

Form must be Typed

12/08/11

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**CONFIDENTIAL**

**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR License # 5278  
Name EOG Resources, Inc.  
Address: 3817 NW Expressway, Suite 500  
Address: Suite 500  
City, Oklahoma City State OK Zip: 73112 +  
Geologist DAWN ROCKEL  
Phone: 246-3226  
CONSERVATION License # 30684

Geologist: \_\_\_\_\_  
Purchaser: ANADARKO ENERGY COMPANY

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/Reentry: Old Well Info as follows:  
Operator: SAVING AS ABOVE

Well Name: \_\_\_\_\_  
Original Comp. Date 6/13/07 Original Total Depth 6250  
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. \_\_\_\_\_  
8/19/09 \_\_\_\_\_ 8/25/09 \_\_\_\_\_  
Spud Date or \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date or \_\_\_\_\_  
Recompletion Date \_\_\_\_\_ Recompletion Date \_\_\_\_\_

API NO. 15- 129-21796-0080

Spot Description: \_\_\_\_\_  
NW - SW - NE - NE Sec. 20 Twp. 33 S. R. 39  East  West  
\_\_\_\_\_ 720 Feet from  North /  South Line of Section  
\_\_\_\_\_ 1120 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW

County MORTON  
Lease Name LINK Well # 20 #1

Field Name \_\_\_\_\_  
Producing Formation N/A

Elevation: Ground 3243 Kelley Bushing 3255  
Total Depth 6250 Plug Back Total Depth 6150

Amount of Surface Pipe Set and Cemented at \_\_\_\_\_ 1679 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ 3256 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 EOG RESOURCES, INC.

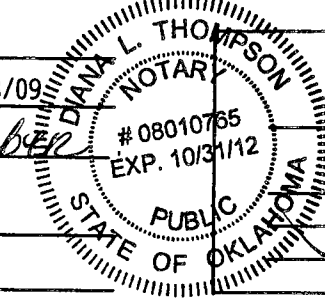
Lease Name LINK 20 #1 License No. 5278

Quarter NE Sec. 20 Twp. 33 S. R. 39  East  West  
County MORTON 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 Dawn Rockel  
Title SR OPERATIONS ASSISTANT Date 12/8/09  
Subscribed and sworn to before me this 8th day of December  
20 09  
Notary Public Diana L. Thompson  
Date Commission Expires 10-31-2012



**KCC Office Use ONLY**  
Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
Wireline Log Received  
Geologist Report Received  
UIC Distribution (OK 12/09)