FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
Estimated average burden							
hours per response:	0.5						

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

D + D : :				Event Requir (Month/Day/ 21		3. Issuer Name and Ticker or Trading Symbol CHESAPEAKE ENERGY CORP [CHK]							
(Last) 6100 N. WESTER	(First) RN AVE.	(Middle)				4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) OKLAHOMA CITY	OK	73118				A	Officer (give title below)		Other (specify	below)	6. Indi	Form filed by C	p Filing (Check Applicable Line) ne Reporting Person lore than One Reporting Person
(City)	(State)	(Zip)											
Table I - Non-Derivative Securities Beneficially Owned													
					. Amount Owned (Ins	of Securities Beneficially str. 4)	Dir	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)													
1. Title of Derivative Security (Instr. 4)		E	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underl Security (Instr. 4)		erlying			ion ise	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Expiration Date		Title			Amount or Number of Shares	Price of Derivative Security		(msa. 5)		

Explanation of Responses:

Remarks:

No securities are beneficially owned.

J. David Hershberger For: BENJAMIN DUSTER

02/10/2021

** 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 5 (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.

POWER OF ATTORNEY For Executing Forms 3, 4 and 5

Know all by these presents that the undersigned, Benjamin C. Duster IV, hereby constitutes and appoints each of James R. Webb, J. David Hershbu

- (1) execute for and on behalf of the undersigned Forms 3, 4 and 5 in accordance with Section 16(a) of the Securities Exchange Act of 19:
- (2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete the execution (
- (3) take any other action of any type whatsoever in connection with the foregoing, including the execution of a Form ID, which, in the of the undersigned hereby grants to such attorney-in-fact full power and authority to do and perform each and every act and thing whatsoever requirements. WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 25th day of January, 2021.

By: /s/ Benjamin C. Duster IV