

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CP-1
March 2010
This Form must be Typed
Form must be Signed
All blanks must be Filled

WELL PLUGGING APPLICATION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

OPERATOR: License #: 32334
Name: Chesapeake Operating Inc.
Address 1: P.O. Box 18493
Address 2: _____
City: Oklahoma City State: OK Zip: 73154 + 0496
Contact Person: David Wiist
Phone: (405) 935-3906

API No. 15 - 075-20124 *0000* *Kax*
If pre 1967, supply original completion date: _____
Spot Description: _____
C NW SE Sec. 35 Twp. 23 S. R. 40 East West
1,980 Feet from North / South Line of Section
1,980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Hamilton
Lease Name: Cook Well #: 2-35

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: _____ Gas Storage Permit #: _____
Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: 8 5/8" Set at: 445' Cemented with: 300 Sacks
Production Casing Size: 4 1/2" Set at: 2,499' Cemented with: 500 Sacks

List (ALL) Perforations and Bridge Plug Sets:
U Winfield 2,430-2,440

Elevation: 3,286 (G.L. / K.B.) T.D.: _____ PBDT: 2,500 Anhydrite Depth: 1850'-1932'
(Stone Corral Formation)

Condition of Well: Good Poor Junk in Hole Casing Leak at: _____
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

See attached procedure

Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes No

If ACO-1 not filed, explain why:

Drilled in 1975 by Computer Petroleum, TA status denied

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Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission

Company Representative authorized to supervise plugging operations: Bud Neff, Production Superintendent
Address: 4532 W. Jones Avenue City: Garden City State: KS Zip: 67846 + _____
Phone: (620) 277-0803 ext. 11
Plugging Contractor License #: 99996 Name: Allied Cementing Co., Inc.
Address 1: P.O. Box 31 Address 2: _____
City: Russel State: KS Zip: 67665 + _____
Phone: (785) 483-2627

Proposed Date of Plugging (if known): _____

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 12/20/10 Authorized Operator / Agent: _____
(Signature)

Digitally signed by David Wiist
DN: dc=net, dc=chkenergy, ou=Users and Groups, cn=David Wiist,
email=david.wiist@chk.com
Date: 2010.12.20 09:27:34 -06'00'

Cook 2-35
P&A
12-3-10

Procedure

1. Notify KCC District 1 at least 5 days before plugging operations
KCC District 1: (620)225-8888
2. MIRU WOR, POOH w/rods & pump, laying down in singles. ND WH, NU BOP, TOOH w/tubing.
3. PU 4 ½" CIBP, TIH with plug and set at ±2380'. Dump 2 sx cement w/2% CaCl₂ on top of CIBP (Plug 1). TOOH w/tubing while circulating plugging mud.
4. RU to pull 4 ½" casing and weld on pull nipple. PU on casing, MIRU WLU and RIH w/tools and locate freepoint. RIH w/cutting tools and cut casing above freepoint (estimated ~300'). POOH with WL tools and TOOH with 4 ½" casing laying down.
5. TIH with tubing, pump the following plugs in casing/open hole displacing with plugging mud:

Plug 2: Fresh water plug (1000'-750')	20 sx. w/ 2% CaCl ₂
Plug 3: Shoe & Stub plug (350'-250')	40 sx w/ 2% CaCl ₂
Plug 4: Surface plug (34'-4')	10 sx. w/ 2% CaCl ₂
6. Cut off casing 4ft. below ground level, weld on steel ID plate. RDMO WOR.

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Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 32334
Name: Chesapeake Operating Inc.
Address 1: P.O. Box 18493
Address 2: _____
City: Oklahoma City State: OK Zip: 73154 + 0496
Contact Person: David Wiist
Phone: (405) 935-3906 Fax: (405) 849-3906
Email Address: david.wiist@chk.com

Well Location:
C NW SE Sec. 35 Twp. 23 S. R. 40 East West
County: Hamilton
Lease Name: Cook Well #: 2-35

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: See Attached Sheet
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

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

Date: 12/20/10 Signature of Operator or Agent: David Wiist Title: Production Engineer

Digitally signed by David Wiist
DN: dc=net, dc=chkenergy, ou=Users
and Groups, cn=David Wiist,
email=david.wiist@chk.com
Date: 2010.12.20 12:36:16 -0600

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Page 2 to KSONA-1 to be filed with CP-1 for Cook 2-35 Well

SURFACE OWNERS OF NE/4 OF SECTION 35-23S-40W, HAMILTON CO., KS

7 C's, L.L.C.
P.O. Box 252
Syracuse, KS 67878

SURFACE OWNERS OF NW/4 OF SECTION 35-23S-40W, HAMILTON CO., KS

7 C's, L.L.C.
P.O. Box 252
Syracuse, KS 67878

SURFACE OWNERS OF SE/4 OF SECTION 35-23S-40W, HAMILTON CO., KS

7 C's, L.L.C.
P.O. Box 252
Syracuse, KS 67878

SURFACE OWNERS OF SW/4 OF SECTION 35-23S-40W, HAMILTON CO., KS

7 C's, L.L.C.
P.O. Box 252
Syracuse, KS 67878

Tracy A. Cook & Kim L. Cook,
1407 Pinion Road
Derby, KS 67039

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Regulatory Department

December 20, 2010

VIA UNITED PARCEL SERVICE

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

Re: Cook 2-35
35-23S-40W, Hamilton Co., KS
API #15-075-20124

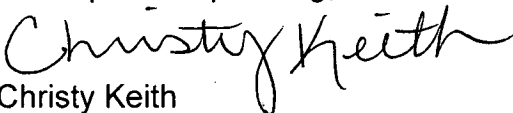
Dear Sir or Madam:

Enclosed are CP-1 and KSONA-1 forms for the referenced well. The CP-1 has been mailed to all surface owners.

If additional information is required, please contact me at the telephone number or e-mail address below.

Sincerely,

Chesapeake Operating, Inc.


Christy Keith

Enclosures

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Mark Parkinson, Governor Thomas E. Wright, Chairman, Joseph F. Harkins, Commissioner, Ward Loyd, Commissioner

NOTICE OF RECEIPT OF WELL PLUGGING APPLICATION (CP-1)

CHESAPEAKE OPERATING, INC.
6200 N WESTERN AVE
PO BOX 18496
OKLAHOMA CITY, OK 73118-1046

January 05, 2011

Re: COOK #2-35
API 15-075-20124-00-00
35-23S-40W, 1980 FSL 1980 FEL
HAMILTON COUNTY, KANSAS

Dear Operator:

This letter is to notify you that the Conservation Division has received your plugging proposal, form CP-1, for the above well and has reviewed the proposal for completeness. The central office will now forward your CP-1 to the district office listed below for review of the proposed plugging method. **Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113(b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit in accordance with K.A.R. 82-3-600.**

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well. This notice in no way constitutes authorization to plug the above well by persons not having legal rights of ownership or interest in the well.

This notice is void after July 4, 2011. The CP-1 filing does not bring the above well into compliance with K.A.R. 82-3-111 with regard to the Commission's temporary abandonment requirements.

Sincerely

Steve Bond
Production Department Supervisor

District: #1
210 E Frontview, Suite A
Dodge City, KS 67801
(620) 225-8888