

**PLUGGING RECORD**

OAC 165:10-1-10

**WELL INFORMATION**

**Plug Date: January 14, 2014**

**API No:** 3501723536

**Well #:** 2-28

**Well Name:** JAMES PAINTS YELLOW

**Operator:** CHESAPEAKE OPERATING INC

**Operator #:** 17441

**Section:** 28      **Township:** 14N      **Range:** 9W      **Meridian:** Indian

**1/4:** CN2 1/4:      **SE4 1/4:** SE4 1/4:

**Total Depth:** 0      **Base of Treatable: Water:** 0      **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
CONDUCTOR	20	55	0
SURFACE	13.375	432	0
INTERMEDIATE CASING	9.625	1185	0
PRODUCTION	7	9605	2935
LINER	4.5	584	0

From Depth	To Depth
9724	9850
9690	9720

**PLUGS**

Plug Type	Hole Size	Depth	No. Sacks of Cement	Slurry Volume	Calculated TOC	Top of Plug
CIBP	7	9286	6	1	9251	9251
CEM	8.75	2985	50	12	2833	2833
CEM	9.625	1300	125	29	920	1057
CEM	9.625	420	40	9	300	300
CEM	9.625	64	25	5	4	4

**Remarks:**

**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