

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5278
Name: EOG Resources, Inc.
Address 3817 NW Expressway, Suite 500
City/State/Zip Oklahoma City, Oklahoma 73112
Purchaser: ANADARKO ENERGY CO.
Operator Contact Person: MINDY BLACK
Phone (405) 246-3130
Contractor: Name: ABERCROMBIE RTD, INC.
License: 30684

API NO. 15- 175-22023-00-00
County SEWARD
SW - SW - SW Sec. 26 Twp. 33 S. R. 33 E W
330' Feet from S/N (circle one) Line of Section
330' Feet from E/W (circle one) Line of Section

Wellsite Geologist: _____
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc.)

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name SALLEY TRUST Well # 26 #1
Field Name _____
Producing Formation MORROW
Elevation: Ground 2823' Kelley Bushing 2834'
Total Depth 6600' Plug Back Total Depth 6090'
Amount of Surface Pipe Set and Cemented at 1695' 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/ _____ sx cmt.

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. _____
1/4/06 1/14/06 3/9/06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) Att 1 NH 6-4-08
Chloride content 4000 ppm Fluid volume 1000 bbls
Dewatering method used EVAPORATION
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ E W
County _____ Docket No. _____
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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 Mindy Black
Title OPERATIONS ASSISTANT Date 4-21-06
Subscribed and sworn to before me this 21st day of APRIL
20 06
Notary Public Heather Nealson
Date Commission Expires 4-26-08



HEATHER NEALSON
Cleveland County
Notary Public in and for
State of Oklahoma

KCC Office Use ONLY **KCC**
 Letter of Confidentiality Attached **APR 1 2006**
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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Side Two

Operator Name EOG RESOURCES, INC.

Lease Name SALLEY TRUST

Well # 26 #1

Sec. 26 Twp. 3E S.R. 33 East West

County SEWARD

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets.) Yes No

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run (Submit Copy.) Yes No

List All E.Logs Run:

MICROLOG, SPECTRAL DENSITY DUAL SPACED NEUTRON LOG, SPECTRAL DENSITY DUAL SPACED NEUTRON W/MICROLOG, HIGH RESOLUTION INDUCTION LOG, MUDLOG

Log Formation (Top), Depth and Datums Sample

Name Top Datum

SEE ATTACHED SHEET

CASING RECORD New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
SURFACE	11"	8 5/8	24#	1695'	MIDCON PP	210	3%CC-1/4#FLOC
					PREM PLUS	180	2%CC-1/4#FLOC
PRODUCTION	7 7/8	4 1/2	10.5#	6590'	50/50POZ PP	210	SEE CMT TIX

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	6136'-6140' & 6143'-6156'		
	CIBP SET @ 6100' W/ 10' CMT		
4	5880'-5892' & 5824'-5827'	1500#'s 20/40 WHITE SAND, 3500g.	5824-5892
		30# GUAR.	

TUBING RECORD	Size 2 3/8	Set At 5834'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 3/29/06	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. 0	Gas Mcf 95	Water Bbls. 0	Gas-Oil Ratio -----	Gravity
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Disposition of Gas: Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled

(If vented, submit ACO-18.) Other (Specify) _____

METHOD OF COMPLETION _____ Production Interval _____

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1002 A		
Well Name : Salley Trust 26 #1		
FORMATION	TOP	DATUM
chase	2608	-226
kridler	2671	-163
council grove	2970	136
neva	3310	476
topeka	3693	859
b. heebner	4304	1470
lansing	4442	1608
marmaton	5112	2278
cherokee	5292	2458
verdigris	5412	2578
st. genevieve	6134	3300

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HALLIBURTON JOB SUMMARY

REGION NORTH AMERICA LAND			NWA / COUNTRY Central / USA			SALES ORDER NUMBER 4147153		TICKET DATE 01/05/06	
MBU ID / EMPL # MCL0104 212723			H.E.S EMPLOYEE NAME JERRAKO EVANS			BDA / STATE MC / KS		COUNTY SEWARD	
LOCATION LIBERAL			COMPANY EOG RESOURCES			PSL DEPARTMENT ZI / CEMENT		CUSTOMER REP / PHONE DANNY RAUH	
TICKET AMOUNT \$14,847.04			WELL TYPE OIL			APIUM #			
WELL LOCATION LIBERAL, KS			DEPARTMENT CEMENT			SAP BOMB NUMBER 7521		Description Cement Surface Casing	
LEASE NAME SALLE TRUST		Well No. 26#1	SEC / TWP / RNG 26 - 33S - 33W			HES FACILITY (CLOSEST TO WELL SITE) LIBERAL			

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Evans, J 212723	7.0			
Buttry, C 317428	7.0			
Livingston, D 345452	6.0			
KCC				

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10415642	20			
10219237	20			
10243558-10011278	30			
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Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth **1700 FT**

Date	Called Out	On Location	Job Started	Job Completed
	1/5/2006	1/5/2006	1/6/2006	1/6/2006
Time	1730	2130	0245	0400

Tools and Accessories:

Type and Size	Qty	Make
Float Collar TROPHY	1	H
Float Shoe		
Centralizers		A
Top Plug HWE	1	
HEAD PC	1	L
Limit clamp	1	
Weld-A		C
Guide Shoe TT	1	
BTM PLUG		O

Well Data:

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	NEW	24#	8 5/8"		KB	1,695'	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			11"			1,695'	Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials:

Mud Type	Density	SPUD	Lb/Gal
Disp. Fluid	Density		Lb/Gal
Prop. Type	Size	Lb	
Prop. Type	Size	Lb	
Acid Type	Gal.	%	
Acid Type	Gal.	%	
Surfactant	Gal.	In	
NE Agent	Gal.	In	
Fluid Loss	Gal/Lb	In	
Gelling Agent	Gal/Lb	In	
Fric. Red.	Gal/Lb	In	
Breaker	Gal/Lb	In	
Blocking Agent	Gal/Lb		
Perpac Balls	Qty.		
Other			
Other			
Other			
Other			

Hours On Location:

Date	Hours	Date	Hours	Description of Job
1/5	6.0	1/6	7.0	Cement Surface Casing
Total	6.0	Total	7.0	

Ordered _____	Hydraulic Horsepower: _____	Used _____
Treating _____	Average Rates in BPM: _____	Overall _____
Feet 44	Cement Left in Pipe: _____	SHOE JOINT
	Reason _____	

Cement Data:

Stage	Sacks	Cement	Additives	W/Rq.	Yield	Lbs/Gal
1	210	MIDCON PP	3% CC - 1/4# FLOCELE - .1% FWCA	17.97	2.93	11.40
2	180	PREM PLUS	2% CC - 1/4# FLOCELE	6.30	1.34	14.80
3						
4						

Summary:

Circulating Breakdown _____	Displacement _____	Preflush: BBI _____	Type: _____
Lost Returns-YES _____	MAXIMUM _____	Load & Bkdn: Gal - BBI _____	Pad: Bbl - Gal _____
Cmt Rtn#Bbl _____	Lost Returns-NO _____	Excess /Return BBI _____	Calc. Disp Bbl _____
Average _____	Actual TOC _____	Calc. TOC: _____	Actual Disp. 106
Shut In: Instant _____	Frac. Gradient _____	Treatment Gal - BBI _____	Disp: Bbl _____
	5 Min. _____ 15 Min. _____	Cement Slurry: BBI _____	
		Total Volume BBI 153.0	

Frac Ring #1 _____ | Frac Ring #2 _____ | Frac Ring #3 _____ | Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____
Danny Rauh
 SIGNATURE

HALLIBURTON JOB SUMMARY

REGION Central Operations		NWA / COUNTRY Mid Continent/USA		SALES ORDER NUMBER 4160791		TICKET DATE 01/13/06	
MBU ID / EMPL # MCL10103 301261		H.E.S. EMPLOYEE NAME Scott Green		BDA / STATE MC/Ks		COUNTY SEWARD	
LOCATION LIBERAL		COMPANY EOG RESOURCES		PSL DEPARTMENT Cement			
TICKET AMOUNT \$12,123.57		WELL TYPE 01 Oil		CUSTOMER REP / PHONE JIM PURSER 580-461-0844		API/WVI #	
WELL LOCATION Liberal, Ks		DEPARTMENT Cement		SAP BOMB NUMBER 7523		Cement Production Casing	
LEASE NAME SALLE TRUST		Well No. 26#1		SEC / TWP / RNG 26 - 33S - 33W		HES FACILITY (CLOSEST TO WELL SITE) Liberal Ks	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Green, S 301261	11.0			
Archuleta, M 226381	11.0			
Loving, M 345679	11.0			
Bellows, B 366449	18.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10547695	20			
10011407 / 10010921	20			
10010752 / 10011277	30			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth **6800**

Date	Called Out	On Location	Job Started	Job Completed
	1/13/2006	1/13/2006	1/14/2006	1/14/2006
Time	1730	1930	0430	0530

Tools and Accessories

Type and Size	Qty	Make
Float Collar SSII 4 1/2	1	Howco
Float Shoe SSII 4 1/2	1	Howco
Centralizers 4 1/2 X 7 7/8	5	Howco
Top Plug HWE 4 1/2	1	Howco
HEAD 4 1/2	1	Howco
Limit clamp 4 1/2	10	Howco
Weld-A	1	Howco
Guide Shoe		Howco
Btm Plug		Howco

Well Data

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	New	10.5#	4 1/2		0	6,590	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			7 7/8"		1,894	6,600	Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials

Mud Type	Density	Lb/Gal
Disp. Fluid	8.33	
Prop. Type	Size	Lb
Prop. Type	Size	Lb
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		
Other		

Hours On Location

Date	Hours
1/13	5.0
1/14	6.0
Total	11.0

Operating Hours

Date	Hours
1/13	0
1/14	2.0
Total	2.0

Description of Job
Cement Production Casing

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Ordered _____ Hydraulic Horsepower Avail. _____ Used _____
 Treating _____ Average Rates in BPM _____ Overall _____
 Feet **93** Cement Left in Pipe _____ Reason _____ **SHOE JOINT**

Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	210	50/50 POZ PP		6% CALSEAL - 10% SALT - 6% GILSONITE - .6% HALAD-322 -	7.25	1.62	13.50
2							
3							
4							

Summary

Circulating Breakdown	Displacement	MAXIMUM	Preflush:	BBI	Type:
Lost Returns	Actual TOC		Load & Bkdn:	Gal - BBI	Pad: Bbl -Gal
Cmt Rtrn#Bbl	Frac. Gradient		Excess /Return	BBI	Calc. Disp Bbl
Average	5 Min.	15 Min.	Calc. TOC:		Actual Disp.
Shut In: Instant			Treatment:	Gal - BBI	Disp: Bbl
			Cement Slurry	BBI	61.0
			Total Volume	BBI	164.30

Frac Ring #1 _____ **Frac Ring #2** _____ **Frac Ring #3** _____ **Frac Ring #4** _____

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____

 SIGNATURE

