

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form must be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

6/25/10

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: KENAI MID-CONTINENT, INC.
License: 34000

Wellsite Geologist: _____

Designate Type of Completion _____

X New Well Re-Entry _____
_____ Oil _____ SLOW _____ Temp. Abd.
_____ Gas _____ ENHR _____ SIGW
X 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. _____

4/28/08 5/5/08 P&A 5/6/08

Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

API NO. 15- 129-21836-0000

County MORTON

SW - NE - NE - NE Sec. 21 Twp. 34 S. R. 42 ☐ E ☒ W

460 Feet from SW (circle one) Line of Section

570 Feet from EW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name CNG Well # 21 #1

Field Name _____

Producing Formation N/A

Elevation: Ground 3471' Kelley Bushing 3472'

Total Depth 5150' Plug Back Total Depth N/A

Amount of Surface Pipe Set and Cemented at 1703' Feet

Multiple Stage Cementing Collar Used? _____ Yes X 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 6/25/08

Subscribed and sworn to before me this 25TH day of JUNE

20 08

Notary Public KAY DAWN ROCKEL

Date Commission Expires Commission # 04009575 Expires 10/21/08

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution