

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED
OMBNO. 1004-0137
Expires: March 31, 2007

1a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other
b. Type of Completion: ☐ New Well ☐ Work Over ☐ Deepen ☒ Plug Back ☐ Diff. Resvr.,
Other _____

2. Name of Operator **CHESAPEAKE OPERATING, INC.** ATTN: LINDA GOOD

3. Address **P.O. BOX 18496, OKLAHOMA CITY, OK 73154-0496** 3a. Phone No. (include area code) **405-767-4275**

4. Location of Well (Report location clearly and in accordance with Federal requirements) **1950 FNL 1980 FEL**
At surface **1950 FNL 1980 FEL**
At top prod. interval reported below **SAME**
At total depth **SAME**

5. Lease Serial No. **NMMN 17224**

6. If Indian, Allottee or Tribe Name _____

7. Unit or CA Agreement Name and No. _____

8. Lease Name and Well No. **QUEEN LAKE 19 FEDERAL 1**

9. AFI Well No. **30-015-24292**

10. Field and Pool, or Exploratory **Pierce Crossing; Delaware**

11. Sec., T., R., M., on Block and Survey or Area **19-24S-29E**

12. County or Parish **EDDY** 13. State **NM**

14. Date Spudded **10/20/1982** 15. Date T.D. Reached **12/28/1982** 16. Date Completed **08/12/1999**
☐ D & A ☒ Ready to Prod.

17. Elevations (DF, RKB, RT, GL)* **2956 GR**

18. Total Depth: MD **13,500** TVD _____
19. Plug Back T.D.: MD **7965** TVD _____
20. Depth Bridge Plug Set: MD **8000** TVD _____

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
BONG LOG RUN 4/26/1995

22. Was well cored? ☒ No ☐ Yes (Submit analysis)
Was DST run? ☒ No ☐ Yes (Submit report)
Directional Survey? ☒ No ☐ Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17 1/2	13 3/8	48#	8	530		810		Surface	
12 1/4	9 5/8	47#&40#	8	2630		1890		1000	
8 1/2	7	23#	0	11,190		1275		6480	
6 1/8	4 1/2	135	10,987	13,500		400			

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 7/8	6490							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Delaware	6503	6513	6503-6513			Open
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, etc.

Depth Interval	Amount and Type of Material
6503-6513	Acid w/1500 gal 7 1/2% NeFe
6503-6513	Frac w/10,000 gal Medallion 3000 pad 15,000# resin coated 16/30 sand

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

*(See instructions and spaces for additional data on page 2)

ACCEPTED FOR RECORD

DAVID R. GLASS

MAY 23 2006

DAVID R. GLASS
PETROLEUM ENGINEER

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth

32. Additional remarks (include plugging procedure):

BLM NATIONWIDE BOND #NM2634

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ Electrical/Mechanical Logs (1 full set req'd.) ☐ Geologic Report ☐ DST Report ☐ Directional Survey
☐ Sundry Notice for plugging and cement verification ☐ Core Analysis ☐ Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) LINDA GOODTitle PERMITTING AGENT

Signature

Linda Good

Date

05/16/2006

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.