Notary Public

MISSION DIVISION

Form must be Typed

WELESONIZE THOM FORM WELL HISTORY - DESCRIPTION OF WELL

OPERATOR: License # 5278	API NO. 15- 081-21867-00-00
Name: EOG Resources, Inc.	Spot Description:
Address 1: 3817 NW Expressway, Suite 500	- <u>SW - SW - SE</u> Sec. <u>13</u> Twp. <u>30</u> S. R. <u>32</u> East X West
Address 2: Suite 500	330 Feet from North / X South Line of Section
City Oklahoma City State OK Zip: 73112 +	2310 Feet from X East / West Line of Section
Contact Person: DAWN ROCKEL	Footages Calculated from Nearest Outside Section Corner:
Phone ( 405) 246-3226	□ NE □ NW X SE □ SW
CONTRACTOR: License #34000	County HASKELL
Name: KENAI MID-CONTINENT, INC.	Lease Name TEEGERSTROM TRUST Well # 13 #1
Wellsite Geologist:	Field Name <u>WILDCAT</u>
Purchaser: TEPPCO CRUDE OIL, LLC	Producing Formation MISSISSIPPIAN
Designate Type of Completion	Elevation: Ground 2852' Kelley Bushing2864'
X New Well Re-Entry KCC/WICHITA	Total Depth 5804' Plug Back Total Depth 5746' EST.
<u>X</u> Oil SWD SIOW	Amount of Surface Pipe Set and Cemented at
Gas ENHR SIGW	Multiple Stage Cementing Collar Used? Yes X No
CM (Coal Bed Methane) Temp. Abd.	If yes, show depth setFeet
Dry <sup>-</sup> Other	If Alternate II completion, cement circulated from
(Core, WSW, Expl., Cathodic, etc.)  If Workover/Reentry: Old Well Info as follows:	feet depth tow/sx cmt:
Operator:	Drilling Fluid:Management:Plan: (Data must be collected from the Reserve Pit)
Well Name:  Original Comp. Date Original Total Depth	Programme and the state of the
DeepeningRe-perfConv.to EnhrConv.to SWD	Chloride content 4000 ppm Fluid volume 1000 bbls  Dewatering method used EVAPORATION
Plug Back ————————————————————————————————————	Location of fluid disposal if hauled offsite:
Commingled Docket No  Dual Completion Docket No	Operator Name
and the state of t	Lease Name License No.
Other (SWD or Enhr?) Docket No 3/6/09 3/13/09 5/6/09	Quarter Sec. Twp. S.R. East West
Spud Date or Date Reached TD Completion Date or	
Recompletion Date Recompletion Date	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 regulat	e 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	
SWW I WAV	29/09 KCC Office Use ONLY
If Denied, Yes Date:	
Subscribed and sworn to before me this  30/h day of June  If Denied, Yes Date:  Wireline Log Received  Geologist Report Received	
Date Commission Expires 630-07	UIC Distribution