

For KCC Use: 4-21-2010  
 Effective Date: \_\_\_\_\_  
 District # 1  
 SGA?  Yes  No

*AMENDED* \* **CORRECTED**  
 KANSAS CORPORATION COMMISSION  
 OIL & GAS CONSERVATION DIVISION

Form C-1  
 October 2007  
**Form must be Typed**  
**Form must be Signed**  
**All blanks must be Filled**

**NOTICE OF INTENT TO DRILL**

*Must be approved by KCC five (5) days prior to commencing well*

Expected Spud Date: 5 7 2010  
month day year

OPERATOR: License# 32334  
 Name: Chesapeake Operating, Inc.  
 Address 1: P.O. Box 18496  
 Address 2: \_\_\_\_\_  
 City: Oklahoma City State: OK Zip: 73154 + 0496  
 Contact Person: Aletha Dewbre-King / Jim Gowens  
 Phone: (405) 935-4775 / (405) 935-7878

CONTRACTOR: License# Must be licensed by KCC  
 Name: Will advise on ACO-1

<b>Well Drilled For:</b>	<b>Well Class:</b>	<b>Type Equipment:</b>
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input checked="" type="checkbox"/> Infield
<input type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input type="checkbox"/> Pool Ext.
	<input type="checkbox"/> Disposal	<input type="checkbox"/> Wildcat
<input type="checkbox"/> Seismic: # of Holes _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Mud Rotary
		<input type="checkbox"/> Air Rotary
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Cable
<input type="checkbox"/> If OWWO: old well information as follows:		

Operator: \_\_\_\_\_  
 Well Name: \_\_\_\_\_  
 Original Completion Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Directional, Deviated or Horizontal wellbore?  Yes  No  
 If Yes, true vertical depth: \_\_\_\_\_  
 Bottom Hole Location: \_\_\_\_\_  
 KCC DKT #: \_\_\_\_\_

*\* WAS: 2035' FSL; 2349' FEL MAY 07 2010*  
*IS: 2160' FSL; 2424' FEL*

RECEIVED  
 KANSAS CORPORATION COMMISSION

CONSERVATION DIVISION  
 WICHITA, KS

**AFFIDAVIT**

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.  
 It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 DAYS** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 5/5/2010 Signature of Operator or Agent: Aletha M Dewbre-King Title: Reg. Compliance Specialist

**For KCC Use ONLY**  
 API # 15 - 081-21903-00-00  
 Conductor pipe required None feet  
 Minimum surface pipe required 720 feet per ALT.  I  II  
 Approved by: PHW 4-16-2010 / RCH 5-10-2010  
 This authorization expires: 4-16-2011  
(This authorization void if drilling not started within 12 months of approval date.)  
 Spud date: \_\_\_\_\_ Agent: \_\_\_\_\_

Spot Description: \_\_\_\_\_  
 \_\_\_\_\_ W/2 - NW - SE Sec. 3 Twp. 30 S. R. 34  E  W  
 (1000/100) 2,160 feet from  N /  S Line of Section  
2,424 feet from  E /  W Line of Section

Is SECTION:  Regular  Irregular?

*(Note: Locate well on the Section Plat on reverse side)*

County: Haskell  
 Lease Name: MLP Black Well #: 9-3  
 Field Name: Eubank (South Eubank Waterflood Unit)

Is this a Prorated / Spaced Field?  Yes  No  
 Target Formation(s): Chester

Nearest Lease or unit boundary line (in footage): 1029' unit boundary

Ground Surface Elevation: 2,985' feet MSL

Water well within one-quarter mile:  Yes  No

Public water supply well within one mile:  Yes  No

Depth to bottom of fresh water: 540

Depth to bottom of usable water: 700

Surface Pipe by Alternate:  I  II

Length of Surface Pipe Planned to be set: 1,850'

Length of Conductor Pipe (if any): \_\_\_\_\_

Projected Total Depth: 5,700'

Formation at Total Depth: Mississippian

Water Source for Drilling Operations:  Well  Farm Pond  Other: \_\_\_\_\_

DWR Permit #: \_\_\_\_\_  
*(Note: Apply for Permit with DWR)*

Will Cores be taken?  Yes  No

If Yes, proposed zone: \_\_\_\_\_

- Remember to:**
- File Drill Pit Application (form CDP-1) with Intent to Drill;
  - File Completion Form ACO-1 within 120 days of spud date;
  - File acreage attribution plat according to field proration orders;
  - Notify appropriate district office 48 hours prior to workover or re-entry;
  - Submit plugging report (CP-4) after plugging is completed (within 60 days);
  - Obtain written approval before disposing or injecting salt water.
  - If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.
- Well Not Drilled - Permit Expired Date: \_\_\_\_\_  
 Signature of Operator or Agent: \_\_\_\_\_

3  
30  
34  
 E  
 W

**IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW**

**CORRECTED**

*Plat of acreage attributable to a well in a prorated or spaced field*

**If the intended well is in a prorated or spaced field, please fully complete this side of the form.** If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15 - 081-21903-00-00  
 Operator: Chesapeake Operating, Inc.  
 Lease: MLP Black  
 Well Number: 9-3  
 Field: Eubank (South Eubank Waterflood Unit)

Location of Well: County: Haskell  
2,160 feet from  N /  S Line of Section  
2,424 feet from  E /  W Line of Section  
 Sec. 3 Twp. 30 S. R. 34  E  W

Number of Acres attributable to well: N/A  
 QTR/QTR/QTR/QTR of acreage: \_\_\_\_\_ - W/2 - NW - SE

Is Section:  Regular or  Irregular

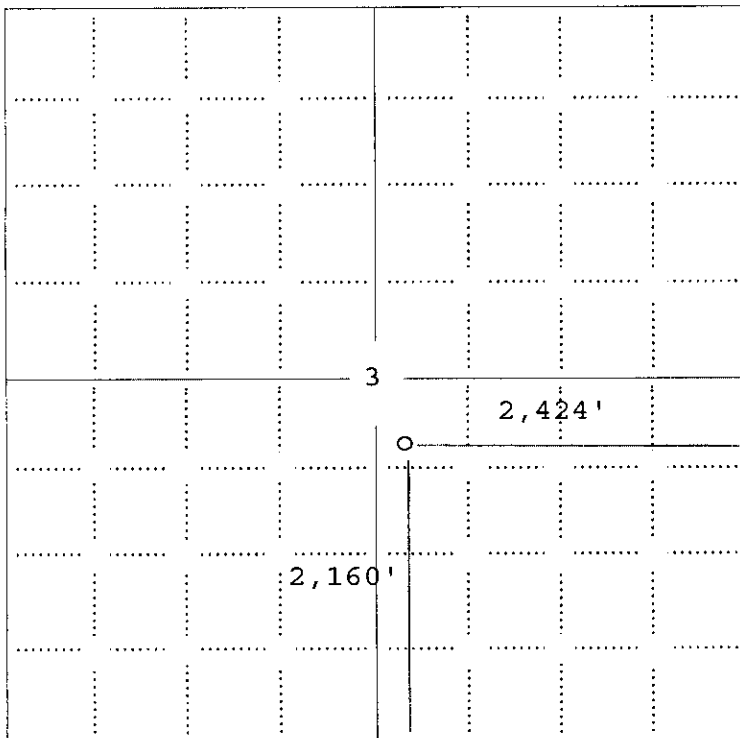
**If Section is Irregular, locate well from nearest corner boundary.**

Section corner used:  NE  NW  SE  SW

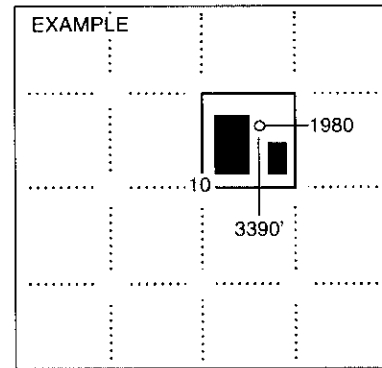
**PLAT**

*(Show location of the well and shade attributable acreage for prorated or spaced wells.)*

*(Show footage to the nearest lease or unit boundary line.)*



RECEIVED  
 KANSAS CORPORATION COMMISSION  
 MAY 07 2010  
 CONSERVATION DIVISION  
 WICHITA, KS



SEWARD CO.

**NOTE: In all cases locate the spot of the proposed drilling location.**

**In plotting the proposed location of the well, you must show:**

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the south / north and east / west outside section lines.
3. The distance to the nearest lease or unit boundary line (in footage).
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).

*Amended*

PLAT AND CERTIFICATION OF ACREAGE ATTRIBUTABLE TO A OIL WELL

Kansas Corporation Commission, Conservation Division  
Finney State Office Building, 130 South Market, Room 2078  
Wichita, Kansas 67202

**CORRECTED**

API NUMBER 15- 081-21903-00-00

LOCATION OF WELL: COUNTY Haskell

OPERATOR Chesapeake Operating, Inc.

2,160 feet from south/north line of section

LEASE MLP Black

2,424 feet from east / west line of section

WELL NUMBER 9-3

FIELD Eubank (South Eubank Waterflood Unit)

SECTION 3 TWP 30 (S) RG 34 E/W

IS SECTION XX REGULAR or IRREGULAR

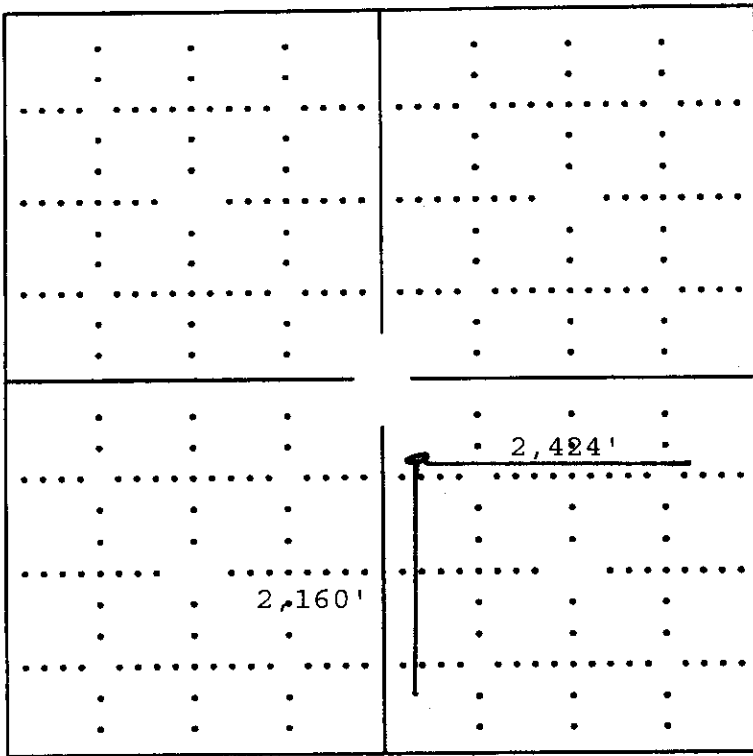
IF SECTION IS IRREGULAR, LOCATE WELL FROM  
NEAREST CORNER BOUNDARY. (check line below)

Section corner used: NE NW SE SW

NUMBER OF ACRES ATTRIBUTABLE TO WELL \_\_\_\_\_

QTR/QTR/QTR OF ACREAGE W/2 - NW - SE

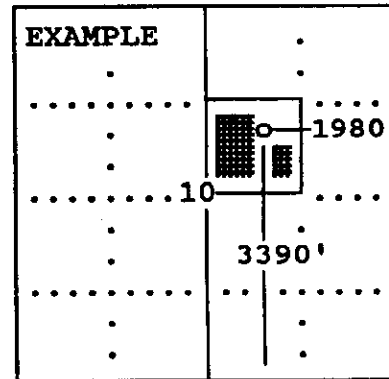
(Show the location of the well and shade attributable acreage for prorated or spaced wells).  
(Show the footage to the nearest lease or unit boundary line; and show footage to the nearest common source supply well).



RECEIVED  
KANSAS CORPORATION COMMISSION

MAY 07 2010

CONSERVATION DIVISION  
WICHITA, KS



SEWARD CO.

The undersigned hereby certifies as Regulatory Compliance Specialist (title) for

Chesapeake Operating, Inc. (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of my knowledge and belief, that all acreage claimed attributable to the well named herein is held by production from that well.

Signature *Altha M. Duvore King*

Subscribed and sworn to before me on this 5th day of May, 19 2010

*Christy Samuels*  
Notary Public

My Commission expires 8/28/12

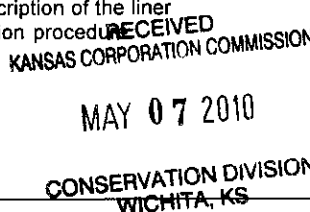
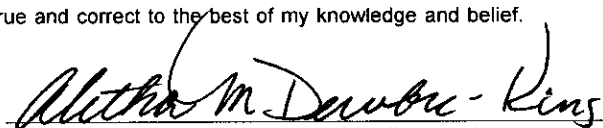


*AMENDED*  
**KANSAS CORPORATION COMMISSION**  
**OIL & GAS CONSERVATION DIVISION**  
**APPLICATION FOR SURFACE PIT**

Form CDP-1  
 April 2004  
 Form must be Typed

CORRECTED

*Submit in Duplicate*

Operator Name: <b>Chesapeake Operating, Inc.</b>		License Number: <b>32334</b>
Operator Address: <b>P.O. Box 18496</b>		<b>Oklahoma City OK 73154</b>
Contact Person: <b>Aletha Dewbre-King / Jim Gowens</b>		Phone Number: <b>(405) 935-4775 / (405) 935-7878</b>
Lease Name & Well No.: <b>MLP Black 9-3</b>		Pit Location (QQQQ): _____ W/2 _____ NW _____ SE _____ Sec. <u>3</u> Twp. <u>30</u> R. <u>34</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2,160</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2,424</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Haskell</b> County
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: <b>5,000</b> (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used? <b>Natural Mud</b>
Pit dimensions (all but working pits): <u>125</u> Length (feet) <u>125</u> Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: <u>5</u> (feet) <input type="checkbox"/> No Pit		
If the pit is lined give a brief description of the liner material, thickness and installation procedure. <div style="text-align: center;">  </div>		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.
Distance to nearest water well within one-mile of pit <u>725</u> feet    Depth of water well <u>420</u> feet		Depth to shallowest fresh water <u>330</u> feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input checked="" type="checkbox"/> KDWR
<b>Emergency, Settling and Burn Pits ONLY:</b> Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Drilling, Workover and Haul-Off Pits ONLY:</b> Type of material utilized in drilling/workover: <u>Native Mud</u> Number of working pits to be utilized: <u>1</u> Abandonment procedure: <u>Air Evaporation &amp; Backfill</u> Drill pits must be closed within 365 days of spud date.
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		
Date: <u>5/5/2010</u>		 Signature of Applicant or Agent

15-081-21903-00-00

<b>KCC OFFICE USE ONLY</b>		Steel Pit <input type="checkbox"/>	RFAC <input type="checkbox"/>	RFAS <input type="checkbox"/>
Date Received: <u>5-7-10</u>	Permit Number: _____	Permit Date: <u>5-7-10</u>	Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	