

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL PLUGGING RECORD

K.A.R. 82-3-117

Form CP-4 December 2003 Type or Print on this Form Form must be Signed All blanks must be Filled

Lease Operator: EOG Resources, Inc. Address: 3817 NW Expressway, Suite 500 Oklahoma City, Phone: (405) 246-3226 Operator License #: 5278 Type of Well: DRY Docket #: The plugging proposal was approved on: 3/8/2008 by: MIKE MAYER Is ACO-1 filed? [X] Yes [] No If not, is well log attached? [] Yes [] No Producing Formation(s): List All (If needed attach another sheet) Depth to Top: Bottom: T.D.

API Number: 15- 189-22635-0000 Lease Name: WILLIS Well Number: 23 #5 Spot Location (QQQQ): S2 - NE - NE - SE 2280 Feet from [] North / [X] South Section Line 330 Feet from [X] East / [] West Section Line Sec. 23 Twp. 32 S. R. 37 [] East [X] West County: STEVENS Date Well Completed: N/A Plugging Commenced: 3/8/2008 Plugging Completed: 3/9/2008

Show depth and thickness of all water, oil and gas formations.

Table with 7 columns: Oil, Gas or Water Records (Formation, Content), Casing Record (Surface Conductor & Production) (From, To, Size, Put in, Pulled out). Row 1: SURFACE, 1707, 8 5/8, 1711, ----

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from (bottom), to (top) for each plug set.

SET 1ST CMT PLUG @ 1740' W/100 SKS; SET 2ND CMT PLUG @ 690' W/50 SKS; SET 3RD CMT PLUG @ 60' W/20 SKS. RECEIVED RAT HOLE - 15 SKS AND MOUSE HOLE - 10 SKS. ALL WITH 40/60 POZ PREM.

Name of Plugging Contractor: HALLIBURTON ENERGY SERVICES License #: 5287 APR 21 2008 Kenai, m.d - continent, Inc CP-215 34000

Name of Party Responsible for Plugging Fees: EOG RESOURCES, INC. State of OKLAHOMA County, OKLAHOMA, ss. DAWN ROCKEL (Employee of Operator) or (Operator) on above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well as filed and the same are true and correct, so help me God.



(Signature) Dawn Rockel Address 3817 NW EXPRESSWAY, SUITE 500, OKLAHOMA CITY, OK 73112

SUBSCRIBED and SWORN TO before me this 18th day of April, 2008

Melissa Sturm My Commission Expires: 10/24/2010 Notary Public

Handwritten initials 'PHT' in the bottom right corner.