

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

APR 10 2003
4-10-03

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 32334
 Name: Chesapeake Operating, Inc.
 Address: P. O. Box 18496
 City/State/Zip: Okla. City, OK 73154-0496
 Purchaser: Oneok
 Operator Contact Person: Randy Gasaway
 Phone: (405) 848-8000
 Contractor: Name: Val Drilling Inc.
 License: 5822
 Wellsite Geologist: Wes Hansen
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: _____
 Well Name: _____
 Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____
12/27/02 01/07/03 02/06/03
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 033-21343-0000 **ORIGINAL**
 County: Comanche
 NW NE Sec. 27 Twp. 32 S. R19 East West
360 feet from N (circle one) Line of Section
2210 feet from E (circle one) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Pierce Well #: 6-27
 Field Name: Bird East
 Producing Formation: Mississippi
 Elevation: Ground: 1964' Kelly Bushing: 1975'
 Total Depth: 5988' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 715' Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set NA Feet
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Alt 1 4.16.03
 (Data must be collected from the Reserve Pit)
 Chloride content 3000 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: Randy Gasaway
 Title: Asset Manager Date: 04/09/03
 Subscribed and sworn to before me this 9th day of April, 2003
 Notary Public: Sara L. Caldwell
 Date Commission Expires: 11/29/04

SARA L. CALDWELL
 Oklahoma County
 Notary Public in and for
 State of Oklahoma
 My commission expires Nov. 29, 2004.

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: Chesapeake Operating, Inc. Lease Name: Pierce Well #: 6-27
 Sec. 27 Twp. 32S S. R. 19 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 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 (Attach Additional Sheets) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 (Submit Copy) List All E. Logs Run: DIL, Neutron/Density, Micro, Sonic	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Heebner</td> <td>4225</td> <td>-2250</td> </tr> <tr> <td>Lansing</td> <td>4427</td> <td>-2452</td> </tr> <tr> <td>Marmaton</td> <td>4894</td> <td>-2919</td> </tr> <tr> <td>Cherokee Shale</td> <td>5035</td> <td>-3060</td> </tr> <tr> <td>Mississippian</td> <td>5125</td> <td>-3150</td> </tr> <tr> <td>Viola</td> <td>5815</td> <td>-3840</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Heebner	4225	-2250	Lansing	4427	-2452	Marmaton	4894	-2919	Cherokee Shale	5035	-3060	Mississippian	5125	-3150	Viola	5815	-3840
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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	# Sacjs Used	Type and Percent Additives
Surf	12-1/4	8-5/8	24#	715'	C1. C C1 C	200 150	3% cc 1/4# FloSea
Production	7-7/8	5-1/2	15.5#	5987'	C1. H	375	1/4# Flo Sea

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
2	5818-5878' Viola	2500 gal 20% HCL	
	Retreivable CIBP @5775' & dump bailed 1 sk cement on 01/23/03		
1	5120' - 5222' Mississippian	5500 gal 20% HCL	

TUBING RECORD		Size <u>2-7/8</u>	Set At <u>5070'</u>	Packer At <u>NA</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>02/06/03</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. <u>0</u>	Gas Mcf <u>275</u>	Water Bbls. <u>24</u>	Gas-Oil Ratio <u>NA</u>	Gravity <u>NA</u>

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

ALLIED CEMENTING CO., INC.

Federal Tax I.D.# 48-0727860

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

SERVICE POINT: Med Lodge

DATE <u>1-7-03</u>	SEC. <u>27</u>	TWP. <u>32S</u>	RANGE <u>19W</u>	CALLED OUT	ON LOCATION <u>1:00AM</u>	JOB START <u>9:30AM</u>	JOB FINISH <u>10:50AM</u>
LEASE <u>Pierce</u>	WELL # <u>6-27</u>	LOCATION <u>Coldwater earwash</u>	COUNTY <u>Comanche</u>		STATE <u>Ks</u>		
OLD OR <u>NEW</u> (Circle one)		<u>12W 2S 1W 3/8</u>					

CONTRACTOR <u>Val #2</u>	OWNER <u>Chesapeake Oper Co.</u>
TYPE OF JOB <u>Production</u>	CEMENT
HOLE SIZE <u>7 7/8</u>	T.D. <u>5988</u>
CASING SIZE <u>5 1/2 x 12 #</u>	DEPTH <u>5987</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL <u>Bit Saver Collar</u>	DEPTH <u>5942</u>
PRES. MAX <u>2000</u>	MINIMUM
MEAS. LINE	SHOE JOINT <u>45</u>
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT <u>139 BBLs 4% KCL</u>	

COMMON <u># 375</u>	@ <u>8.20</u>	<u>3075.00</u>
<u>Clapro 29 gal</u>	@ <u>22.90</u>	<u>664.10</u>
<u>GEZ salt #1</u>	@ <u>7.50</u>	<u>307.50</u>
CHLORIDE	@	
<u>Gyp-seal 35</u>	@ <u>17.85</u>	<u>624.75</u>
<u>Koll-seal 2250 #</u>	@ <u>.50</u>	<u>1125.00</u>
<u>Flo-seal 94 #</u>	@ <u>1.40</u>	<u>131.60</u>
<u>Fl-160 282 #</u>	@ <u>8.00</u>	<u>2256.00</u>
<u>Mud Clean 840 gal</u>	@ <u>.75</u>	<u>630.00</u>
HANDLING <u>496</u>	@ <u>1.10</u>	<u>545.60</u>
MILEAGE <u>496 x 35</u>	@ <u>.04</u>	<u>198.40</u>

PUMP TRUCK # <u>343</u>	CEMENTER <u>Justin Hart</u>
BULK TRUCK # <u>356</u>	HELPER <u>Mark Brungardt</u>
BULK TRUCK #	DRIVER <u>Eric Brewer</u>
BULK TRUCK #	DRIVER

TOTAL 10053.95

REMARKS:

Pipe on BTM Break Circ
20 BBLs Mud clean 5 BBL Fresh #3
Plug Rat + Mouse 255x H + Additives
350 5x H + Additives @ 14.8# = 96 BBLs
Release Plug Disp 139 BBLs of
4% KCL
Land Plug 1300# - 2000#
Release Press float held

SERVICE

DEPTH OF JOB <u>5988</u>	
PUMP TRUCK CHARGE	<u>1628.00</u>
EXTRA FOOTAGE @	
MILEAGE <u>35</u>	@ <u>3.00</u> <u>105.00</u>
PLUG <u>5 1/2 TRA</u>	@ <u>100.00</u> <u>60.00</u>
	@
	@

TOTAL 1593.00

CHARGE TO: Chesapeake Oper Co.
 STREET _____
 CITY _____ STATE _____ ZIP _____

RECEIVED
 KANSAS CORPORATION COMMISSION
4-10-03
 APR 10 2003
 @ _____
 @ _____
 CONSERVATION DIVISION
 WICHITA, KS
 @ _____
 @ _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Larry Benedick

TOTAL _____
 TAX - 0 -
 TOTAL CHARGE 11646.95
 DISCOUNT 2329.39 IF PAID IN 30 DAYS
9317.56
 PRINTED NAME _____

ALLIED CEMENTING CO., INC. 10169

Federal Tax I.D.# 48-0727860

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

SERVICE POINT:
med. lodge

DATE <u>12-28-02</u>	SEC. <u>27</u>	TWP. <u>32</u>	RANGE <u>19</u>	CALLED OUT <u>9:00 P.M.</u>	ON LOCATION <u>1:00 A.M.</u>	JOB START <u>5:30 A.M.</u>	JOB FINISH <u>6:30 A.M.</u>
LEASE <u>Pierce</u>	WELL # <u>6-27</u>	LOCATION <u>Coldwater Carwash</u>			COUNTY <u>Comanche</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		<u>1 1/2 w - 25 - 1 w - 5/5</u>					

CONTRACTOR VAI #2
 TYPE OF JOB Surface Csg.
 HOLE SIZE 12 1/4 T.D. 735'
 CASING SIZE 8 5/8 DEPTH 715'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 500 MINIMUM 200
 MEAS. LINE _____ SHOE JOINT 44
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 43 3/4 Bbls. Fresh H₂O

OWNER Chesapeake open
 CEMENT
 AMOUNT ORDERED 200s x C + 15' 8.5' 8
3%CC + 1/4# Flo-Seal. 150sx C + 3%CC
 COMMON C 150sx @ 9.85 1447.50
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE 12sx @ 30.00 360.00
"C" 15' 8.5' 8 @ 8.15 1630.00
Flo-Seal 5.0 # @ 1.40 70.00
 HANDLING 376 @ 1.10 413.60
 MILEAGE 376 x .35 131.60
 TOTAL 4447.50

EQUIPMENT
 PUMP TRUCK CEMENTER Larry Dreiling
 # 352 HELPER David Felio
 BULK TRUCK DRIVER Mark Bronhardt
 # 363
 BULK TRUCK DRIVER _____
 # _____

REMARKS:

Pipe on Bottom: Break Circ.
Pump 200 sx 15' 8.5' 8 + 3%CC
1/4# Flo-Seal 150sx C + 3%CC
Release Plug. Displace Plug w/
43 3/4 Bbls. Fresh H₂O. Bump Plug
Release PSI. Float Held.
Cement Did Circ. ✓

SERVICE

DEPTH OF JOB 715'
 PUMP TRUCK CHARGE C-300' 520.00
 EXTRA FOOTAGE 415 @ .50 207.50
 MILEAGE 35 @ 3.00 105.00
 PLUG TRP _____ @ 100.00 100.00
 RECEIVED _____ @ _____
 KANSAS CORPORATION COMMISSION _____ @ _____

APR 10 2003

TOTAL 932.50

CHARGE TO: Chesapeake open

4-10-03

STREET _____
CITY _____ STATE _____ ZIP _____

CONSERVATION DIVISION
WICHITA, KS

FLOAT EQUIPMENT

5/2
 1-Reg. Guide Shoe @ 120.00 120.00
 1-ABO Sore Seal @ 320.00 320.00
 15-Tubulizers @ 40.00 600.00
 1-Stop Ring @ 15.00 15.00

TOTAL 1055.00

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE 6435.00
 DISCOUNT 1287.00 IF PAID IN 30 DAYS
 net 5148.00
 x PAT Lee
 PRINTED NAME

SIGNATURE x [Signature]