

ORIGINAL

11/13/08

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1989  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # #32334  
 Name: Chesapeake Operatind. Inc.  
 Address: P. O. Box 18496  
 City/State/Zip: Oklahoma City, OK 73154-0496  
 Purchaser: \_\_\_\_\_  
 Operator Contact Person: Doug Howeth/Sarah Rodriguez  
 Phone: (405) 879-9375  
 Contractor: Name: \_\_\_\_\_  
 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: Chaffin 1-22  
 Original Comp. Date: \_\_\_\_\_ Original Total Depth: 6,500  
 \_\_\_\_\_ Deepening \_\_\_\_\_ Re-perf. \_\_\_\_\_ Conv. to Enhr./SWD  
 \_\_\_\_\_ Plug Back \_\_\_\_\_ Plug Back Total Depth  
 Commingled Docket No. C0090801  
 \_\_\_\_\_ Dual Completion Docket No. \_\_\_\_\_  
 \_\_\_\_\_ Other (SWD or Enhr.?) Docket No. \_\_\_\_\_  
 6/13/1987 9/2/2008  
 Spud Date or Date Reached TD Completion Date or  
 Recompletion Date Recompletion Date

API No. 15 - 189-21053-0001  
 County: Stevens  
SE NW ne .NW Sec. 22 Twp. 32 S. R. 36  East  West  
4,928 FSL feet from (S) N (circle one) Line of Section  
3,579 FEL feet from (E) W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE (SE) NW SW  
 Lease Name: Chaffin Well #: 1-22  
 Field Name: 168-Hugoton  
 Producing Formation: Chester, Morrow & St. Louis  
 Elevation: Ground: 3,053 Kelly Bushing: 3,069  
 Total Depth: 6,500 Plug Back Total Depth: 6,466  
 Amount of Surface Pipe Set and Cemented at \_\_\_\_\_ 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/ \_\_\_\_\_

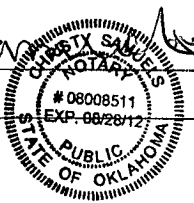
AHT-Dtg - 12/18/08

**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: Doug Howeth/Sarah Rodriguez  
 Title: Production Engineer Date: 11/10/2008  
 Subscribed and sworn to before me this 10th day of November,  
20 08  
 Notary Public: Christy Samuels  
 Date Commission Expires: \_\_\_\_\_



**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 \_\_\_\_\_ Wireline Log Received  
 \_\_\_\_\_ Geologist Report Received  
 \_\_\_\_\_ UIC Distribution  
 Jim H. 11/13

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 WICHITA, KS

Operator Name: Chesapeake Operating, Inc. Lease Name: Chaffin Well #: 1-22  
 Sec. 22 Twp. 32 S. R. 36  East  West County: Stevens

**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  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:

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

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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	# Sacks Used	Type and Percent Additives
Surface		8 5/8	24.0	1,798	K-55	801	
Production		5 1/2	15.5	5,400	K-55	690	

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
4	St. Louis 6,336-6,340	1,000 gallons of 15% MSR-1	
4	Morrow 5,930-5,979	1,000 gallons of 15% MSR-1	
4	Chester 6,048-6,056	500 gallons of 15% MSR-1	

TUBING RECORD		Size 2 7/8"	Set At 6,400	Packer At 6,100	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 9/20/2008		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. 2.0	Gas Mcf 40.0	Water Bbls. 1.0	Gas-Oil Ratio 20	Gravity

Disposition of Gas:  Vented  Sold  Used on Lease (If vented, Submit ACO-18.)  
 METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled Chester, Morrow & St. Louis  
 Production Interval:  Other (Specify)

**HEAT WAVES HOT OIL SERVICE, LLC**

Acidizing, Hot Oiling, Water Hauling, Frac Heating

PO BOX 60460  
COLORADO SPRINGS, CO 80960

Phone: 719-867-9015 Fax: 719-867-9912

**INVOICE**

DATE	INVOICE #
9/3/2008	92486

<b>BILL TO</b>
<b>CHESAPEAKE OPERATING INC</b>
<b>ACCOUNTS PAYABLE</b>
<b>PO BOX 548806</b>
<b>OKLAHOMA CITY, OK 73154</b>

<b>NOTE NEW ADDRESS!!!</b>
<b>SEND ALL PAYMENTS TO:</b>
<b>Heat Waves Hot Oil Service, LLC</b>
<b>P.O. Box 52163</b>
<b>MSC 420</b>
<b>Phoenix, AZ 85072-2163</b>

SVC DT	ITEM	QNTY	DESCRIPTION	RATE	LEASE		AMOUNT
					TRUCK	TICKET	
						LEASE	
		Net 60	STEVE			CHAFFIN 1-22	
9/3/2008	HCL 15%N	1,000	GALLONS	1.43	11-HO	28202	1,430.00
	S 3000	4	GALLONS	21.45	11-HO	28202	85.80
	LST 59K	4	GALLONS	25.14	11-HO	28202	100.56
	AR 630	3	GALLONS	39.84	11-HO	28202	119.52
	SF 44	3	GALLONS	15.98	11-HO	28202	47.94
	FE NO	1	GALLONS	172.64	11-HO	28202	172.64
	MS 1000	10	GALLONS	12.25	11-HO	28202	122.50
	AI 150	2	GALLONS	29.48	11-HO	28202	58.96
	KCL 2% N	50	BBLs	1.80	11-HO	28202	90.00
	PUMP FEE	1	PER USE	157.50	11-HO	28202	157.50
	ACIDIZE	5	HOURS - ACIDIZED WELL	95.00	11-HO	28202	475.00
	FUEL SURC		PERCENTAGE	5.00%	11-HO	28202	71.25
			Sales Tax	6.20%			29.45
			S/P FSC				

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<b>TOTAL</b>	<b>\$2,961.12</b>
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Acid work for  
ST. Louis Zone!

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WICHITA, KS

**HEAT WAVES HOT OIL SERVICE, LLC**

*Acidizing, Hot Oiling, Water Hauling, Frac Heating*

PO BOX 60460  
 COLORADO SPRINGS, CO 80960

Phone: 719-867-9015 Fax: 719-867-9912

**INVOICE**

DATE	INVOICE #
9/8/2008	92597

<b>BILL TO</b>
<b>CHESAPEAKE OPERATING INC</b>
<b>ACCOUNTS PAYABLE</b>
<b>PO BOX 548806</b>
<b>OKLAHOMA CITY, OK 73154</b>

<b>NOTE NEW ADDRESS!!!</b>
<b>SEND ALL PAYMENTS TO:</b>
<b>Heat Waves Hot Oil Service, LLC</b>
<b>P.O. Box 52163</b>
<b>MSC 420</b>
<b>Phoenix, AZ 85072-2163</b>

SVC DT	ITEM	QNTY	DESCRIPTION	RATE	LEASE		AMOUNT
					TRUCK	TICKET	
					Net 60	STEVE	CHAFFIN 1-22
9/8/2008	HCL 15%N	1,500	GALLONS	1.43	09-ACID	28322	2,145.00
	S 3000	10	GALLONS	21.45	09-ACID	28322	214.50
	LST 59K	7	GALLONS	25.14	09-ACID	28322	175.98
	AR 630	5	GALLONS	39.84	09-ACID	28322	199.20
	FE NO	1.5	GALLONS	172.64	09-ACID	28322	258.96
	SF 44	5	GALLONS	15.98	09-ACID	28322	79.90
	MS 1000	15	GALLONS	12.25	09-ACID	28322	183.75
	AI 150	1.5	GALLONS	29.48	09-ACID	28322	44.22
	KCL 2% N	50	BBLs	1.80	09-ACID	28322	90.00
	PUMP FEE	1	PER USE	157.50	09-ACID	28322	157.50
	ACIDIZE	7.5	HOURS - ACIDIZED WELL	95.00	09-ACID	28322	712.50
	<del>FUEL SURC</del>		<del>PERCENTAGE</del>	<del>5.00%</del>	<del>09-ACID</del>	<del>28322</del>	<del>106.88</del>
9/8/2008	KCL 2% N	140	BBLs	1.80	101-WTR	28254	252.00
	130 BBL (75%+)	7	HOURS-HAULED 140 BBLs W/ #101	75.00	101-WTR	28254	525.00
	<del>FUEL SURC</del>		<del>PERCENTAGE</del>	<del>5.00%</del>	<del>101-WTR</del>	<del>28254</del>	<del>78.75</del>
	S/P FSC		Sales Tax	6.20%			44.18

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*Acid work  
 Done on Morrow/Chester.*

<b>TOTAL</b>	<b>\$5,268.32</b>
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 CONSERVATION DIVISION  
 WICHITA, KS

# LOG-TECH OF KANSAS, INC.

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

INVOICE

5447

Date 8-29-2008

CHARGE TO: Chesapeake Operating Inc.  
ADDRESS \_\_\_\_\_  
R/A SOURCE NO. \_\_\_\_\_ CUSTOMER ORDER NO. \_\_\_\_\_  
LEASE AND WELL NO. Chaffin unit #1 Well #3 FIELD \_\_\_\_\_  
NEAREST TOWN Moscow COUNTY Stevens STATE K.S.  
SPOT LOCATION 250' ENL & 1650' ENL SEC. 22 TWP. 32 S RANGE 36 W  
ZERO \_\_\_\_\_ CASING SIZE 5.5 WEIGHT \_\_\_\_\_  
CUSTOMER'S T.D. \_\_\_\_\_ LOG TECH \_\_\_\_\_ FLUID LEVEL \_\_\_\_\_  
ENGINEER L. Gregg OPERATOR C. Chandler

PERFORATING					
Description	No. Shots	From	Depth To	Amount	
<u>Dura HSC 4000-317</u>	<u>16</u>	<u>6336</u>	<u>6340</u>	<u>1140</u>	<u>00</u>

DEPTH AND OPERATIONS CHARGES					
Description	From	Depth To	Total No. Ft.	Price Per Ft.	Amount
<u>Gamma Ray CCL</u>	<u>0</u>	<u>6387</u>	<u>6387</u>	<u>20</u>	<u>1277</u>
<u>Gamma Ray CCL</u>	<u>6387</u>	<u>5200</u>	<u>1187</u>	<u>MTN</u>	<u>760</u>

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MISCELLANEOUS		
Description	Quantity	Amount
<u>Service Charge</u>	<u>1</u>	<u>550</u>

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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.

[Signature] 8/29/08  
Customer Signature Date

Sub Total	<u>3327</u>
Code Ref. Tool Insurance	
Tax	<u>(333.40)</u>
	<u>2994.00</u>