

## RAILROAD COMMISSION OF TEXAS

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Tracking No.: 10928

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Oil and Gas Division

API No. 42- 403-30449

7. RRC District No.

06

8. RRC Gas ID No.

Gas Well Back Pressure Test,  
Completion or Recompletion Report, and Log

1. FIELD NAME (as per RRC Records or Wildcat) <b>CARTHAGE (HAYNESVILLE SHALE)</b>		2. LEASE NAME <b>HORTON FED</b>		9. Well No. <b>1H</b>	
3. OPERATOR'S NAME (Exactly as shown on Form P-5, Organization Report) <b>CHESAPEAKE OPERATING, INC.</b>			RRC Operator No. <b>147715</b>		10. County of well site <b>SABINE</b>
4. ADDRESS <b>ATTN CHRISTIAN COMBS PO BOX 18496 OKLAHOMA CITY, OK 73154-0496</b>					11. Purpose of filing Initial Potential <input type="checkbox"/> Retest <input type="checkbox"/> Reclass <input type="checkbox"/> Well record only (Explain in remarks) <input checked="" type="checkbox"/>
5. Location (Section, Block, and Survey) <b>MC ADAMS, J JR , A-159</b>		5b. Distance and direction to nearest town in this county. <b>8.6 MILES N FROM MILAM</b>			
6. If operator has changed within last 60 days, name former operator					
12. If workover or reclass, give former field (with reservoir) & Gas ID or oil lease no. <b>FIELD &amp; RESERVOIR</b>			GAS ID or OIL LEASE #		Oil-0 Gas-G
N/A					Well #

13. Pipe Line Connection <b>WOPL</b>		14. Completion or recompletion date <b>12/16/2010</b>		15. Any condensate on hand at time of workover or recompletion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		16. Type of Electric or other Log Run. <b>GEOLOG</b>	
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Section I GAS MEASUREMENT DATA										
Date of Test		Gas Measurement Method (Check One) Orifice Meter <input type="checkbox"/> Flange Taps <input type="checkbox"/> <input type="checkbox"/> Positive Choke <input type="checkbox"/> Orifice Vent Meter <input type="checkbox"/> Pitot Tube <input type="checkbox"/> Critical-flow Prover <input type="checkbox"/>				Gas produced during test MCF				
Run Size	Line Size	Orif. or Choke Size	24 hr Coeff. Orif. or Choke	Static Pm or Choke Press	Diff h <sub>w</sub>	Flow Temp. ° F	Temp. Factor F <sub>tf</sub>	Gravity Factor F <sub>g</sub>	Compress Factor F <sub>pv</sub>	Volume MCF/DAY
1	N/A									
2										
3										
4										

Section II FIELD DATA AND PRESSURE CALCULATIONS											
Gravity (Dry Gas)		Gravity Liquid Hydrocarbon Deg. API		Gas-Liquid Hydro Ratio CF/Bbl		Gravity of Mixture G <sub>mix</sub> =		Avg. Shut-in Temp. ° F		Bottom Hole Temp. ° F@ (Depth)	
$D_{eff}^{8/3} =$		$\sqrt{T_f} = \sqrt{\quad} =$		$\sqrt{GL} = \sqrt{\quad} =$							
$C = \frac{1118 \times (D_{eff})^{8/3}}{\sqrt{T}} =$				$\frac{\sqrt{GL}}{C} = \quad = \quad$							
Run No.	Time of Run Min	Choke Size	Wellhead Press. PSIA P <sub>w</sub>	Wellhead Flow Temp ° F	P <sub>w</sub> <sup>2</sup> (Thousands)	R	R <sup>2</sup> (Thousands)	P <sub>1</sub>	P <sub>w</sub> / P <sub>1</sub>		
Shut-in	N/A										
1											
2											
3											
4											
Run No.	F	K	$S = \frac{1}{Z}$	E <sup>ks</sup>	P <sub>f</sub> and P <sub>s</sub>	P <sub>f</sub> <sup>2</sup> and P <sub>s</sub> <sup>2</sup> (Thousands)	P <sub>f</sub> <sup>2</sup> - P <sub>s</sub> <sup>2</sup> (Thousands)	Angle of Slope θ ..... n ..... Absolute Open Flow ..... MCF/DAY			
Shut-in											
1											
2											
3											
4											

WELL TESTERS CERTIFICATION: I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I conducted or supervised this test and that data and facts shown in Sections I and II above are true, correct, and complete, to the best of my knowledge. Bottomhole temperature and the diameter and length of flow string were furnished by the operator of the well.

CHESAPEAKE OPERATING, INC.(147715)

Signature: Well Tester

Name of Company

RRC Representative

OPERATORS CERTIFICATION: I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this report, that I or prepared supervised and directed this report, and that data and facts stated therein are true, correct, and complete, to the best of my knowledge.

CHESAPEAKE OPERATING, INC.

Linda Weeks

Regulatory Compliance  
Specialist

01/24/2011

(405) 935-6854

Signature: Operator's representative

Title

Date

Tel:

A/C

Number

SECTION III										DATA ON WELL COMPLETION AND LOG (Not Required on Retest)									
17. Type of Completion										18. Permit to Drill, Plug Back or Deepen									
New Well <input checked="" type="checkbox"/> Deepening <input type="checkbox"/> Plug Back <input type="checkbox"/> Other <input type="checkbox"/>										DATE <b>10/13/2010</b> PERMIT NO. <b>683812</b> Rule 37 Exception <input type="checkbox"/> CASE NO. _____									
19. Notice of Intention to Drill this well was filed in Name of										Water Injection Permit <span style="float: right;">PERMIT NO. _____</span> Salt Water Disposal Permit <span style="float: right;">PERMIT NO. _____</span> Other <span style="float: right;">PERMIT NO. _____</span>									
20. Number of producing wells on this lease in this field (reservoir) including this well					21. Total number of acres in this lease														
1					564.5														
22. Date Plug Back, Deepening, Workover or Drilling Operations:		Commenced		Completed		23. Distance to nearest well, Same Lease & Reservoir													
		10/18/2010		12/16/2010		0.0													
24. Location of well, relative to nearest lease boundaries										25. Elevation (DF. RKB, RT. GR ETC.)									
1126.0 Feet From <b>South</b> Line and <b>2817.0</b> Feet from										<b>252</b> <b>GL</b>									
NW Line of the <b>HORTON FED</b> Lease										26. Was directional survey made other than inclination (Form W-12)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
27. Top of Pay		28. Total Depth		29. P. B. Depth		30. Surface Casing Determined by		Field Rules <input checked="" type="checkbox"/>		Recommendation of T.D.W.R. <input checked="" type="checkbox"/>		Dt. of Letter <b>10/11/2010</b>		Dt. of Letter <b>10/08/2010</b>					
12058 MD:12139		12623 MD:16602								Railroad Commission (Special) <input checked="" type="checkbox"/>									
31. Is well multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																			
32. If multiple completion, list all reservoir names (completions in this well) and Oil Lease or Gas ID No.										GAS ID or OIL LEASE #		Oil-0 Gas-G		Well #					
FIELD & RESERVOIR																			
33. Intervals Drilled by:										Rotary Tools <input checked="" type="checkbox"/>		Cable Tools		34. Name of Drilling Contractor					
														35. Is Cementing Affidavit Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
36. CASING RECORD (Report All Strings Set in Well)																			
CASING SIZE		WT #/FT.		DEPTH SET		MULTISTAGE TOOL DEPTH		TYPE & AMOUNT CEMENT (sacks)		HOLE SIZE		TOP OF CEMENT		SLURRY VOL. cu. ft.					
10 3/4		45.5		2035				STANDARD 935		13 1/2		SURFACE		1577.0					
7 5/8		29.7		12263				PREMIUM POZ 1460		9 7/8		5000-EST		2469.7					
5 1/2		23.0		16597				THERMACEM 545		6 3/4		9200		768.45					
37. LINER RECORD																			
Size		Top		Bottom		Sacks Cement		Screen											
38. TUBING RECORD																			
Size		Depth Set		Packer Set		From		N/A		To		39. Producing Interval (this completion) Indicate depth of perforation or open hole							
N/A						From				To									
						From				To									
						From				To									
40. ACID, SHOT, FRACTURE, CEMENT SQUEEZE. ETC.																			
Depth Interval								Amount and Kind of Material Used											
N/A																			
41. FORMATION RECORD (LIST DEPTHS OF PRINCIPAL GEOLOGICAL MARKERS AND FORMATION TOPS)																			
Formations				Depth				Formations				Depth							
TRAVIS PEAK				7424.0 MD: 7470.0															
COTTON VALLEY				11202.0 MD: 11284.0															
BOSSIER				12058.0 MD: 12139.0															
REMARKS: WELL HAS NOT HAD 1ST SALES.																			