

CONFIDENTIAL

ORIGINAL

7/23/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5278

Name: EOG Resources, Inc.

Address 1: 3817 NW Expressway, Suite 500

Address 2: _____

City: Oklahoma City State: OK Zip: 73112 + 1483

Contact Person: Sheila Rogers

Phone: (405) 246-3236

CONTRACTOR: License # 34000 **KANSAS CORPORATION COMMISSION**

Name: Kenai Mid-Continent, Inc.

Wellsite Geologist: _____

Purchaser: N/A

Designate Type of Completion:

- New Well
 - Re-Entry
 - Workover
 - Oil
 - SWD
 - SIOW
 - Gas
 - ENHR
 - SIGW
 - CM (Coal Bed Methane)
 - Temp. Abd.
 - Dry
 - Other _____
- (Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to Enhr. Conv. to SWD

Plug Back: _____ Plug Back Total Depth _____

Commingled Docket No.: _____

Dual Completion Docket No.: _____

Other (SWD or Enhr.?) Docket No.: _____

5/30/09 6/4/09 P&A 6/6/09

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

API No. 15 - 067-21689-00-00

Spot Description: _____

E2 NW NW NW Sec. 16 Twp. 30 S. R. 38 East West

330' Feet from North / South Line of Section

530' Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE
- NW
- SE
- SW

County: Grant

Lease Name: Klepper Trust Well #: 16 #1

Field Name: Wildcat

Producing Formation: N/A

Elevation: Ground: 3127' Kelly Bushing: 3138'

Total Depth: 6000' Plug Back Total Depth: N/A

Amount of Surface Pipe Set and Cemented at: 1634 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/ _____

Alt (-) Dig - 84/09 ^{sx cmt}

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 4,000 ppm Fluid volume: 1,000 bbls

Dewatering method used: Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

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 of 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: Sheila Rogers

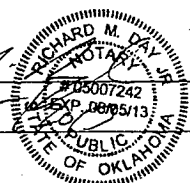
Title: Drilling Engineering Tech Date: 07/23/09

Subscribed and sworn to before me this 23rd day of July

2009

Notary Public: _____

Date Commission Expires: 8/5/13



KCC Office Use ONLY

- Letter of Confidentiality Received
- If Denied, Yes Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution