

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED

JAN 12 2010

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

1/07/12

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 **CONFIDENTIAL**
Name: Kenai Mid-Continent, Inc. JAN 07 2010
Wellsite Geologist: _____
Purchaser: N/A **KCC**
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.: _____
11/6/09 11/11/09 P&A 11/14/09
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

API No. 15 - 129-21882-00-00
Spot Description: _____
S2 SW NE SW Sec. 4 Twp. 33 S. R. 39 East West
1360 Feet from North / South Line of Section
1650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Morton
Lease Name: Degarmo Trust Well #: 4 #1
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 3238' Kelly Bushing: 3249'
Total Depth: 6417' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at: 1618' 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.

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: West Sunset Disposal, LLC.
Lease Name: Rohrer License No.: 32462
Quarter _____ Sec. 36 Twp. 34 S. R. 36 East West
County: Stevens Docket No.: D27649

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: Drly Eng Tech Date: 1-8-10
Subscribed and sworn to before me this 8th day of January.
20 10
Notary Public: _____
Date Commission _____



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