SEC Form 4	
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## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287
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hours per response:	0.5

Instruction 1(b).						d pursuant to Section 16(a) of the Securities Exchange Act of 1934										nours	perres	ponse.	0.5		
						ion 30(h) of the															
1. Name and Address of Reporting Person <sup>*</sup> WARD TOM L						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)						
															Director	aive title		10% Ov			
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)										give title		Other (s below)	specity		
6100 N. WESTERN AVE.				03/30/2	03/30/2004									President & COO							
ļ																					
(Street)					4. If Ame	endment, Date	of Origir	nal File	d (N	Month/Da	ay/Yea	ar)	6. In Line		al or Jo	oint/Group	Filing	(Check Ap	olicable		
OKLAHO		K	73118											,	Form filed by One Reporting Person				n		
															orm fil Person	ed by Mor	re than	One Repo	rting		
(City)	(St	ate)	(Zip)																		
		Tal	ble I - Nor	n-Deriv	ative Se	ecurities Ac	quire	d, Di	sp	osed c	of, oi	r Bene	ficially	y Ow	ned						
1. Title of S	Security (Inst	r. 3)		2. Trans Date (Month/		2A. Deemed Execution Date if any (Month/Day/Yea	Cod	nsactio le (Inst	n	4. Securi Disposed			3, 4 and 5) Securities Form: Direct Beneficially (D) or Indirect Owned Following (I) (Instr. 4)			: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Cod	le V		Amount		(A) or (D)	Price	rice Reported Transaction(s) (Instr. 3 and 4)					(1150.4)		
						urities Acq								Own	ed						
L		1		(e.y., p	uis, cai	ls, warrants						Securi	ues)								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, T	Transaction Code (Instr. 1)	5. Number of Derivative Securities	6. Date Expirat (Month	tion Da	te		of Se Unde	tle and A ecurities erlying vative Se				9. Numbe derivative Securitie Beneficia	e s	10. Ownership Form: Direct (D)	11. Nature of Indirec Beneficia Ownershi		

Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	Code (Instr. 8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(Month/Day/Year)		Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
4.125% Cumulative Convertible Preferred Stock <sup>(1)</sup>	\$0	03/30/2004		Р		10,000		03/30/2004	08/08/1988	Common Stock	600,555	\$1,000	10,000	D		

Explanation of Responses:

1. Each share of 4.125% Cumulative Convertible Preferred Stock is convertible by the holder, only under certain circumstances as described in the Certificate of Designation, into 60.0555 shares of common stock. The preferred stock is perpetual and there is no expiration of the conversion right.

By: Jennifer M. Grigsby For:	04/0
<u>Tom L. Ward</u>	<u>04/0</u>
** Signature of Reporting Person	Date

/01/2004

\*\* Signature of Reporting Person

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

\* 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.

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 Number.