

30274

COPY

CONFIDENTIAL

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: Okla. City, OK 73154-0496
Purchaser: Plains Resources, LP
Operator Contact Person: Jim Gowens, Randy Gasaway
Phone: (405) 848-8000
Contractor: Name: Murfin Drilling
License: 30606
Wellsite Geologist: Jon Christenson
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Comp. A
 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. _____
12/01/99 12/09/99 12/28/99
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 067-21457
County: Grant
N/2 SE SE Sec. 14 Twp. 30 S. R. 35 East West
990 feet from (S) N (circle one) Line of Section
660 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 Hutton Well #: 1-14
Field Name: Lighty
Producing Formation: Chester
Elevation: Ground: 2924-2913 Kelly Bushing: 2935-2924
Total Depth: 5650' Plug Back Total Depth: 5548'
Amount of Surface Pipe Set and Cemented at 1764 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2982' Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AA-1, 5-1-00 UIC
(Data must be collected from the Reserve Pit)
Chloride content 1200 ppm Fluid volume 500 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

RECEIVED
STATE CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WICHITA, KANSAS
MAR 17 2000

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: 03/13/00
Subscribed and sworn to before me this 14 day of March,
14 2000
Notary Public: Jan E. Fair
Date Commission Expires: My Commission Expires July 22, 2000

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
Release
DEC 08 2003
From
Confidential

30274

CONFIDENTIAL

Operator Name: Chesapeake Operating, Inc. Lease Name: MLP Hutton
 Sec. 14 Twp. 30 S. R. 35 East West County: Grant

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	3905	-981
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	4013	-1089
		Stark	4456	-1532
		Marmaton	4644	-1720
List All E. Logs Run:		Cherokee Shale	4840	-1916
Halliburton Micro, HRI, LSS, SDL/DSN		Morrow Shale	5208	-2284
		St. Geneiveve	5496	-2572

CASING RECORD <input type="checkbox"/> New <input checked="" 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	# Sacs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	24#	1,764	Lite Cl. C	550 150	3% CC 3% cc
Production	7-7/8"	5-1/2"	15.5#	5,594	Lite Cl. H	75 300	1/4 flo seal 2% cc

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
2	5482'-492'	300 gal. 7.5% NE-FE acid, 808 bbl 20# x-link gel, 39,000# 16/30 Brown Sand, 10,000# 16/30 resin coated sand	

TUBING RECORD		Size <u>2-7/8"</u>	Set At <u>5,530</u>	Packer At <u>NA</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>12/29/99</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 <u>12</u> Bbls.	Gas <u>TSTM</u> Mcf	Water <u>80</u> Bbls.	Gas-Oil Ratio <u>NA</u>	Gravity <u>40</u>

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled 5482-5492'

Production Interval Other (Specify) _____