

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: _____
Operator Contact Person: Randy Gasaway
Phone: (405) 848-8000
Contractor: Name: Big A Drilling
License: 31572
Wellsite Geologist: None
Designate Type of Completion: *Surf hole problem - Skid Rig & Repermitted
_____ 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. _____
02/01/03 02/04/03 NA
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 081-21466
County: Haskell
Approx. E/2 NW Sec. 35 Twp. 29 S. R. 34 ☐ East ☒ West
1380 feet from S / (N) (circle one) Line of Section
2125 feet from E / (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: MLP Clawson Trust Well #: 5-35
Field Name: Eubank South
Producing Formation: NA
Elevation: Ground: 2987 Kelly Bushing: _____
Total Depth: 1934' Plug Back Total Depth: Hole P&A'd
Amount of Surface Pipe Set and Cemented at 1850 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set _____ 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: Barbara J. Bale

Title: Regulatory Analyst Date: 02/23/03

Subscribed and sworn to before me this 23rd day of February

Notary Public: Sara L. Caldwell

Date Commission Expires: 11/29/04

COMM # 00019692



SARA L. CALDWELL
Oklahoma County
Notary Public in and for
State of Oklahoma

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: MLP Clawson Trust Well #: 5-35
 Sec. 35 Twp. 29 S. R. 34 ☐ East ☒ West County: Haskell

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 NA ☐ Yes ☐ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

None

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum
NA

CASING RECORD ☒ New ☐ 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	# Sacs Used	Type and Percent Additives
Surface	12-1/4	8-5/8	24#	1850'	C1. C	625	
					C1. C	150	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
☐ Perforate				
☐ Protect Casing				
☐ Plug Back TD				
☐ 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
	NA		

TUBING RECORD		Size	Set At	Packer At	Liner Run ☐ Yes ☐ No
		NA			
Date of First, Resumed Production, SWD or Enhr.		Producing Method			
NA		☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NA				

Disposition of Gas METHOD OF COMPLETION NA Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
 (If vented, Sumit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify)