

OKLAHOMA CORPORATION COMMISSION  
TO SEND THIS FORM TO THE OCC,  
PLEASE USE THE APPROPRIATE DISTRICT  
OFFICE ADDRESS (ON THE BACK OF THIS

Form 1003/1003C  
Rev. 2017

TYPE OR USE BLACK INK

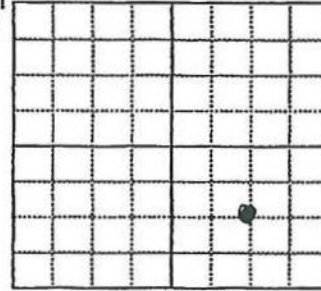
API NO.	35-017-20034
OTC PROD. UNIT NO	017-34491
PLUGGING DATE	11/20/18

**PLUGGING RECORD**

OAC 165.10-11-7

(PLEASE SEE INSTRUCTIONS ON BACK PAGE)

Well Name/No.		Maxey Unit #1-15	
Location	1/4 1/4 C 1/4 SE 1/4	Sec 15	Twp 13N Rge 10W
1320	Fl.FSL of 1/4 Sec 1320	Fl.FWL of 1/4 Sec	County Canadian
Total Depth	11,180'	Base of Treatable Water	90'
		Well Classification	Gas



**OPERATOR**

Name	Chesapeake Operating, Inc.	OTC/OCC No.	17441
Address	P.O. Box 18496	Phone	405-848-8000
City	OKC	State	OK
Zip Code	73154	Email Addr.	lisa.morgan@chk.com

**PIPE RECORD**

Size	Run (ft)	Pulled (ft)	Conductor
10 3/4"	1489'	None	Surface
			I.C.
			I.C.
7"	10,592'	1629'	P.C.
4 1/2"	10,373'-11,177'	None	Lnr.

**PERFORATION DEPTHS**

Set 1-	From 10,767'	To 10,783'
Set 2-	From 10,787'	To 10,796'
Set 3-	From	To
Set 3-	From	To

Plug	Type of Plug	Hole Size or Pipe Size	Depth	No. Sacks Cement	Slurry Volume	Calculated TOC	Measured Top of Plug if Tagged
1	CIBP	2 7/8"	9830'	40 sks	9.4 bbls	9730'	
2	CIBP	7"	3062'	0 sks	0 bbls	3062'	
3	CICR	7"	2980'	100 sks	23.5 bbls	2950'	
4	Cement	10 3/4"	1629'	150 sks	35.3 bbls	1439'	1377'
5	Cement	10 3/4"	140'	65 sks	15.3 bbls	Surface	Surface

**REMARKS**

Set 2 7/8" CIBP @ 9830'. Cut & pull 2 7/8" from 9820' & cap CIBP w/ 40 sks Class "C" cement up to 9730'. Set 7" CIBP @ 3062'. Perf 7" csg @ 3016' & set CR @ 2980'. Squeeze w/ 100 sks Thixotropic cement & cap w/ 5 sks up to 2950'. Cut & pull 7" csg from 1629' (41 lbs). Spot 150 sks Class "C" cement @ 1629'-1439'. WOC. Tag TOC @ 1377'. Circulate to surface from 140' w/ 65 sks cement.

**CEMENTER CERTIFICATION**

I certify that the cement plugs were placed in this well as shown on this report, per OCC instructions. The cementing was performed by me or under my direct supervision. I certify that all cementing data is true, correct and complete.

Signature	Date	Name and Title Typed or Printed
	12/3/18	Jason Orr - Plugging Agent
Company Name	Permit No.	
Orr Enterprises, Inc.	825	
Address	Phone	
P.O. Box 1706	580-251-9618	
City	State	Zip
Duncan	OK	73534-1706

**OPERATOR CERTIFICATION**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented herein, and that data and facts presented are true, correct, and complete to the best of my knowledge. This covers all well data and information presented herein.

Signature	Date	Name and Title Typed or Printed
	12-4-18	Lisa Morgan, Regulatory Technician II

**CORPORATION COMMISSION USE ONLY**

By signing this form, the District Manager has approved the contents thereof as to form only. Said District Manager does not warrant the facts provided by the operator are true or that the operator has properly plugged the described well.

Signature of District Manager	Field Inspector
	Bob Ballham

RECEIVED

DEC 04 2018

OKLAHOMA CORPORATION COMMISSION KINGFISHER OFFICE