

FORM
5Rev
02/08

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400231881

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type ☒ Final completion ☐ Preliminary completion

1. OGCC Operator Number: 16660

4. Contact Name: SETH SANDERS

2. Name of Operator: CHESAPEAKE OPERATING INC

Phone: (405) 935-2567

3. Address: P O BOX 18496

Fax: (405) 849-2567

City: OKLAHOMA CITY State: OK Zip: 73154-

5. API Number 05-123-32486-00

6. County: WELD

7. Well Name: State 7-62-36

Well Number: 1H

8. Location: QtrQtr: NW NW Section: 36 Township: 7N Range: 62W Meridian: 6

Footage at surface: Distance: 659 feet Direction: FNL Distance: 659 feet Direction: FWL

As Drilled Latitude: 40.536330 As Drilled Longitude: -104.277300

GPS Data:

Date of Measurement: 09/02/2010 PDOP Reading: 4.7 GPS Instrument Operator's Name: Darren Veal

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: 8430.5

12. Spud Date: (when the 1st bit hit the dirt) 12/13/2010 13. Date TD: 12/18/2010 14. Date Casing Set or D&A: 12/20/2010

15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 6737 TVD** 17 Plug Back Total Depth MD 5772 TVD**

18. Elevations GR 4780 KB 4792

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

Dual Induction, Compensated Density, Compensated Neutron, Sonic, Cement Bond Log

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	9+5/8	36#	0	512	300	0	514	CALC
1ST	8+3/4	7	23#	0	6,734	175	5,082	6,735	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____					
Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
Details of work:					

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	3,395		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,322		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,552		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,598		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Chesapeake Operating Inc. acquired this well from Antelope. Cement previously there was not drilled out and a CIBP was set at 5772' to ensure adequate isolation. On 11/7/2011 a 10' window was milled in the 7" casing from 5735'-5745' and CHK then drilled a lateral to 10128'.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: SETH SANDERS

Title: REGULATORY COMPL. ANALYST Date: _____ Email: seth.sanders@chk.com

The subreport 'subreport3' could not be found at the specified location W:\inetpub\Net\Reports\AttachListNew.rdlc. Please

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)