



**CHESAPEAKE OPERATING, INC.**  
DIVISION ORDER DEPARTMENT  
INSTRUCTION SHEET  
1-877-CHK-1GAS (1-877-245-1427)

Please sign and return one copy and keep the other copy.  
The copy you keep will aid in your communication with Chesapeake.

## SIGNATURES

- Sign exactly as shown on the Division Order. If your signature is different, please provide legal documentation authorizing the name change.
- Signatures by Agents, Attorneys-in-Fact, Guardians, or Trustees must be verified by attaching a copy of the recorded legal evidence of the rights vested in the signatory party.
- In the event of multiple trustees/executors, all signatures are required unless documentation is provided evidencing authority to sign on behalf of all parties.
- An authorized official, with the name and title of the signing party printed beneath the signature, must execute for companies, corporations, or partnerships.
- All signatures must be witnessed. No Notary is required.

## TAXPAYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER

- Include your Social Security Number or Tax Identification Number in the space provided beside your signature.
- **Failure to furnish this number will result in 28% withholding tax in accordance with Section 3406 of the Internal Revenue Service, and any tax withheld will not be refundable by Chesapeake.**

## ADDRESS AND TITLE CHANGES

- Please note any change of address directly on the Division Order.
- Subsequent address changes and transfers of title must be submitted in writing either by mail, fax or email. You must sign your request and include your owner number, social security number, or tax id number, old address, new address, and telephone number.

## CONTACT US

The following information will assist us in serving you: ► Name & Owner Number ► County and State Where Well is Located ► Well Name and Property Number

**Revenue Inquiry**  
1-877-CHK-1GAS  
fax: 405.849.0030  
revinquiry@chk.com

**Division Order/Title Inquiry**  
1-877-CHK-1GAS  
fax: 405.879.9563  
inquirydo@chk.com

**Correspondence**  
Chesapeake Operating Inc.  
P.O. Box 18496  
Oklahoma City, OK 73154-0496

Para solicitar una versión de este documento en español, llame al 1-877-245-1427

Owner No: 401243  
Int Type: 2

Owner: ROBERT E REESE

ROBERT E REESE  
 5825 E RAMADA RD  
 COTTONWOOD AZ, 863260000

**DIVISION ORDER**



|                    |                          |                     |            |
|--------------------|--------------------------|---------------------|------------|
| Property Number:   | 643753                   | Owner Number:       | 401243     |
| Property Name:     | RANKIN 32-34-68 A 1H     | Interest Type:      | 2          |
| Operator:          | CHESAPEAKE OPERATING INC | Net Acres:          | 0.853334   |
| County, St:        | CONVERSE, WY             | Lease Royalty Rate: | 0.18750000 |
| Unit Gross Acres:  | 640.000000               | BPO Unit Interest:  | 0.00025000 |
| Legal Desc:        | SECTION 32-34N-68W       | APO Unit Interest:  | 0.00025000 |
| Title Requirement: | See Attached             | Pay Status:         | ST         |
| Lease Number:      | WY7340971-020            | First Sales Date:   | 09/19/2013 |

The undersigned certifies the ownership of their decimal interest in production or proceeds, as described above, payable by Chesapeake Operating, Inc. (Payor).

Payor shall be notified, in writing, of any change in ownership, decimal interest or payment address. All such changes shall be effective the first day of month following receipt of such notice.

Payor is authorized to withhold payment pending resolution of a title dispute or adverse claim asserted regarding the interest in production claimed herein by the undersigned. The undersigned agrees to indemnify and reimburse Payor any amount attributable to an interest to which the undersigned is not entitled.

Payor may accrue proceeds until the total amount equals \$25.00, or pay annually, whichever occurs first, or as required by applicable state statute.

This Division Order does not amend any lease or operating agreement between the undersigned and the lessee or operator or any other contracts for the purchase of oil or gas.

In addition to the terms and conditions of this Division Order, the undersigned and Payor may have certain statutory rights under the laws of the state in which the property is located.

|                           |   |                                    |
|---------------------------|---|------------------------------------|
| <b>OWNER SIGNATURE(S)</b> | <b>SOCIAL SECURITY/<br/>TAX ID NUMBER</b> | <b>MAILING ADDRESS FOR PAYMENT</b> |
|                           |   |                                    |
| <b>HOME PHONE NUMBER</b>  | <b>CELL PHONE NUMBER</b>                  | <b>CORRESPONDENCE ADDRESS</b>      |
|                           |   |                                    |
| <b>WORK PHONE NUMBER</b>  | <b>FAX NUMBER</b>                         | <b>EMAIL ADDRESS</b>               |
|                           |   |                                    |

**Federal Law requires you to furnish your Social Security or Taxpayer Identification Number. Failure to comply will result in 28% tax withholding and will not be refundable by Payor.**

**\*\*\*COPY FOR YOUR RECORDS\*\***

Owner No: 401243  
 Int Type: 2

Owner: ROBERT E REESE