

COPY

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 32334
Name: Chesapeake Operating, Inc.
Address P. O. Box 18496
Okla. City, OK 73154-0496
City/State/Zip Okla. City, OK 73154-0496

Purchaser: _____
Operator Contact Person: Jim Gowens/Barbara Bale
Phone (405) 848-8000

Contractor: Name: Murfin Drilling
License: 30606

Wellsite Geologist: Jon Christiansen

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:

Operator: Chesapeake Operating, Inc.
Well Name: NLP Leslie 1-26
Comp. Date 1-27-99 Old Total Depth 5585'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

7-7-99 7-20-99
~~Date of~~ Date Reached TD Completion Date

API NO. 15- 081-21230-0001
County Haskell
NW - NE - SE - SE Sec. 26 Twp. 29S Rge. 34 E W

1177 Feet from (S/W) (circle one) Line of Section
350 Feet from (E/W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)

Lease Name NLP LESLIE Well # 1-26
Field Name Eubank South

Producing Formation Chester/Morrow

Elevation: Ground 2970' KB 2981'

Total Depth 5585' PBTD _____

Amount of Surface Pipe Set and Cemented at 1930 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 3025' Feet

If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cnt.

Drilling Fluid Management Plan Re-work, 10-25-99 UR
(Data must be collected from the Reserve Pit)

Chloride content 1300 ppm Fluid volume 786 bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

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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 on 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 Bale *Barbara Bale*

Title Regulatory Analyst Date 10/07/99

Subscribed and sworn to before me this 8th day of October, 19 99.

Notary Public Jan E. Fair

Date Commission Expires My Commission Expires July 22, 2000

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
fund (Specify)

Operator Name Chesapeake Operating, Inc. Lease Name MLP Leslie Well # 1-26
 County Haskell
 Sec. 26 Twp. 29S Rge. 34 East West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)

Log Formation (Top), Depth and Datums Sample
 Name Top Datum
 See Attached

List All E.Logs Run:
 Schlumberger/Platform Express/
 DIL/SP; NL; BHC; CN/LD

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	# Sacks Used	Type and Percent Additives
Surface	12-1/4	8-5/8	23#	1839'	Lite C.L.C	525 150	3% CC 3% CC
Production	7-7/8	5-1/2	15.5#	5576'	Lite C.H	125 150	2% CC 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	5390-92' Chester	500 gal 7-1/2% NEFE Acid, Frac	w/31,200#
2	5384-88' Chester	20/40 Sand + 11,000# 12/20 Sand	764 bbls p
2	5298-5300' Morrow	7-1/2% NEFE, 500 Gal HCL, Frac	w/34,786#
2	5336-40' Morrow	sand + 790 bbl x-link gel	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-7/8"	5424'	NA	

Date of First, Resumed Production, SWD or Inj. 07/20/99 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
		50		150		15	3:1	

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)
 METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled
 Production Interval Other (Specify) _____