

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

RECEIVED
SEP 16 2002
KCC WICHITA
KCC Cap
11-12-08
ORIGINAL

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: NA
License: _____

Wellsite Geologist: _____
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: Chesapeake Operating, Inc.
Well Name: Milburn 2-16

Original Comp. Date: 09/13/94 Original Total Depth: 5750'
 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. E-28,021
07/01/02 07/31/94 07/02/02
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 129-21285-0000
County: Morton
W20 E16
SE SE NE NW Set. 16 Twp. 31 S. R. 40 East West
3960 4620 feet from (S) N (circle one) Line of Section
2970 990 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Milburn Well 2-16
Field Name: Kinsler
Producing Formation: Inj. Morrow C Sand
Elevation: Ground: 3310' Kelly Bushing: _____
Total Depth: 5750' Plug Back Total Depth: 5400'
Amount of Surface Pipe Set and Cemented at 1884 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 cml.

Drilling Fluid Management Plan Workover 09-18-02
(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.: _____

AKA WILBROS South Morrow Unit 1-2.

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
Title: Asset Manager Date: 09/12/02

Subscribed and sworn to before me this 12th day of September
Notary Public: Carrie B. Jurna
Date Commission Expires: September 2, 2004

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: Milburn Well #: 2-16
 Sec. 16 Twp. 31 S. R. 40 East West County: Morton

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input 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	# Sacs Used	Type and Percent Additives
Surface	12-1/4	8-5/8	24#	1884'		800	
Prod	7-7/8	4-1/2	10.5#	5530		150	
DV tool @				2720		700	

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	5400'		1 sk	See attached

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

TUBING RECORD Size <u>2-3/8"</u> Set At <u>1884'</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>Enhr. - 08/09/02</u>	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.) Other (Specify) conv. to inj. well

LOG-TECH OF KANSAS, INC.
 86 SW 10 AVE.
 GREAT BEND, KANSAS 67530
 (620) 792-2167

RECEIVED

SEP 16 2002

INVOICE

3039

KCC WICHITA

Date 7-1-02

CHARGE TO: CHEESAPEAKE OPERATING ORIGINAL
 ADDRESS _____
 R/A SOURCE NO. NA CUSTOMER ORDER NO. NA
 LEASE AND WELL NO. Mil Bend # 2-11a FIELD _____
 NEAREST TOWN Big Bow COUNTY Morton STATE KS
 SPOT LOCATION _____ SEC. 16 TWP. 31S RANGE 40E
 ZERO 13' AGL CASING SIZE 4.5" WEIGHT _____
 CUSTOMER'S T.D. _____ LOG TECH _____ FLUID LEVEL NO FLO
 ENGINEER Rowe OPERATOR Coorsen / Handy

PERFORATING				
Description	No. Stacks	Depth	Perforations	Amount
<u>3 1/8" CASING General Coaxial</u>	<u>40</u>	<u>5140</u>	<u>5160</u>	<u>16250</u>

DEPTH AND OPERATIONS CHARGES				
Description	Quantity	Rate	Perforations	Amount
<u>SET 4 1/2" BRIDGE PLUG w/ STADD.</u>	<u>0</u>	<u>5400</u>	<u>5400</u>	<u>18</u>
<u>GAUGE RING & SUNK BASKET</u>	<u>0</u>	<u>5410</u>	<u>540</u>	<u>-</u>
<u>DUMP BASKET w/ 1 SK CEMENT</u>	<u>0</u>	<u>5400</u>	<u>5400</u>	<u>-</u>

MISCELLANEOUS			
Description	Quantity	Rate	Amount
<u>Service Charge</u>			
<u>(1) 4 1/2" Bolt 5000# C18P</u>	<u>1EA</u>		<u>4500</u>

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

Dennis Deid 7-1-02
 Customer Signature Date

Sub Total	<u>27470</u>
Code Rel.	
Tool Insurance	
Tax	
	<u>23230</u>