalent Gas Free Liquid HT (TVD)	396 ft

Acoustic Test

Group: MyWells Well: Flory 2-1 (acquired on: 07/03/14 10:54:43)



Acoustic Velocity	1169.26 ft/s	Joints counted	36
Joints Per Second	18.4426 jts/sec	Joints to liquid level	75.0615
Depth to liquid level	2379.45 ft	Filter Width	15.7305 19.7305
Automatic Collar Count	Yes	Time to 1st Collar	0.284 2.236

Conservation Division
District Office No. 1
210 E. Frontview, Suite A
Dodge City, KS 67801



Phone: 620-225-8888
Fax: 620-225-8885
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

August 07, 2014

Sarah Rodriguez
Chesapeake Operating, Inc.
6100 N WESTERN AVE
PO BOX 18496
OKLAHOMA CITY, OK 73154-0496

Re: Temporary Abandonment
API 15-081-21602-00-00
FLORY 2-1
SE/4 Sec.01-29S-32W
Haskell County, Kansas

Dear Sarah Rodriguez:

"Your temporary abandonment (TA) application for the well listed above has been approved. In accordance with K.A.R. 82-3-111 the TA status of this well will expire 08/07/2015.

- * If you return this well to service or plug it, please notify the District Office.
- * If you sell this well you are required to file a Transfer of Operator form, T-1.
- * If the well will remain temporarily abandoned, you must submit a new TA application, CP-111, before 08/07/2015.

You may contact me at the number above if you have questions.

Very truly yours,

Michael Maier"