#### Edgar Filing: Patterson Frank J. - Form 4

| Patterson Fra                                                                                           | ink J.                                                      |                                                                                                                                                                            |                                                                                               |                                                  |                                            |        |            |                                                                                                                                         |                                                                      |          |  |
|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------------|--------|------------|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------|--|
| Form 4<br>July 02, 2018                                                                                 | 2                                                           |                                                                                                                                                                            |                                                                                               |                                                  |                                            |        |            |                                                                                                                                         |                                                                      |          |  |
| FORM<br>Check thi<br>if no long                                                                         | <b>I 4</b> UNITED                                           | Washington, D.C. 20549                                                                                                                                                     |                                                                                               |                                                  |                                            |        |            |                                                                                                                                         |                                                                      |          |  |
| subject to<br>Section 1<br>Form 4 of<br>Form 5<br>obligation<br>may conti<br><i>See</i> Instru<br>1(b). | 6.<br>r<br>Filed pur<br><sup>1s</sup> Section 17(:<br>inue. | <b>SECURITIES</b><br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section |                                                                                               |                                                  |                                            |        |            |                                                                                                                                         | Estimated average<br>burden hours per<br>response 0.5                |          |  |
| (Print or Type R                                                                                        | Responses)                                                  |                                                                                                                                                                            |                                                                                               |                                                  |                                            |        |            |                                                                                                                                         |                                                                      |          |  |
| Patterson Frank J. S.                                                                                   |                                                             |                                                                                                                                                                            | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>CHESAPEAKE ENERGY CORP<br>[CHK]      |                                                  |                                            |        | -          | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                                                           |                                                                      |          |  |
| (N                                                                                                      |                                                             |                                                                                                                                                                            | <ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>06/30/2018</li></ul> |                                                  |                                            |        |            | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>EVP-Exploration & Production                             |                                                                      |          |  |
|                                                                                                         |                                                             |                                                                                                                                                                            |                                                                                               | mendment, Date Original<br>Month/Day/Year)       |                                            |        |            | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul> |                                                                      |          |  |
| OKLAHOM                                                                                                 | IA CITY, OK 73                                              | 118                                                                                                                                                                        |                                                                                               |                                                  |                                            |        |            |                                                                                                                                         | Iore than One Re                                                     |          |  |
| (City)                                                                                                  | (State)                                                     | (Zip)                                                                                                                                                                      | Table                                                                                         | e I - Non-D                                      | erivative S                                | ecurit | ties Acq   | uired, Disposed of                                                                                                                      | f, or Beneficial                                                     | ly Owned |  |
| 1.Title of<br>Security<br>(Instr. 3)                                                                    | 2. Transaction Date<br>(Month/Day/Year)                     | Executio<br>any                                                                                                                                                            | med<br>n Date, if<br>Day/Year)                                                                | 3.<br>Transactic<br>Code<br>(Instr. 8)<br>Code V | 4. Securit<br>m(A) or Dis<br>(Instr. 3, 4) | sposed | of (D)     | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)                      | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |          |  |
| Common<br>Stock                                                                                         | 06/30/2018                                                  |                                                                                                                                                                            |                                                                                               | F                                                | 26,194<br>(1)                              | D      | \$<br>5.24 | 791,691                                                                                                                                 | D                                                                    |          |  |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

### **Reporting Owners**

#### Edgar Filing: Patterson Frank J. - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         | Code V                                 | (A) (D)                                                                                                                 | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |                                                     |                                                                            |

# **Reporting Owners**

| Reporting Owner Name / Address                                        | Relationships |           |                              |       |  |  |  |  |
|-----------------------------------------------------------------------|---------------|-----------|------------------------------|-------|--|--|--|--|
| L O                                                                   | Director      | 10% Owner | Officer                      | Other |  |  |  |  |
| Patterson Frank J.<br>6100 N. WESTERN AVE.<br>OKLAHOMA CITY, OK 73118 |               |           | EVP-Exploration & Production |       |  |  |  |  |
| Signatures                                                            |               |           |                              |       |  |  |  |  |
| J. David Hershberger For: FRAN<br>PATTERSON                           | K J.          |           | 07/02/2018                   |       |  |  |  |  |
| <u>**</u> Signature of Reporting Perso                                | on            |           | Date                         |       |  |  |  |  |
| Evelopetion of Dec                                                    |               |           |                              |       |  |  |  |  |

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These shares were forfeited to the issuer to satisfy tax withholding obligations in connection with the partial vesting of a previously disclosed restricted stock award.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.