

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, OKC OK 73112 Phone: 405/246-3234 Operator License #: 5278 Type of Well: DRY Docket #: The plugging proposal was approved on: 5/7/08 by: STEVE PFEIFFER Is ACO-1 filed? [X] Yes [] No Producing Formation(s): List All (If needed attach another sheet)

API Number: 15- 189-22646-0000 Lease Name: LINDA Well Number: 21 #1 Spot Location (QQQQ): SE - NW - NE - SW 2090 Feet from [] North / [X] South Section Line 1800 Feet from [] East / [X] West Section Line Sec. 21 Twp. 31 S. R. 35 [] East [X] West County: STEVENS Date Well Completed: N/A Plugging Commenced: 5/8/08 Plugging Completed: 5/9/08

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)

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 @ 1640' W/ 100 SKS, SET 2ND CMT PLUG @ 500' W/ 50 SKS, SET 3RD CMT PLUG @ 60' W/ 20 SKS.

RAT HOLE - 15 SKS MOUSE HOLE - 15 SKS ALL WITH 40/60 POZ PREMIUM

Name of Plugging Contractor: Keni, mid-continent, Inc

Name of Plugging Contractor: HALLIBURTON ENERGY SERVICES License #: 5287 34000 RECEIVED

Address: P.O. BOX 1598, LIBERAL KANSAS, 67901

Name of Party Responsible for Plugging Fees: EOG RESOURCES, INC. JUN 30 2008

State of OKLAHOMA County, OKLAHOMA, ss. CONSERVATION DIVISION WICHITA, KS

MELISSA STURM (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) Melissa Sturm

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

SUBSCRIBED and SWORN TO before me this 25TH day of JUNE, 20 08

Kaye Dawn Rockel Notary Public My Commission Expires: Notary Public State of Oklahoma