

Oklahoma Corporation Commission  
Oil & Gas Conservation Division  
Post Office Box 52000  
Oklahoma City, Oklahoma 73152-2000  
Rule 165: 10-3-25

Form 1002A

API No.: 35093246590002

**Completion Report**

Spud Date: August 08, 2007

OTC Prod. Unit No.: 093-121972-0-0000

Drilling Finished Date: August 22, 2007

**Amended**

1st Prod Date: September 05, 2007

Amend Reason: ADDED PERFORATIONS, CIBP, PACKER, AND STIMULATION

Completion Date: September 16, 2007

Recomplete Date: July 27, 2019

**Drill Type: STRAIGHT HOLE**

Well Name: SLATER 1-22

Purchaser/Measurer:

Location: MAJOR 22 22N 15W  
N2 SE SW NW  
2080 FNL 990 FWL of 1/4 SEC  
Derrick Elevation: 1445 Ground Elevation: 1434

First Sales Date:

Operator: CHESAPEAKE OPERATING LLC 17441  
PO BOX 18496  
6100 N WESTERN AVE  
OKLAHOMA CITY, OK 73154-0496

Completion Type		Location Exception		Increased Density	
X	Single Zone	Order No		Order No	
	Multiple Zone	543238		N/A	
	Commingled				

Casing and Cement							
Type	Size	Weight	Grade	Feet	PSI	SAX	Top of CMT
SURFACE	8 5/8	24	J-55	730		255	SURFACE
PRODUCTION	5 1/2	17	I-80 / J-55	8855		500	5660

Liner								
Type	Size	Weight	Grade	Length	PSI	SAX	Top Depth	Bottom Depth
There are no Liner records to display.								

**Total Depth: 8855**

Packer	
Depth	Brand & Type
8439	AS-IX

Plug	
Depth	Plug Type
8518	CIBP
8830	PBTD

Initial Test Data
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Test Date	Formation	Oil BBL/Day	Oil-Gravity (API)	Gas MCF/Day	Gas-Oil Ratio Cu FT/BBL	Water BBL/Day	Pumpin or Flowing	Initial Shut-In Pressure	Choke Size	Flow Tubing Pressure
Oct 14, 2019	HUNTON									

Completion and Test Data by Producing Formation

Formation Name: HUNTON

Code: 269HNTN

Class: DRY

Spacing Orders

Order No	Unit Size
203945	640

Perforated Intervals

From	To
8472	8557

Acid Volumes

3,500 GALLONS ACID, 40 BARRELS FLUIDS

Fracture Treatments

There are no Fracture Treatments records to display.

Formation	Top
CHESTER	6900
MISSISSIPPI	7604
HUNTON	8470

Were open hole logs run? Yes

Date last log run: August 20, 2007

Were unusual drilling circumstances encountered? No

Explanation:

Other Remarks

There are no Other Remarks.

FOR COMMISSION USE ONLY

Status: Accepted

1143951

PLEASE TYPE OR USE BLACK INK ONLY

NOTE:  
Attach copy of original 1002A if recompletion or reentry.

OKLAHOMA CORPORATION COMMISSION

Oil &amp; Gas Conservation Division

Post Office Box 52000

Oklahoma City, Oklahoma 73152-2000

Rule 165:10-3-25

Form 1002A

Rev. 2009

RECEIVED

OCT 17 2019

	ORIGINAL
X	AMENDED

Reason Amended

Reason Amended	Added perfs, CIBP, packer, & stimulation
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TYPE OF DRILLING OPERATION

TYPE OF DRILLING OPERATION  
☒ STRAIGHT HOLE ☐ DIRECTIONAL HOLE ☐ HORIZONTAL HOLE  
☐ SERVICE WELL

If directional or horizontal, see reverse for bottom hole location.

COUNTY	Major	SEC 22	17N 22N	RGE 15W
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LEASE NAME	Slater	WELL NO	1 23
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NAME	Slater	NO	I-22
SHL	FNL	FWL OF	

N2 1/4	SE 1/4	SW 1/4	NW 1/4	2,080	1/4 SEC	990
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ELEVATION	Latitude (if Known)		
Derrick Fl.	1 445	Ground	1 434

Demick Fl	1,440	Ground	1,454
OPERATOR CHESAPEAKE OPERATING, L.L.C.			

NAME	CHESAPEAKE OPERATING, L.L.C.
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ADDRESS P.O. BOX 18496

CITY	OKLAHOMA CITY	STATE
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CITY/TOWN/VILLAGE	STATE
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**COMPLETION TYPE**

COMPLETION TYPE	
X	SINGLE ZONE
	MULTIPLE ZONE Application Date
	COMMINGLED Application Date
LOCATION	
EXCEPTION ORDER NO.	543238
INCREASED DENSITY	
ORDER NO.	N/A

PACKER @ 8,439 BRAND & TYPE AS-IX  
PACKER @ BRAND & TYPE

### COMPLETION & TEST DATA BY PRODUCING FORMATION

**CASING & CEMENT (Form 1002C must be attached)**

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	TOP
CONDUCTOR							
SURFACE	8-5/8"	24#	J-55	730		255	Surface
INTERMEDIATE							
PRODUCTION	5-1/2"	17#	I-80/J-55	8,855		500	5,660
LINER							

PACKER @ 8,439 BRAND & TYPE AS-IX  
PACKER @ BRAND & TYPE

PLUG @	TYPE
PLUG @	TYPE

PLUG @	<u>8,518</u>	TYPE	<u>CIBP</u>
PLUG @	<u>8,830</u>	TYPE	<u>PBTD</u>

TOTAL DEPTH	8,855
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### COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	Hunton					No Frac
SPACING & SPACING	640					
ORDER NUMBER	203945					
CLASS: Oil, Gas, Dry, Inj. Disp, Comm Disp, Svc	Dry					
PERFORATED INTERVALS	8,472 - 8,557					
ACID/VOLUME	3,500 gals acid					
FRACTURE TREATMENT (Fluids/Prop Amounts)	40 bbls fluids					

Minimum Gas Allowable (165:10-17-7)

Gas Purchaser/Measurer

OR

1st Sales Date

## INITIAL TEST DATA

Oil Allowable (165:10-13-3)

INITIAL TEST DATE	10/14/2019
OIL-BBL/DAY	0
OIL-GRAVITY ( API)	
GAS-MCF/DAY	0
GAS-OIL RATIO CU FT/BBL	
WATER-BBL/DAY	0
PUMPING OR FLOWING	
INITIAL SHUT-IN PRESSURE	
CHOKE SIZE	
FLOW TUBING PRESSURE	

# AS SUBMITTED

A record of the formations drilled through, and pertinent remarks are presented on the reverse. 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.

<u>Juanita Cooper</u>		<u>JUANITA COOPER - REGULATORY SPECIALIST</u>		<u>10/16/2019</u>	<u>405-848-8000</u>
SIGNATURE		NAME (PRINT OR TYPE)		DATE	PHONE NUMBER
<u>P.O. BOX 18496</u>	<u>OKLAHOMA CITY</u>	<u>OK</u>	<u>73154</u>	<u>juanita.cooper@chk.com</u>	
ADDRESS	CITY	STATE	ZIP	EMAIL ADDRESS	

PLEASE TYPE OR USE BLACK INK ONLY  
FORMATION RECORD

Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

LEASE NAME Slater

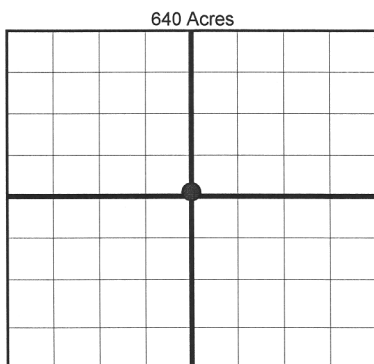
WELL NO. 1-22

NAMES OF FORMATIONS	TOP
Chester	6,900
Mississippi	7,604
Hunton	8,470

FOR COMMISSION USE ONLY	
ITD on file <input type="checkbox"/> YES <input type="checkbox"/> NO	
APPROVED _____	DISAPPROVED _____
2) Reject Codes	
_____	
_____	
_____	
_____	
_____	

Were open hole logs run?	<u>X</u> yes	no
Date Last log was run	8/20/2007	
Was CO <sub>2</sub> encountered?	yes	<u>X</u> no at what depths?
Was H <sub>2</sub> S encountered?	yes	<u>X</u> no at what depths?
Were unusual drilling circumstances encountered?	yes	<u>X</u> no
If yes, briefly explain.		

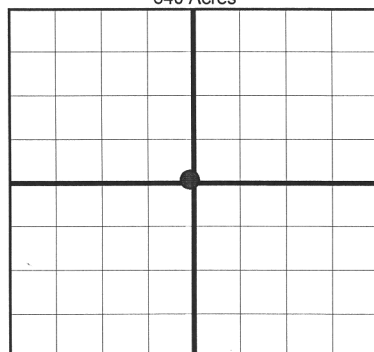
Other remarks:



If more than three drainholes are proposed, attach a separate sheet indicating the necessary information.

Direction must be stated in degrees azimuth. Please note, the horizontal drainhole and its end point must be located within the boundaries of the lease or spacing unit.

**Directional surveys are required for all drainholes and directional wells.**  
640 Acres



**BOTTOM HOLE LOCATION FOR DIRECTIONAL HOLE**

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Measured Total Depth	True Vertical Depth		Feet From 1/4 Sec Lines
		FSL	
		FWL	
BHL From Lease, Unit, or Property Line:			

**BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (LATERALS)**

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn		Direction
Measured Total Depth	True Vertical Depth		Total Length
		BHL From Lease, Unit, or Property Line:	

**LATERAL #2**

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn		Direction
Measured Total Depth	True Vertical Depth		Total Length
		BHL From Lease, Unit, or Property Line:	

**LATERAL #3**

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn		Direction
Measured Total Depth	True Vertical Depth		Total Length
		BHL From Lease, Unit, or Property Line:	