

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**

Form ACO-1  
June 2009  
**Form Must Be Typed**  
**Form must be Signed**  
**All blanks must be Filled**

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

OPERATOR: License # 32334  
Name: Chesapeake  
Address 1: P.O. Box 18496  
Address 2: \_\_\_\_\_  
City: Oklahoma City State: OK Zip: 73154 + 0496  
Contact Person: David Wiist/ Christy Keith  
Phone: ( 405 ) 935-3906 / 405-935-7539  
CONTRACTOR: License # \_\_\_\_\_  
Name: \_\_\_\_\_  
Wellsite Geologist: \_\_\_\_\_  
Purchaser: \_\_\_\_\_

Designate Type of Completion:  
 New Well     Re-Entry     Workover  
 Oil     WSW     SWD     SIOW  
 Gas     D&A     ENHR     SIGW  
 OG     GSW     Temp. Abd.  
 CM (Coal Bed Methane)  
 Cathodic     Other (Core, Expl., etc.): \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:  
Operator: Chesapeake Operating, Inc  
Well Name: Boisseau 1

Original Comp. Date: 9/13/1976 Original Total Depth: 5,132'  
 Deepening     Re-perf.     Conv. to ENHR     Conv. to SWD  
 Conv. to GSW  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled    Permit #: \_\_\_\_\_  
 Dual Completion    Permit #: \_\_\_\_\_  
 SWD    Permit #: \_\_\_\_\_  
 ENHR    Permit #: \_\_\_\_\_  
 GSW    Permit #: \_\_\_\_\_

<u>6/15/2010</u>	<u>6/18/2010</u>
Spud Date or Recompletion Date	Completion Date or Recompletion Date

API No. 15 - 033-20204 - 00-01  
Spot Description: \_\_\_\_\_  
N2\_NE\_NE Sec. 26 Twp. 31 S. R. 18  East  West  
510 Feet from  North /  South Line of Section  
660 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Comanche  
Lease Name: Boisseau Well #: 1  
Field Name: Wilmore  
Producing Formation: Mississippian/Marmaton  
Elevation: Ground: 2,130' Kelly Bushing: 2,138'  
Total Depth: 5,132' Plug Back Total Depth: 5,123'  
Amount of Surface Pipe Set and Cemented at: 497 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 #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

**AFFIDAVIT**  
I am the affiant and I hereby certify that 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.  
**David Wiist**  
Signature: \_\_\_\_\_  
Title: Production Engineer Date: 02/07/2011

Digitally signed by David Wiist  
DN: cn=David Wiist, email=David.Wiist@chkl.com  
Date: 2011.02.07 14:32:54 -0600

**KCC Office Use ONLY RECEIVED**  
Letter of Confidentiality Received  
Date: FEB 08 2011  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: Dg Date: 2/11/11  
**KCC WICHITA**

Operator Name: Chesapeake Lease Name: Boisseau Well #: 1  
 Sec. 26 Twp. 31 S. R. 18  East  West County: Comanche

**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 complete copy of all Electric Wire-line 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run: <b>No digital copies of logs available</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>Winfield</td> <td>2588</td> <td>-458</td> </tr> <tr> <td>Lansing</td> <td>4462</td> <td>-2332</td> </tr> <tr> <td>Kansas City</td> <td>4894</td> <td>-2764</td> </tr> <tr> <td>Marmaton</td> <td>4946</td> <td>-2816</td> </tr> <tr> <td>Mississippi</td> <td>5094</td> <td>-2964</td> </tr> </tbody> </table>	Name	Top	Datum	Winfield	2588	-458	Lansing	4462	-2332	Kansas City	4894	-2764	Marmaton	4946	-2816	Mississippi	5094	-2964
Name	Top	Datum																	
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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	12-1/4"	8 5/8"	24#	497'		500	
Production		4 1/2"	10.5#	5,131'		125	

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	4,956 - 4,958 (Marmaton)	500 gal 15% NE/FE Acid, 20 bbls treated 2% KCl water	4,958
	5,050 - 5,051 CIBP		

TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>5,105</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>RECEIVED</b>
Date of First, Resumed Production, SWD or ENHR. <u>10/28/2010</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____		<b>FEB 08 2011</b>
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.
		30	1

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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>Marmaton 4,956'-4,958'</u>
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24 S. Lincoln Street  
P.O. Box 31  
Russell, KS 67665-2906  
Voice: (785) 483-3887  
Fax: (785) 483-5566

# INVOICE

Invoice Number: 123188  
Invoice Date: Jun 16, 2010  
Page: 1

Bill To:
Chesapeake Operating, Inc P. O. Box 548806 Oklahoma City, OK 73154-8806

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Ches	Boisseau #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-00	Acid Medicine Lodge	Jun 16, 2010	7/16/10

Quantity	Item	Description	Unit Price	Amount
500.00	MAT	15% NE/FE Acid		
3.00	MAT	Liquid KCL Substitute		
2.00	MAT	Inhibitor		
1.00	SER	Pump Truck Charge		
40.00	SER	Mileage		
1.00	JOB DISC	Job Discount if paid by July 16, 2010		

**RECEIVED**

JUN 25 2010

ALL PRICES ARE NET, PAYABLE  
30 DAYS FOLLOWING DATE OF  
INVOICE. 1 1/2% CHARGED  
THEREAFTER. IF ACCOUNT IS  
CURRENT, TAKE DISCOUNT OF

\$

ONLY IF PAID ON OR BEFORE  
Jul 16, 2010

Subtotal	
Sales Tax	IMAGING
Total Invoice Amount	
Payment/Credit Applied	
<b>TOTAL</b>	

**RECEIVED**  
**FEB 08 2011**  
**KCC WICHITA**





PO BOX 202567  
 Dallas, TX 75320-2567  
 (303) 655-0299

DBA:  
 Penkota Wireline  
 Rocky Mountain Phoenix Surveys  
 Competition Wireline Services  
 Log Tech

# Invoice

Page: 1

INVOICE NUMBER: 1-30603  
 INVOICE DATE: 6/15/2010  
 CUSTOMER: CHEOPE

## Sold To

Chesapeake Operating, Inc.  
 PO Box 548806  
 Oklahoma City, OK 73154-8806 USA

LEASE	Boisseau
WELL #	1
COUNTY	Comanche
CUSTOMER PO	
DUE DATE	8/14/2010
ENGINEER	Bradford, Daniel E

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENSION
1.000	PERFORATE		
1.000	Standard Bridge Plug..		
1.000	PACKOFF SERVICE		
1.000	Truck Rental		
-1.000	Discount		
----- LAST ITEM -----			
<p>RECEIVED            JUN 28 2010            IMAGING</p>			

THANK YOU FOR YOUR BUSINESS

0.00

F  
 BX  
 6-24-10

Subtotal  
 Freight  
 Sales Tax

Payment/Credit Amount

Balance:

TERMS: Invoice payable Net 60 days from date on invoice at PO BOX 202567,  
 Dallas, TX 75320-2567. Past due invoices subject to finance charges at maximum rate  
 allowed by state law from due date.

RECEIVED

FEB 08 2011

KCC WICHITA