## Edgar Filing: CHESAPEAKE ENERGY CORP - Form 4

CHESAPEAKE ENERGY CORP Form 4 July 06, 2005						
Inity 00, 2003OMB AFORM 4UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549OMB Number: Expires: Estimated burden hor response.Check this box 						
(Print or Type Responses) 1. Name and Address of Reporting Person <u>*</u> JOHNSON MICHAEL A	2. Issuer Name <b>and</b> Ticker or Trading Symbol CHESAPEAKE ENERGY CORP [CHK]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 18909 SADDLE RIVER DRIVE (Street)	<ul> <li>3. Date of Earliest Transaction (Month/Day/Year)</li> <li>07/01/2005</li> <li>4. If Amendment, Date Original Filed(Month/Day/Year)</li> </ul>	Director 10% Owner XOfficer (give titleOther (specify below)Dther (specify below)				
EDMOND, OK 73003 (City) (State) (Zip)	Table I - Non-Derivative Securities Acq	_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person uired, Disposed of, or Beneficially Owned				
(Instr. 3) any (Month/I	med 3. 4. Securities Acquired on Date, if Transaction(A) or Disposed of Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	5. Amount of Securities6. Ownership Form: Direct7. Nature of IndirectBeneficially Owned(D) or Indirect (I)BeneficialOwnedIndirect (I) (Instr. 4)OwnershipFollowing Transaction(s) (Instr. 3 and 4)Instr. 4)Instr. 4)				
Common 07/01/2005 Stock	A 19,000 A \$0	102,619 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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
JOHNSON MICHAEL A 18909 SADDLE RIVER DRIVE EDMOND, OK 73003			SVP, Chief Accounting Officer			
Signatures						
By: Jennifer M. Grigsby For: Mic Johnson	hael A.		07/01/2005			
<u>**</u> Signature of Reporting Person			Date			

## **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).

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.