

FORM
5Rev
02/08**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400237006

Date Received:

01/16/2012

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: Christy Keith

2. Name of Operator: CHESAPEAKE OPERATING INC

Phone: (405) 935-7539

3. Address: P O BOX 18496

Fax: (405) 849-7539

City: OKLAHOMA CITY State: OK Zip: 73154-

5. API Number 05-123-32487-01

6. County: WELD

7. Well Name: State 7-61-16

Well Number: 1H

8. Location: QtrQtr: SESE Section: 16 Township: 7N Range: 61W Meridian: 6

Footage at surface: Distance: 659 feet Direction: FSL Distance: 660 feet Direction: FEL

As Drilled Latitude: 40.569360 As Drilled Longitude: -104.205670

GPS Data:

Date of Measurement: 08/01/2011 PDOP Reading: 2.2 GPS Instrument Operator's Name: Veal

** If directional footage at Top of Prod. Zone Dist.: 1342 feet. Direction: FSL Dist.: 635 feet. Direction: FEL

Sec: 16 Twp: 7N Rng: 61W

** If directional footage at Bottom Hole Dist.: 629 feet. Direction: FNL Dist.: 634 feet. Direction: FEL

Sec: 16 Twp: 7N Rng: 61W

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: 8425.5

12. Spud Date: (when the 1st bit hit the dirt) 12/03/2010 13. Date TD: 10/22/2011 14. Date Casing Set or D&A: 10/23/2011

15. Well Classification:

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

16. Total Depth MD 10045 TVD** 6430 17 Plug Back Total Depth MD 10045 TVD** 6430

18. Elevations GR 4899 KB 4921

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:

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	613	339	0	620	CALC
1ST	8+3/4	7	23	0	6,699	175	5,200	6,704	CALC
2ND	6+1/8	4+1/2	11.6	0	10,045	425	4,265	10,045	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____					
Method used	String	Cementing tool setting/perf 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	6,349		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,456		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____ Print Name: Christy Keith

Title: Regulatory Analyst 1 Date: 1/16/2012 Email: christy.keith@chk.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400241517	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400241518	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400237006	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)