

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 # 23234
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 Clawson Trust 4-35
Original Comp. Date: 11/29/01 Original Total Depth: 5,580
____ 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.: _____
4045/01 5/6/10 10/26/01 5/6/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date per oper - kcc-dig Recompletion Date

API No. 15 - 081-21422-0001
Spot Description: _____
____ SE SW Sec. 35 Twp. 29 S. R. 34 East West
660 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Haskell
Lease Name: MLP Clawson Trust Well #: 4-35
Field Name: Eubank South
Producing Formation: Chester
Elevation: Ground: 2,987 Kelly Bushing: 2,998
Total Depth: 5,580 Plug Back Total Depth: 5,477
Amount of Surface Pipe Set and Cemented at: 1,812 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 2,978 Feet
If Alternate II completion, cement circulated from: 2,981
feet depth to: 11 w/ 650 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.

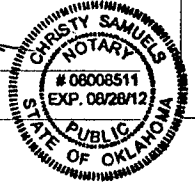
Signature: David Wiist
Digitally signed by David Wiist
DN: cn=David Wiist, email=David.Wiist@kcc.com, o=KCC, ou=KCC, c=US
Date: 2010.06.09 14:02:08 -0500

Title: Production Engineer Date: 6/9/2010

Subscribed and sworn to before me this 9th day of June

Notary Public: Christy Samuels

Date Commission Expires: 8/28/12



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

NO-DIG - 6/16/10

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CONSERVATION DIVISION
WICHITA, KS

Operator Name: Chesapeake Operating, Inc Lease Name: MLP Clawson Trust Well #: 4-35
 Sec. 35 Twp. 29 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>4052</td> <td>1065</td> </tr> <tr> <td>Lansing</td> <td>4147</td> <td>1160</td> </tr> <tr> <td>Stark Shale</td> <td>4501</td> <td>1514</td> </tr> <tr> <td>Pawnee Limestone</td> <td>4870</td> <td>1883</td> </tr> <tr> <td>Cherokee</td> <td>4917</td> <td>1930</td> </tr> <tr> <td>Upper Kearny</td> <td>5248</td> <td>2261</td> </tr> <tr> <td>Ste. Genevieve</td> <td>5424</td> <td>2437</td> </tr> </table>	Name	Top	Datum	Heebner	4052	1065	Lansing	4147	1160	Stark Shale	4501	1514	Pawnee Limestone	4870	1883	Cherokee	4917	1930	Upper Kearny	5248	2261	Ste. Genevieve	5424	2437
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Ste. Genevieve	5424	2437																							

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	# Sacks Used	Type and Percent Additives
Surface	8 5/8"		24#	1,812		750	
Production	4 1/2"		11.6#	5,580		450	

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	5,276-5,308	Class H	300	

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
2	5,376-5,380; 5,394-5,408	1500 gal 15% NEFE, 181.2 MSCF 25Q N2, 584 Bbl. 20# X-link & 73M # 20/40	5376

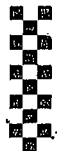
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TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>5,375</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 11/29/01 <u>5/9/10</u>	Producing Method: <input checked="" 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 checked="" 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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LOG-TECH OF KANSAS, INC.

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

INVOICE
6049

Date 5-5-2010

CHARGE TO: Chesapeake Operating, Inc.
 ADDRESS _____
 R/A SOURCE NO. _____ CUSTOMER ORDER NO. _____
 LEASE AND WELL NO. MLP Clansman Field #4-35 FIELD _____
 NEAREST TOWN Satanta COUNTY Haskell STATE K.S.
 SPOT LOCATION 660' ESI & 1980' FVL SEC: 35 TWP. 29c RANGE 34c
 ZERO 11' AGL CASING SIZE 4 1/2 WEIGHT _____
 CUSTOMER'S T.D. _____ LOG TECH _____ FLUID LEVEL 5130
 ENGINEER Lance Weiss OPERATOR C. Coors

PERFORATING			
Description	No. Subs	Total Feet	Amount
<u>OPEN HSC (3775 - 311 NT)</u>	<u>10</u>	<u>5376</u>	<u>5380.74</u>
	<u>56</u>	<u>5394</u>	<u>5408</u>

DEPTH AND OPERATIONS CHARGES					
Description	Depth From	Depth To	Total NOSE	Price PER FEET	Amount

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MISCELLANEOUS		
Description	Quantity	Amount
Service Charge	1	

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.

X [Signature]
 Customer Signature Date

Sub Total _____
 Code Ref. _____ Tool Insurance _____
 Tax _____



PAGE 1 of 1	CUST NO 1000701	INVOICE DATE 05/07/2010
INVOICE NUMBER 1717 - 90310428		

Liberal (620) 624-2277
 B CHESAPEAKE OPERATING INC
 I PO Box: 18496
 L OKLAHOMA CITY
 L OK US 73154
 T
 O ATTN:

J LEASE NAME Clawson Trust #4-35
 O LOCATION
 B COUNTY Haskell
 S STATE KS
 I JOB DESCRIPTION Acid-Form Stim-Producing
 T JOB CONTACT
 E

EDI INVOICE

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40180282	27462		Net - 30 days	06/06/2010

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 05/05/2010 to 05/05/2010</i>				
0040180282				
AFE # OR PROPERTY NUMBER = 402308; 171700791A Acid-Form Stim-Producing 05/05/2010 Acid Rock Salt				
7 1/2% HCL Acid	1,000.00	GAL		
FE Acid Conversion	1,000.00	GAL		
KNE-1	2.00	EA		
CIA-1 EP	1.00	EA		
KCL, Potassium Chloride	200.00	EA		
Blo-3, Powdered Biocida	1.00	EA		
ProGel 250	3.00	EA		
Stimtrol-2	110.00	EA		
DA-2, Diverting Agent	250.00	EA		
Heavy Equipment Mileage	80.00	MI		
Car, Pickup or Van Mileage	20.00	MI		
Mini Blender	1.00	EA		
Transport Delivery Charge	1.00	EA		
Service Supervisor Charge	1.00	HR		

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 WICHITA, KS

PLEASE REMIT TO: BASIC ENERGY SERVICES, LP PO BOX 841903 DALLAS, TX 75284-1903	SEND OTHER CORRESPONDENCE TO: BASIC ENERGY SERVICES, LP PO BOX 10460 MIDLAND, TX 79702	SUB TOTAL TAX INVOICE TOTAL
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BASIC

energy services, L.P.

TREATMENT REPORT

Customer	Chesapeake Operating	Lease No.		Date	5-5-10		
Lease	Lawson Trust	Well #	04-35				
Field Order #	00791	Station	Liberal, KS-1717	Casing	5 1/2	Depth	
Type Job	237- Acidized Rock Salt		Formation	County	Haskell	State	KS
				Legal Description	35-29-34		

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size	5 1/2	Tubing Size	2 3/8	Shots/Ft		Acid	1000 gal 7 1/2% NEFF Acid
Depth	5363	From	5376	To	5380	Pre Pad	400 gal. 60% 3.5 50
Volume	3 1/4	From	5394	To	5408	Pad	500# Rock Salt 2.5 0
Max Press		From		To		Frac	Avg 2.5 50
Well Connection		Annulus Vol.		From	To	HHP Used	
Plug Depth		Backer Depth		From	To	Flush	1100 gal. 2% KCL
						Req Volume	
							Total Load 63 bbls

Customer Representative		Station Manager	J. Bennett	Treater	A. Olvera
Service Units	19816	27462	19812	12299	14280
Driver Names	A. Olvera	R. Cox	J. Martinez		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
9:45					on loc. - site assesment (running in tubin)
9:46					spot trucks - rig up
12:45					safety meeting
12:29					pressure test lines 2000#
12:30		50	5	2.5	start w/ 5 bbls 2% KCL
12:32			1.2	2.5	switch to 55 gal. zylene
12:34			1.9	2.5	* switch to 500 gal. 7 1/2% NEFF Acid
12:39			10	2.5	switch to 420 gal. 250# gelled rock salt
12:43			1.2	2.5	switch to 55 gal. zylene
12:45	0		11.9	3.5	* switch to 500 gal. 7 1/2% NEFF Acid
12:50	0		21	3.5	switch to 5% KCL flush
					* also ran 60 gal. of Champion chemicals @ 30 gal stages after zylene stages
12:56	0				stop pumping - DSTP (vacuum) job complete

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ALLIED CEMENTING CO., LLC. 042723

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

SERVICE POINT:
Medicine Lodge KS

DATE <u>4-26-2010</u>	SEC. <u>35</u>	TWP. <u>29S</u>	RANGE <u>34W</u>	CALLED OUT <u>5:00 AM</u>	ON LOCATION <u>9:00 AM</u>	JOB START <u>12:30 PM</u>	JOB FINISH <u>1:30 PM</u>
M/LP <u>Clawson</u>	WELL # <u>4-35</u>		LOCATION <u>SE 1/4 Sec 34, Twp 29S, R 34W</u>		COUNTY <u>Haskell</u>	STATE <u>KS</u>	
LEASE TRUST	OR NEW (Circle one)		<u>Min TO</u>				

CONTRACTOR Superior W/S

TYPE OF JOB Squeezec

HOLE SIZE _____ T.D. _____

CASING SIZE 4 1/2 DEPTH 2804

TUBING SIZE 2 3/8 DEPTH 2703

DRILL PIPE _____ DEPTH _____

TOOL Packer DEPTH 2703

PRES. MAX 1500 PSI MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT Fresh Water 10 1/2 BBLs

EQUIPMENT

PUMP TRUCK CEMENTER David West

360-265 HELPER David F

BULK TRUCK

364 DRIVER MATT T.

BULK TRUCK

_____ DRIVER _____

OWNER Chesa Peake

CEMENT

AMOUNT ORDERED 280 sk Class A + 4 sk CC

COMMON 280 sk @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE 4 sk @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING 284 sk @ _____

MILEAGE _____

REMARKS:

RPST Plug To 1000 spot 2sk sand poll
35 joints, load back side with 5 BBLs water
take INS Rate at 2 1/2 BBLs Min at 200 PSI Mix
150 sk A + 2900 + 130 sk A neat Displace with
10 1/2 BBLs shot in for 20 min PST to 1500
held reverse out with 45 BBLs set
Packer PSI 1500 held poll 4 stands, PST Tubing
500 PSI shot in

CHARGE TO: Chesa Peake

STREET _____

CITY _____ STATE _____ ZIP _____

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 Steve Emick

SIGNATURE [Signature]

Thank you's

TOTAL _____

SERVICE

DEPTH OF JOB 2703

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE 30 @ _____

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT cc IF PAID IN 30 DAYS

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