

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:

400231912

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 05-123-32486-01

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:

12. Spud Date: (when the 1st bit hit the dirt) 12/13/2010 13. Date TD: 11/13/2011 14. Date Casing Set or D&A: 12/14/2011

15. Well Classification:

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

16. Total Depth MD 10128 TVD** 6434 17 Plug Back Total Depth MD TVD**

18. Elevations GR 4776 KB 4798

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:

Mud Logs

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
1ST LINER	6+1/8	4+1/2	11.6#	0	10,128	425	5,082	10,128	CALC

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	
SHARON SPRINGS	6,265		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,397		<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'.

A final Form 5 will be filed after completion.

A CBL will be filed with the final Form 5.

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)