



This Form must be Typed
Form must be Signed
All blanks must be Filled

WELL PLUGGING APPLICATION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

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

API No. 15 - _____
If pre 1967, supply original completion date: _____
Spot Description: _____
____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West
____ Feet from North / South Line of Section
____ Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: _____
Lease Name: _____ Well #: _____

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: _____ Gas Storage Permit #: _____

Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Production Casing Size: _____ Set at: _____ Cemented with: _____ Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: _____ (G.L. / K.B.) T.D.: _____ PBTD: _____ Anhydrite Depth: _____
(Stone Corral Formation)

Condition of Well: Good Poor Junk in Hole Casing Leak at: _____
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes No

If ACO-1 not filed, explain why:

Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission

Company Representative authorized to supervise plugging operations: _____
Address: _____ City: _____ State: _____ Zip: _____ + _____
Phone: (_____) _____
Plugging Contractor License #: _____ Name: _____
Address 1: _____ Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Phone: (_____) _____

Proposed Date of Plugging (if known): _____

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Submitted Electronically



CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

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

Well Location:
____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West
County: _____
Lease Name: _____ Well #: _____

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I Submitted Electronically

I



#212046
Regulatory Department

August 1, 2002

Sent overnight UPS

Kansas Corporation Commission
Conservation Division
Finney State Office Bldg.
130 So. Market, Room 2078
Wichita, KS 67202

RE: Hicks 3-13, Finney Co., KS
API #15-055-21782

Dear Sir or Madam:

The following is enclosed for the final filing of the completion paperwork for the above named well.

ACO-1 Original & 3 copies
Cement Reports
Logs

We would like to request that the information remain CONFIDENTIAL for a period of one year.

If any additional information is required, or you have any questions, please call Randy Gasaway or Barbara Bale at (405) 848-8000.

Sincerely,

Barbara J. Bale
Regulatory Analyst

Cc: File, Garden City, RV, FC, BJB,
Jim Gomez., Div. Orders, Tax Dept., Susan K.
Anadarko Petroleum, Pioneer Natural Resources, OXY USA Inc.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32334
Name: Chesapeake Operating, Inc.
Address: P. O. Box 18496
City/State/Zip: Oklahoma City, OK 73154-0496
Purchaser: Oneok
Operator Contact Person: Randy Gasaway
Phone: (405) 848-8000
Contractor: Name: Murfin Drilling
License: 30606
Wellsite Geologist: None

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

07/03/02 07/07/02 07/24/02
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15-055-21782
County: Finney
Approx NW-NW-SE-SE Sec. 13 Twp. 25 S. R. 32 East West

1250 feet from (S) N (circle one) Line of Section
1250 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW

Lease Name: Hicks Well #: 3-13

Field Name: Hugoton

Producing Formation: Winfield, Krider

Elevation: Ground: 2839' Kelly Bushing: 2850'

Total Depth: 2900' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 900 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set NA Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Randy Gasaway *Randy Gasaway*

Title: Asset Manager Date: 08/01/02

Subscribed and sworn to before me this 1st day of August

2002
Notary Public: Connie B Sumner *Connie B Sumner*

Date Commission Expires: Sept 2, 2004

Commission No. 12452

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Chesapeake Operating, Inc. Lease Name: Hicks Well #: 3-13
 Sec. 13 Twp. 25 S. R. 32 East West County: Finney

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: CDL/CNL, DIL, ML	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Krider</td> <td>2557</td> <td></td> </tr> <tr> <td>Winfield</td> <td>2620</td> <td></td> </tr> </table>	Name	Top	Datum	Krider	2557		Winfield	2620	
Name	Top	Datum								
Krider	2557									
Winfield	2620									

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacjs Used	Type and Percent Additives
Surface	12-1/4	8-5/8"	24#	900'	Comm Lite	300 100	3% CC 1/4# Flo-Seal
Production	7-7/8"	4-1/2"	10.5#	2900'	Cl C Lite	150 525	1/4# Flo-Seal

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
1	2574-78'; 2569-71' Upr Krider	SICP 60#, IFL dry, MIRU AES, frac Krider and Winfield down 4 1/2" csg, pump 53 BBLS 7.5% HCL, follow by 43 BBLS x-linked pad, well broke back @ 2300# @ 3 BPM, 1 ppg x-linked 20# Borate @ 25 BPM @ 800#, 2 ppg x-linked 20# Borate @ 25 BPM @ 643#, 3 ppg x-linked 20# Borate @ 25 BPM @ 693#, 4 ppg x-linked 20# Borate @ 25 BPM @ 580#, 41 BBLS 20# linear gel flush @ 25 BPM @ 604#, ISIP 166#, 5 min 0#, 10 min 0#, 15 min 0#, avg TP 700#, RDMO AES, SIW, total fluid pumped 499 BBLS, total proppant 43, 000# 12/20 Ottawa sand.	
1	2598'-602'; 2621-23' Lwr Krider		
1	2637'-2639' Winfield		

TUBING RECORD		Size <u>2-3/8"</u>	Set At <u>2653'</u>	Packer At <u>None</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>07/25/02</u>		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. <u>0</u>	Gas Mcf <u>80</u>	Water Bbls. <u>0</u>	Gas-Oil Ratio <u>NA</u>	Gravity <u>NA</u>

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Winfield, Krider

Production Interval Other (Specify)

ALLIED CEMENTING CO., INC.

09461

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Oakley

DATE <u>7-4-02</u>	SEC. <u>13</u>	TWP. <u>25^s</u>	RANGE <u>32^w</u>	CALLED OUT	ON LOCATION <u>9:00 AM</u>	JOB START	JOB FINISH <u>11:00 AM</u>
LEASE <u>Hicks</u>	WELL # <u>3-13</u>	LOCATION <u>Gardlon City 25-2E</u>	COUNTY <u>Finney</u>	STATE <u>Kan</u>			
OLD OR <u>NEW</u> (Circle one)		<u>43/4 SE to Loc</u>					

CONTRACTOR MurFin Dils Co #22 OWNER Same

TYPE OF JOB Sur Face

HOLE SIZE 12 1/4 T.D. 900'

CASING SIZE 8 5/8 DEPTH 900'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 800# MINIMUM 500#

MEAS. LINE SHOE JOINT 42'

CEMENT LEFT IN CSG. 42'

PERFS.

DISPLACEMENT 54.6 BBL

CEMENT

AMOUNT ORDERED 100 sks com, 3%cc, 1/4#

300 sks Lite, 3%cc, 1/4# Flo-Seal

COMMON	<u>100 sks</u>	@	<u>7.85</u>	<u>785.00</u>
POZMIX		@		
GEL		@		
CHLORIDE	<u>13 sks</u>	@	<u>30.00</u>	<u>390.00</u>
<u>Lite</u>	<u>300 sks</u>	@	<u>7.35</u>	<u>2,205.00</u>
<u>Flo-Seal</u>	<u>100#</u>	@	<u>1.40</u>	<u>140.00</u>
		@		
		@		
		@		
HANDLING	<u>400 sks</u>	@	<u>1.10</u>	<u>440.00</u>
MILEAGE	<u>4¢ per sk/mile</u>			<u>720.00</u>
				TOTAL <u>4,680.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Walt May

191 HELPER Dean

BULK TRUCK

218 DRIVER Lannie

BULK TRUCK

357 DRIVER Jim

REMARKS:

SERVICE

Rig up to casing to Circ (15 min)
mix 300 sks Lite, 3%cc, 1/4#FS,
Tail in w/ 100 sks com, 3%cc, 1/4#FS,
Release Plug + Displace 54.6 BBL
Water,
Landed Plug @ 800 #, shut in
Circ 25' BBL in Pit
EDP

DEPTH OF JOB

PUMP TRUCK CHARGE 630.00

EXTRA FOOTAGE @

MILEAGE 45 miles @ 3.00 135.00

PLUG 8 5/8 Rubber @ 1.00 100.00

@

@

TOTAL 865.00

CHARGE TO: Chesapeake Operating

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

8 5/8

1- Baffle Plate @ 45.00

1- Basket @ 180.00

@

@

@

TOTAL 225.00

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE 5,070.00

DISCOUNT - 1,154.00 IF PAID IN 30 DAYS

4,616.00

David E. Rice

PRINTED NAME

SIGNATURE David E. Rice

ALLIED CEMENTING CO., INC.

09462

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Oakley

DATE <u>7-6-02</u>	SEC. <u>13</u>	TWP. <u>25⁰</u>	RANGE <u>32⁰</u>	CALLED OUT	ON LOCATION <u>9:30 Am</u>	JOB START <u>1:45 Am</u>	JOB FINISH <u>3:00 Am</u>
LEASE <u>Hicks</u>	WELL.# <u>3-13</u>	LOCATION <u>Carleton City 25-2E</u>	COUNTY <u>Finney</u>		STATE <u>Kan</u>		
OLD OR (NEW) (Circle one)		<u>43/4 SE taloc</u>					

CONTRACTOR <u>MurFin Dls Co #22</u>	OWNER <u>Same</u>
TYPE OF JOB <u>Production</u>	
HOLE SIZE <u>7 7/8"</u>	T.D. <u>2904'</u>
CASING SIZE <u>4 1/2"</u>	DEPTH <u>2896'</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX <u>1300#</u>	MINIMUM <u>300#</u>
MEAS. LINE	SHOE JOINT <u>3884</u>
CEMENT LEFT IN CSG.	<u>38,84</u>
PERFS.	
DISPLACEMENT <u>45 1/2 BBL</u>	
EQUIPMENT	

PUMP TRUCK # <u>191</u>	CEMENTER <u>Walt</u>
	HELPER <u>Dean</u>
BULK TRUCK # <u>347</u>	DRIVER <u>Andrew</u>
BULK TRUCK # <u>357</u>	DRIVER <u>Jim</u>

CEMENT AMOUNT ORDERED <u>150 sks "C"</u>		
<u>525 sks Lite, 5# per sk Gilsonite</u>		
<u>1/4# Flo-Seal</u>		
<u>Class "C"</u>		
<u>150 sks @ 9.65</u>		<u>1,447.50</u>
POZMIX @		
GEL @		
CHLORIDE @		
<u>Lite 525 sks @ 7.35</u>		<u>3,858.75</u>
<u>Flo-Seal 131# @ 1.40</u>		<u>183.40</u>
<u>Gilsonite 2625# @ 50¢</u>		<u>1,312.50</u>
HANDLING <u>675 sks @ 1.10</u>		<u>742.50</u>
MILEAGE <u>4¢ per sk/mile</u>		<u>1,215.00</u>
TOTAL		<u>8,759.65</u>

REMARKS:

Put 15 sks in R.H.
Put 10 sks in M.H.
mixed Lead: 500 sks lite, 5# gilsonite
per sk, 1/4# Flo-Seal @ 12¢ per sk
mixed Tail: 150 sks class C
Clear Pump Lines, Release Plug + Displace
45 1/2 BBL water @ 800#, Land
Plug @ 1300# float held
Cement Dil Circ (16 BBL) all done

SERVICE

DEPTH OF JOB		
PUMP TRUCK CHARGE		<u>1,130.00</u>
EXTRA FOOTAGE @		
MILEAGE <u>45 miles @ 3.00</u>		<u>135.00</u>
PLUG @		
TOTAL		<u>1,265.00</u>

CHARGE TO: Chesapeake Operating
STREET _____
CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>4 1/2</u>		
<u>1- Float Shoe (AFS) @</u>		<u>215.00</u>
<u>1- Latch down Plug @</u>		<u>300.00</u>
<u>14 Turbocart @ 40.00</u>		<u>560.00</u>
<u>2 Baskets @ 120.00</u>		<u>240.00</u>
TOTAL		<u>1,315.00</u>

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX		
TOTAL CHARGE <u>11,339.65</u>		
DISCOUNT <u>-2,267.93</u>		
<u>9,071.72</u>	IF PAID IN 30 DAYS	
SIGNATURE <u>David E. Rice</u>	PRINTED NAME <u>David E. Rice</u>	



COMPENSATED DENSITY / NEUTRON LOG

Company Chesapeake Operating Well Hicks #3-13 Field Hugoton County Finney State Kansas	Company	Chesapeake Operating Inc.		
	Well	Hicks #3-13		
	Field	Hugoton		
	County	Finney	State	Kansas
	Location	Sec. 13 Twp. 25S Rge. 32W 1250' FSL & 1250' FEL		Other Services DIL / MEL
				Elevation K.B. 2850 FT. D.F. G.L. 2839 FT.
Permanent Datum	Ground Level	Elevation	2839 FT.	
Log Measured From	Kelly Bushing 11' Above Permanent Datum			
Drilling Measured From	Kelly Bushing			
Date	July 06, 2002			
Run Number	One			
Depth Driller	2900 FT.			
Depth Logger	2902 FT.			
Bottom Logged Interval	2901 FT.			
Top Log Interval	2380			
Casing Driller	8 5/8 @ 900 FT.			
Casing Logger	Not Logged			
Bit Size	7 7/8"			
Type Fluid in Hole	Chem Mud			
Density / Viscosity	9.3 / 39 Sec.			
pH / Fluid Loss	10.0 / N/A			
Source of Sample	Flowline			
Rm @ Meas. Temp	0.52 @ 84°F			
Rmf @ Meas. Temp	0.42 @ 84°F			
Rmc @ Meas. Temp	0.62 @ 84°F			
Source of Rmf / Rmc	Calc.			
Rm @ BHT	0.44 @ 98°F			
Time Circulation Stopped	09:30			
Time Logger on Bottom	15:45			
Maximum Recorded Temperature	98° F			
Equipment Number	702			
Location	LBL			
Recorded By	H. G. Adams V			
Witnessed By	D. Rice			

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THE **Rosel** COMPANY

DUAL
INDUCTION
LOG

Company Chesapeake Operating
Well Hicks #3-13
Field Hugoton
County Finney
State Kansas

Company Chesapeake Operating Inc.
Well Hicks #3-13
Field Hugoton
County Finney State Kansas

Location
Sec. 13 Twp. 25S Rge. 32W
1250' FSL & 1250' FEL

Other Services
CDL / CNL
MEL

Permanent Datum Ground Level Elevation 2839 FT.
Log Measured From Kelly Bushing 11' Above Permanent Datum
Drilling Measured From Kelly Bushing

Elevation
K.B. 2850 FT.
D.F.
G.L. 2839 FT.

Date	July 06, 2002		
Run Number	One		
Depth Driller	2900 FT.		
Depth Logger	2902 FT.		
Bottom Logged Interval	2901 FT.		
Top Log Interval	Surface		
Casing Driller	8 5/8 @ 900 FT.		
Casing Logger	902 FT.		
Bit Size	7 7/8"		
Type Fluid in Hole	Chem Mud		
Density / Viscosity	9.3 / 39 Sec.		
pH / Fluid Loss	10.0 / N/A		
Source of Sample	Flowline		
Rm @ Meas. Temp	0.52 @ 84°F		
Rmf @ Meas. Temp	0.42 @ 84°F		
Rmc @ Meas. Temp	0.62 @ 84°F		
Source of Rmf / Rmc	Calc.		
Rm @ BHT	0.44 @ 98°F		
Time Circulation Stopped	09:30		
Time Logger on Bottom	15:45		
Maximum Recorded Temperature	98° F		
Equipment Number	702		
Location	LBL		
Recorded By	H. G. Adams V		
Witnessed By	D. Rice		

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THE **Rosel** COMPANY

MICRO LOG

Company Chesapeake Operating
Well Hicks #3-13
Field Hugoton
County Finney
State Kansas

Company Chesapeake Operating Inc.

Well Hicks #3-13

Field Hugoton

County Finney State Kansas

Location
Sec. 13 Twp. 25S Rge. 32W
1250' FSL & 1250' FEL

Other Services
CDL / CNL
DIL

Permanent Datum Ground Level Elevation 2839 FT.
Log Measured From Kelly Bushing 11' Above Permanent Datum
Drilling Measured From Kelly Bushing

Elevation
K.B. 2850 FT.
D.F.
G.L. 2839 FT.

Date	July 06, 2002		
Run Number	One		
Depth Driller	2900 FT.		
Depth Logger	2902 FT.		
Bottom Logged Interval	2901 FT.		
Top Log Interval	2380		
Casing Driller	8 5/8 @ 900 FT.		
Casing Logger	Not Logged		
Bit Size	7 7/8"		
Type Fluid in Hole	Chem Mud		
Density / Viscosity	9.3 / 39 Sec.		
pH / Fluid Loss	10.0 / N/A		
Source of Sample	Flowline		
Rm @ Meas. Temp	0.52 @ 84°F		
Rmf @ Meas. Temp	0.42 @ 84°F		
Rmc @ Meas. Temp	0.62 @ 84°F		
Source of Rmf / Rmc	Calc.		
Rm @ BHT	0.44 @ 98°F		
Time Circulation Stopped	09:30		
Time Logger on Bottom	17:23		
Maximum Recorded Temperature	98° F		
Equipment Number	702		
Location	LBL		
Recorded By	H. G. Adams V		
Witnessed By	D. Rice		

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Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

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

Sam Brownback, Governor

November 18, 2014

Katie Wright
Chesapeake Operating, LLC
6100 N WESTERN AVE
PO BOX 18496
OKLAHOMA CITY, OK 73118-1046

Re: Plugging Application
API 15-055-21782-00-00
HICKS 3-13
SE/4 Sec.13-25S-32W
Finney County, Kansas

Dear Katie Wright:

The Conservation Division has received your Well Plugging Application (CP-1).

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 1 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 1's phone number is (620) 225-8888. Failure to notify DISTRICT 1, or failure to file a Well Plugging Record (CP-4) after the well is plugged will result in a penalty recommendation.

Under K.A.R. 82-3-600, you must file an Application for Surface Pit (CDP-1) if you wish to use a workover pit while plugging the well. Failure to timely file a CDP-1, failure to timely remove fluids, or failure to timely file Closure of Surface Pit (CDP-4) or Waste Transfer (CDP-5) forms will result in a penalty recommendation.

This receipt does NOT constitute authorization to plug this well if you do not otherwise have the legal right to do so.

This receipt is VOID after May 18, 2015. If the well is not plugged by then, you will have to submit a new CP-1 if you wish to plug the well.

The May 18, 2015 deadline does NOT override any compliance deadline given to you by Legal, District, or other Commission Staff. Failure to comply with any given deadline will still result in the Commission assessing penalties, or taking other legal action.

Sincerely,
Production Department Supervisor

cc: DISTRICT 1