

**PLUGGING RECORD**

OAC 165:10-1-10

**WELL INFORMATION**

**Plug Date: December 05, 2013**

**API No:** 3512922631

**Well #:** 1-6

**Well Name:** FOWLER

**Operator:** CHESAPEAKE OPERATING INC

**Operator #:** 17441

**Section:** 6      **Township:** 11N      **Range:** 26W      **Meridian:** Indian

**SE4 1/4:**      **NW4 1/4:**      **SE4 1/4:**      **NW4 1/4:**

**Total Depth:** 13775      **Base of Treatable:** Water: 500      **Well Classification:** GAS

**CONTACT INFORMATION**

**Contact Name:** Jamal Dameshfar

**Telephone:** 5802231245

**Address 1:** 6100 N WESTERN AVE

**Address 2:** PO BOX 18496

**City:** OKLAHOMA CITY      **State:** OK      **Zipcode:** 73154-0496      **Country:** US

**Email Address:**

**Fax:**

**PIPE RECORDS**

**PERFORATION DEPTHS**

String Name	Size	Run	Pulled
SURFACE	8.625	893	0
PRODUCTION	4.5	13775	3016

From Depth	To Depth
12750	13652

**PLUGS**

Plug Type	Hole Size	Depth	No. Sacks of Cement	Slurry Volume	Calculated TOC	Top of Plug
CEM	4.5	5453	70	16	5145	5384
CEM	4.5	4400	140	33	4202	4202
CEM	7.875	3016	40	9	2794	2794
CEM	8.625	993	100	23	624	759
CEM	8.625	550	40	9	402	402
CEM	8.625	34	15	3	4	4

**Remarks:** TUBING PARTED @ 5436' PERF SQUEEZE HOLES @ 4600 AND SET CEMENT RETAINER @ 4400

**Reason For Plugging:** NON COMMERCIAL

**CEMENTER CERTIFICATION INFORMATION**

**Name:**      **Title:**

**Company Name:** ORR ENTERPRISES, INC.

**Permit No:** 825

**Address 1:**

**Address 2:** P.O. Box 1706

**City:** DUNCAN

**State:** OK      **Zipcode:** 73534

**Phone:** (580) 251-9618

I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.

Electronic Signature: CHESAPEAKE OPERATING INC