

0710

49/10

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5278
Name: EOG Resources, Inc.
Address 3817 NW Expressway, Suite 500
City/State/Zip Oklahoma City, Oklahoma 73112
Purchaser: N/A
Operator Contact Person: MELISSA STURM
Phone (405) 246-3234
Contractor: Name: ABERCROMBIE RTD, INC.
License: 30684
Wellsite Geologist: _____

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc.)

If Workover/Reentry: Old Well Info as follows:

Operator: _____
Well Name: _____
Original Comp. Date _____ Original Total Depth _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr?) _____ Docket No. _____
10/31/07 11/10/07 DRY
Spud Date or Date Reached TD Completion Date or Recompletion Date

API NO. 15- 081-21750-0000
County HASKELL
S/2 - SF - NF - SF Sec. 8 Twp. 28 S. R. 34 E W
1520 Feet from SN (circle one) Line of Section
330 Feet from EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name KEHN Well # 8 #1
Field Name _____
Producing Formation N/A
Elevation: Ground 3062' Kelley Bushing 3074'
Total Depth 5789' Plug Back Total Depth N/A
Amount of Surface Pipe Set and Cemented at 1647 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 4000 ppm Fluid volume 1000 bbls
Dewatering method used EVAPORATION
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License No. _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ E W
County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Melissa Sturm
Title SR. OPERATIONS ASSISTANT Date 1/10/08
Subscribed and sworn to before me this 10TH day of JANUARY
20 08
Notary Public _____
Date Commission Expires _____
Commission # 04005673 Expires 10/21/08

KCC Office Use ONLY
RECEIVED
KANSAS CORPORATION COMMISSION
 Letter of Confidentiality Attached
 If Denied, Yes Date: JAN 11 2008
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
CONSERVATION DIVISION
WICHITA, KS