

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**

Form ACO-1  
October 2008  
Form Must Be Typed

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 32334

Name: Chesapeake Operating, Inc

Address 1: P.O. Box 18496

Address 2: 6100 N. Western Avenue

City: Oklahoma City State: OK Zip: 73154 + 0496

Contact Person: David Wiist/Sarah Rodriguez

Phone: ( 405 ) 935-3906 / 405-935-7987

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion: \_\_\_\_\_

- New Well     Re-Entry     Workover
- Oil     SWD     SIOW
- Gas     ENHR     SIGW
- CM (Coal Bed Methane)     Temp. Abd.
- Dry     Other \_\_\_\_\_
- (Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:

Operator: Chesapeake Operating, Inc

Well Name: MLP Black 9-3

Original Comp. Date: \_\_\_\_\_ Original Total Depth: 5,700

Deepening     Re-perf.     Conv. to Enhr.     Conv. to SWD

Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_

Commingled    Docket No.: \_\_\_\_\_

Dual Completion    Docket No.: \_\_\_\_\_

Other (SWD or Enhr.?)    Docket No.: \_\_\_\_\_

5/18/10    5/24/10

Spud Date or Recompletion Date    Date Reached TD    Completion Date or Recompletion Date

API No. 15 - 081-21903-0000

Spot Description: \_\_\_\_\_

W/2 NW SE Sec. 3 Twp. 30 S. R. 34  East  West

2,160 Feet from  North /  South Line of Section

2,424 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE     NW     SE     SW

County: Haskell

Lease Name: MLP Black Well #: 9-3

Field Name: Eubank (South Eubank Waterflood Unit)

Producing Formation: Dry

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: 2985

Total Depth: 5,700 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 1,836 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 cmt.

**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: \_\_\_\_\_

Title: PRODUCTION ENGINEER Date: 6-16-10

Subscribed and sworn to before me this \_\_\_\_\_ day of JUNE,

20 10.

Notary Public: \_\_\_\_\_

Date Commission Expires: 2012

**KCC Office Use ONLY**

Letter of Confidentiality Received

If Denied, Yes  Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

PA-Dlg-6/22/10

Operator Name: Chesapeake Operating, Inc Lease Name: MLP Black Well #: 9-3  
 Sec. 3 Twp. 30 S. R. 34  East  West County: Haskell

**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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run: <b>Array Compensated Resistivity, Spectral Density                  Dual Spaced Neutron Microlog</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name: <u>Chester</u> Top: <u>5376'</u> Datum: <u>-2391</u>
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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	12-1/4"	8 5/8"	24#	1,836	35:65 Poz mix & Class A	718	

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 checked="" type="checkbox"/> Plug Off Zone	60' - 1860'	60:40 Poz mix	220	4% Gel

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: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. _____		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: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) <u>plugged/dry</u>	PRODUCTION INTERVAL: _____ _____
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# ALLIED CEMENTING CO., LLC. 30758

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

e-to shaun.yates@whk.com  
SERVICE POINT: Liberal K.S.

DATE <u>5-19-10</u>	SEC. <u>3</u>	TWP. <u>30S</u>	RANGE <u>34W</u>	CALLED OUT	ON LOCATION	JOB START <u>10:30AM</u>	JOB FINISH <u>12:00PM</u>
LEASE <u>MLP Black</u>	WELL# <u>9-3</u>	LOCATION <u>Vec Sotanta K.S.</u>			COUNTY <u>Haskell</u>	STATE <u>K.S.</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR H<sub>2</sub> Drilling  
 TYPE OF JOB Surface  
 HOLE SIZE 12 1/4 T.D. 1838  
 CASING SIZE 8 5/8 DEPTH 1840  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT 35.15  
 CEMENT LEFT IN CSG.  
 PERFS.  
 DISPLACEMENT 114.5

OWNER  
 CEMENT  
 AMOUNT ORDERED 662<sup>SK</sup> 65/35 6 1/2 gel  
2% CC 1/4# Flo Seal  
200<sup>SK</sup> Class A 2% CC 1/4# Flo Seal  
 COMMON 200 @ \_\_\_\_\_  
 POZMIX @ \_\_\_\_\_  
 GEL @ \_\_\_\_\_  
 CHLORIDE 1A @ \_\_\_\_\_  
 ASC @ \_\_\_\_\_  
Light weight 662 @ \_\_\_\_\_  
Flo Seal 215.50 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 HANDLING 862 @ \_\_\_\_\_  
 MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

EQUIPMENT

PUMP TRUCK CEMENTER Kenny  
 # 372 HELPER Darren  
 BULK TRUCK  
 # 470-458 DRIVER Cesar  
 BULK TRUCK  
 # 421-251 DRIVER Tony

REMARKS:  
THANK YOU!!!

TOTAL \_\_\_\_\_

CHARGE TO: Chesapeake  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE

DEPTH OF JOB \_\_\_\_\_  
 PUMP TRUCK CHARGE \_\_\_\_\_  
 EXTRA FOOTAGE @ \_\_\_\_\_  
 MILEAGE 20 @ \_\_\_\_\_  
 MANIFOLD @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_

TOTAL \_\_\_\_\_

To Allied Cementing Co., LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT

Texas Guide Shoel @ \_\_\_\_\_  
AFU Insect 1 @ \_\_\_\_\_  
Centralizer's 3 @ \_\_\_\_\_  
Top Rubber Plug 1 @ \_\_\_\_\_  
 @ \_\_\_\_\_

TOTAL \_\_\_\_\_

PRINTED NAME Edward Puffinberger  
 SIGNATURE Edward Puffinberger

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES ~~215.50~~  
 DISCOUNT ~~114.50~~ IF PAID IN 30 DAYS  
~~100.00~~

# ALLIED CEMENTING CO., LLC. 30761

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Liberate KS

DATE <u>5-24-10</u>	SEC. <u>3</u>	TWP. <u>30S</u>	RANGE <u>34W</u>	CALLED OUT	ON LOCATION	JOB START <u>10:00 AM</u>	JOB FINISH <u>10:30 AM</u>
LEASE <u>MCB Black</u>	WELL # <u>9-3</u>	LOCATION <u>Vec Sataunta KS</u>	COUNTY <u>Haskell</u>	STATE <u>KS</u>			
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR <u>H2 Drilling</u>	OWNER
TYPE OF JOB	
HOLE SIZE _____ T.D. _____	CEMENT
CASING SIZE <u>8 5/8</u> DEPTH <u>1838</u>	AMOUNT ORDERED <u>220<sup>SK</sup> 60/40</u>
TUBING SIZE _____ DEPTH _____	<u>4 1/2 gel</u>
DRILL PIPE <u>4 1/2</u> DEPTH <u>1850</u>	
TOOL _____ DEPTH _____	
PRES. MAX _____ MINIMUM _____	COMMON _____ @ _____
MEAS. LINE _____ SHOE JOINT _____	POZMIX _____ @ _____
CEMENT LEFT IN CSG. _____	GEL _____ @ _____
PERFS. _____	CHLORIDE _____ @ _____
DISPLACEMENT _____	ASC _____ @ _____

### EQUIPMENT

PUMP TRUCK	CEMENTER <u>Kenny</u>
# <u>366</u>	HELPER <u>Cesar</u>
BULK TRUCK	
# <u>363-290</u>	DRIVER <u>Ron</u>
BULK TRUCK	
# _____	DRIVER _____

### REMARKS:

THANK YOU!!!

_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
HANDLING <u>220</u>	@ _____
MILEAGE _____	_____
TOTAL _____	_____

### SERVICE

DEPTH OF JOB _____	_____
PUMP TRUCK CHARGE _____	_____
EXTRA FOOTAGE _____	@ _____
MILEAGE <u>20</u>	@ _____
MANIFOLD _____	@ _____
_____	@ _____
_____	@ _____
TOTAL _____	_____

CHARGE TO: Chesapeake  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

AFE # 151580  
PN # 630139

To Allied Cementing Co., LLC.  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Kyle Johnson

SIGNATURE [Signature]

### PLUG & FLOAT EQUIPMENT

_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
TOTAL _____	_____

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES \_\_\_\_\_  
DISCOUNT \_\_\_\_\_

**RECEIVED** IF PAID IN 30 DAYS  
**KANSAS CORPORATION COMMISSION**

JUN 21 2010

CONSERVATION DIVISION  
WICHITA, KS