CUNFIDENTIAL

Operator Contact Person: DIANA THOMPSON

34000

____ SWD

If Workover/Reentry: Old Well Info as follows:

__ ENHR

Original Comp. Date _____ Original Total Depth____

__ Other (SWD or Enhr?) Docket No. ___

5/15/2008

Date Reached TD

___ Deepening _____ Re-perf. ____ Conv. to Enhr./SWD

Docket No. ----

Docket No. __

Phone (405) 246-3196

Designate Type of Completion

Operator: License #

Name:

Purchaser:

License:

____Oil

Operator:

___ Gas

Well Name:

- Plug Back -

__ Dual Completion

_____ Commingled *

5/10/2008

Spud Date or

Recompletion Date

Wellsite Geologist:

5278

EOG RESOURCES. INC.

3817 NW EXPRESSWAY, SUITE 500

City/State/Zip OKLAHOMA CITY, OKLAHOMA 73112

Contractor: Name: KENAI MID-CONTINENT, INC.

X New Well Re-Entry Workover

IUL 0 2 2008

_ SIOW

SIGW Other (Core, WSW, Expl., Cathodic, etc.)

Plug Back Total Depth

P&A 5/16/2008 Completion Date or

Recompletion Date

__ Temp. Abd.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ppm Fluid volume 1000 bbls

WELL COMP WELL HISTORY - DESCR

LETION FORM W JULI 13 2008
LETION FORM IPTION OF WELL & LEASE MARKET JUL 0 3 2008, IPTION OF WELL WELL & LEASE MARKET JUL 0 3 2008, IPT
CONSERVATION DIVISION / C
API NO. 15- 175-22143-0000 WICHITA, KS.
County SEWARD
- <u>S2 - SE - SE Sec. 21</u> Twp. <u>32</u> S. R. <u>32</u> 🔲 E 💢 W
330 Feet from SN (circle one) Line of Section
Feet from (EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name <u>LAMBERT</u> Well # <u>21 #1</u>
Field Name
Producing Formation NA
Elevation: Ground 2825' Kelley Bushing 2837'
Total Depth 5969 Plug Back Total Depth SURFACE
Amount of Surface Pipe Set and Cemented at 1620 Feet
Multiple Stage Cementing Collar Used? Yes X No
If yes, show depth setFeet
If Alternate II completion, cement circulated from

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.

feet depth to

Drilling Fluid Management Plan

Chloride content 4000

Operator Name

(Data must be collected from the Reserve Pit)

Dewatering method used <u>EVAPORATION</u>

Location of fluid disposal if hauled offsite:

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements

Signature	<u> Dana</u>	Thomas	soo	JIII	ERESE FOST	1/1/2
Title SR.	REGULATORY C	PERATIONS	ASSISTANT		pate 7/2/2008	
Subscribed	and sworn to be	fore me this	2nd	ay of	# <u>0</u> 0008022 EXF. 06/26/12	
20 <u>08</u> .		$\neg l$:		E 03	D D S /	V = 1
Notary Pub	lic	Thu	lse -	CO.	OBLIO	, <u> </u>
Date Comm	nission Expires	6-26-	-2012		THINITION OR ORDINA	··

1/	KCC Office Use ONLY
	Letter of Confidentiality Attached If Denied, Yes Date: Wireline Log Received
	Geologist Report Received
	UIC Distribution

Lease Name _____ License No. _____

Quarter _____ Sec. ____ Twp. ___ S R. ____ E [] W

County _____ Docket No. ____