

For KCC Use:  
Effective Date: 12-1-07  
District # 1  
SGA?  Yes  No

**NOTICE OF INTENT TO DRILL**

Must be approved by KCC five (5) days prior to commencing well

Form must be Typed  
Form must be Signed  
All blanks must be Filled

Expected Spud Date 11 month 15 day 2007 year

Spot NW NW NW Sec 14 Twp 33 S. R. 34  East  West

OPERATOR: License # 5278  
Name: EOG Resources, Inc.  
Address: 3817 NW Expressway, Suite 500  
City/State/Zip: Oklahoma City, Oklahoma 73112  
Contact Person: MELISSA STURM  
Phone: 405/246-3234

280 feet from  N / S  Line of Section  
150 feet from  E / W  Line of Section

Is SECTION X Regular  Irregular?

(Note: Locate well on Section Plat on Reverse Side)

CONTRACTOR: License #: 34000  
Name: KENAI MID-CONTINENT, INC.

County: SEWARD  
Lease Name: HITCH Well #: 14 #1

Field Name: HITCH

Is this a Prorated/Spaced Field?  Yes  No

Target Formation(s): MORROW SS / LOWER MORROW SS

Nearest Lease or unit boundary: 150'

Ground Surface Elevation: 2888 feet MSL

Water well within one-quarter mile:  yes  no

Public water supply within one mile:  yes  no

Depth to bottom of fresh water: 540'

Depth to bottom of usable water: 540'

Surface Pipe by Alternate:  1  2

Length of Surface Pipe Planned to be set: 1700'

Length of Conductor pipe required: 40'

Projected Total Depth: 5800'

Formation at Total Depth: LOWER MORROW

Water Source for Drilling Operations:

Well  Farm Pond  Other \_\_\_\_\_

DWR Permit #: \_\_\_\_\_

(Note: Apply for Permit with DWR )

Will Cores Be Taken?:  Yes  No

If yes, proposed zone: \_\_\_\_\_

Well Drilled For: Well Class: Type Equipment:

- |  |                                   |   |  |
|--|-----------------------------------|---|--|
| <input type="checkbox"/> Oil                 | <input type="checkbox"/> Enh Rec  | <input checked="" type="checkbox"/> Infield | <input checked="" type="checkbox"/> Mud Rotary |
| <input checked="" type="checkbox"/> Gas      | <input type="checkbox"/> Storage  | <input type="checkbox"/> Pool Ext.          | <input type="checkbox"/> Air Rotary            |
| <input type="checkbox"/> OWWO                | <input type="checkbox"/> Disposal | <input type="checkbox"/> Wildcat            | <input type="checkbox"/> Cable                 |
| <input type="checkbox"/> Seismic; # of Holes | <input type="checkbox"/> Other    |   |  |

If OWWO: old well information as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Completion Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Directional, Deviated or Horizontal wellbore?  Yes  No

If yes, true vertical depth: \_\_\_\_\_

Bottom Hole Location: \_\_\_\_\_

KCC DKT # 08-CONS-048-CWLF

**PRORATED & SPACED: HUBBTON**

**AFFIDAVIT**

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-1001 et seq. It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation;
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is **necessary prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 10/17/07 Signature of Operator or Agent: Melissa Sturm Title: SR. OPERATIONS ASSISTANT

For KCC Use ONLY 175-22121-0000  
 API # 15- \_\_\_\_\_  
 Conductor pipe required None feet  
 Minimum surface pipe required 560 feet per Alt. 1   
 Approved by: 11-26-07  
 This authorization expires: 11-26-08  
 (This authorization void if drilling not started within 12 months of effective date.)  
 Spud date: \_\_\_\_\_ Agent \_\_\_\_\_

**Remember to:**

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed;
- Obtain written approval before disposing or injecting salt water.
- If permit has expired (See: authorized expiration date) please check the box below and return to the address below

Well Not Drilled - Permit Expired

Signature of Operator or Agent: \_\_\_\_\_

Date: \_\_\_\_\_

14-33-34 W

**IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW**

Plat of acreage attributable to a well in a prorated or spaced field

007 2007

LEGAL SECTION

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15- 175-22121-0000  
Operator EOG Resources, Inc.  
Lease HITCH  
Well Number 14 #1  
Field HITCH

Location of Well: County: SEWARD  
280 feet from  N / S  Line of Section  
150 feet from  E / W  Line of Section  
Sec 14 Twp 33 S. R. 34  East  West

Number of Acres attributable to well: \_\_\_\_\_

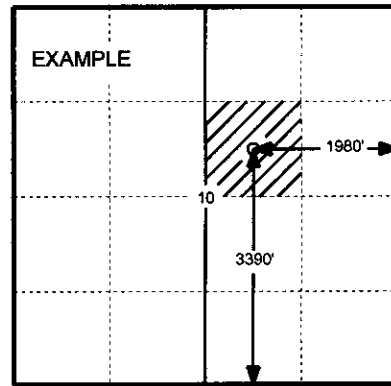
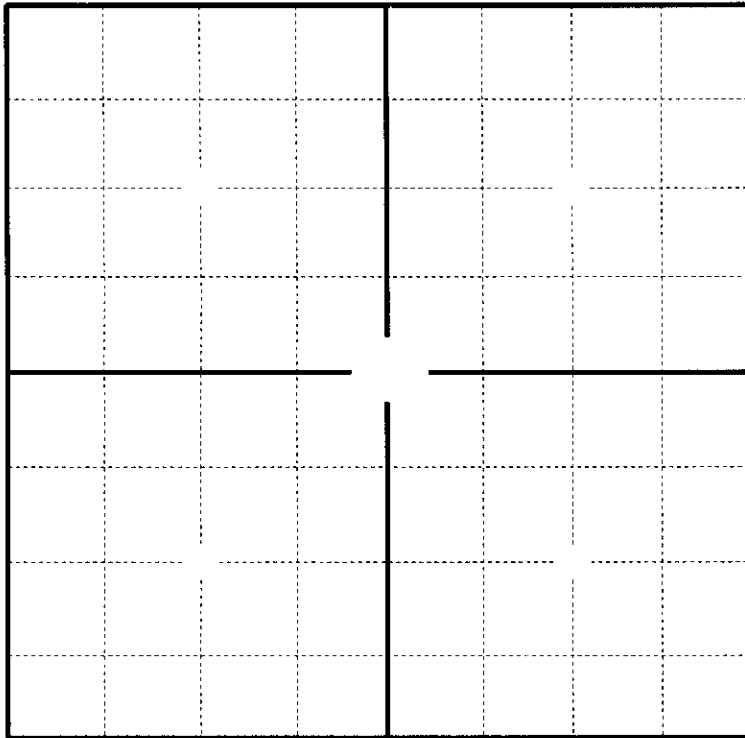
Is Section  Regular or  Irregular

QTR/QTR/QTR of acreage: NW - NW - NW

If Section is irregular, locate well from nearest corner boundary.  
Section corner used:  NE  NW  SE  SW

**PLAT**

(Show location of the well and shade acreage for prorated or spaced wells.)  
(Show footage to nearest lease or unit boundary line)



SEWARD CO.

**In plotting the proposed location of the well, you must show;**

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.;
2. The distance of the proposed drilling location from the section's south/north and east/west; and 3.
3. The distance to the nearest lease or unit boundary line.
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).

### APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name: <b>EOG Resources, Inc.</b>		License Number: <b>5278</b>
Operator Address: <b>3817 NW Expressway, Suite 500 Oklahoma City, OK 73112</b>		
Contact Person: <b>MELISSA STURM</b>		Phone Number: <b>(405) 246-3234</b>
Lease Name & Well No.: <b>HITCH 14 #1</b>		Pit Location (QQQQ): <b>- NW - NW - NW</b>
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small>	Pit is <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If existing, date constructed _____ Pit capacity <b>12,500</b> (bbls)	Sec. <b>14</b> Twp. <b>33</b> R. <b>34</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>280</b> Feet from <input checked="" type="checkbox"/> North/ <input type="checkbox"/> South Line of Section <b>150</b> Feet from <input type="checkbox"/> East/ <input checked="" type="checkbox"/> West Line of Section <b>SEWARD</b> County
Is the pit located in a Sensitive Ground Water Area? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits, only)</small>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is pit lined if a plastic liner is not used? <b>SOIL COMPACTION</b>
Pit dimensions (all but working pits): <b>125</b> Length (feet) <b>125</b> Width (feet) _____ N/A Steel Pits Depth from ground level to deepest point <b>5</b> (feet)		
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special measures. <b>RECEIVED</b> <b>OCT 18 2007</b> KANSAS CORPORATION COMMISSION CONSERVATION DIVISION WICHITA, KS
Distance to nearest water well within one-mile of pit <b>2383</b> feet    Depth of water well <b>300</b> feet	Depth to shallowest fresh water <b>540</b> <del>155</del> feet. Source of information: _____ measured    _____ well owner    _____ electric log <input checked="" type="checkbox"/> <sup>6</sup> KDWR	
<b>Emergency, Settling and Burn Pits ONLY:</b> Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pond? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Drilling, Workover and Haul-Off Pits ONLY:</b> Type of material utilized in drilling/workover <b>GEL</b> Number of working pits to be utilized <b>0</b> Abandonment procedure: <b>EVAPORATION/DEWATER AND BACKFILLING OF RESERVE PIT</b> Drill pits must be closed within 365 days of spud date.	
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		
<b>10/17/07</b> Date		<i>Melissa Sturm</i> Signature of Applicant or Agent
<b>KCC OFFICE USE ONLY</b>		
Date Received: <b>10/18/07</b> Permit Number: _____    Permit Date: <b>10/18/07</b> Lease Inspection: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

15-175-28121-0000