

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

KANSAS CORPORATION COMMISSION

Form ACO-1
September 1999
Form must be Typed

FEB 02 2009

2/22/10

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5278
Name: EOG Resources, Inc.
Address 3817 NW Expressway, Suite 500
City/State/Zip Oklahoma City, Oklahoma 73112
Purchaser: Anadarko Petroleum Co.
Operator Contact Person: Terry Foster
Phone (405) 246-3152
Contractor: Name: ABERCROMBIE RTD, INC.
License: 30684
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.)

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. _____

1/13/08 1/20/08 2/22/08
Spud Date or Date Reached TD Completion Date or Recompletion Date

API NO. 15- 189-22631-00-00 *AMENDED

County Stevens

1320 Feet from S (circle one) Line of Section

1980 Feet from EW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name Savage Heirs Well # 1 #1

Field Name Gentzler

Producing Formation Morrow

Elevation: Ground 3147' Kelley Bushing 3159'

Total Depth 6600' Plug Back Total Depth 6439'

Amount of Surface Pipe Set and Cemented at 1695 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 3401 Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AKINS 4-16-09
(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 _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S R. _____ E W

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 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 Terry Foster

Title Sr. Regulatory Administrator Date 1/27/2009

Subscribed and sworn to before me this 30th day of January, 2009.

Notary Public Kaye Dawn Rockel
State of Oklahoma
Commission # 09010434 Expires 10/24/12

Date Commission Expires _____

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

INTRODUCED

Operator Name EOG Resources, Inc.

Lease Name Savage Heirs

Well # 1 #1

Sec. 1 Twp. 33 S.R. 38 East West

County Stevens

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.) | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum See Attached |
| Samples Sent to Geological Survey | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Cores Taken | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Electric Log Run (Submit Copy.) | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| List All E.Logs Run: original completion 2/25/08 Cement Bond, Array Comp Resist, Microlog, Spectral Density Dual Spaced Neutron and Neutron Microlog, and Array Sonic. | | |

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 | 12-1/4" | 8-5/8" | 24# | 1695 | Midcon 2 PP | 380 | See Attached |
| | | | | | PP | 180 | See Attached |
| Production | 7-7/8" | 5-1/2" | 17# & 15.5# | 6480 | POZ PP Plus | 310 | See Attached |

ADDITIONAL CEMENTING/SQUEEZE RECORD

| Purpose | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
|---|------------------|----------------|-------------|----------------------------|
| <input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone | 5671-5675 | Thixotropic | 25 | See Attached, 10/8/2008 |

| 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 | 5671'-5675' | None | |
| 4 (10/10/2008) | 6337'-6370', CIBP @ 6300' | 2,000 gals. 28% HCl | 6337-6370 |
| 4 (10/14/2008) | 6000'-6071' | 74,500 gals. 70% CO2 + 122,000# | |
| | | proppant. | 6000-6071 |

| | | | | |
|---|---|--------------|---------------|---|
| TUBING RECORD | Size 2-3/8" | Set At 5980' | Packer At N/A | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumed Production, SWD or Enhr. | Producing Method | | | |
| 2/15/08, resumed 11/1/2008 | <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio Gravity |
| 1/13/09 | ---- | 148 | 11.67 | ----- |

Disposition of Gas: Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled
 (If vented, submit ACO-18.) Other (Specify) _____

FEB 02 2009

CONSERVATION DIVISION
WICHITA, KS

| ACO-1 Completion Report | | |
|--------------------------------------|------|-------|
| Well Name : SAVAGE HEIRS 1 #1 | | |
| FORMATION | TOP | DATUM |
| BASE OF HEEBNER | 4069 | -910 |
| MARMATON | 4865 | -1706 |
| CHEROKEE | 5101 | -1942 |
| ATOKA | 5528 | -2369 |
| MORROW | 5648 | -2489 |
| CHESTER | 6210 | -3051 |
| ST GENEVIEVE | 6283 | -3124 |
| ST LOUIS | 6346 | -3187 |
| | | |
| | | |

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REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Liberals KS

26994

| | | | | | | | |
|-----------------------------|---------------|---------------------------|---|------------|-----------------------|--------------------------|---------------------------|
| DATE <u>10-8-04</u> | SEC. <u>1</u> | TWP. <u>33S</u> | RANGE <u>38W</u> | CALLED OUT | ON LOCATION | JOB START <u>9:30 AM</u> | JOB FINISH <u>1:30 AM</u> |
| LEASE # <u>Savage Heirs</u> | | WELL # <u>1-1</u> | LOCATION <u>Hugoton KS - N to RR Tracks</u> | | COUNTY <u>Stevens</u> | STATE <u>KS</u> | |
| OLD OR NEW (Circle one) | | <u>4 1/2, 1/4 N, E 40</u> | | | | | |

RECEIVED
KANSAS CORPORATION COMMISSION

FEB 02 2009

CONSERVATION DIVISION
WICHITA, KS

CONTRACTOR _____ OWNER _____

TYPE OF JOB Squell

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 17" DEPTH 6400

TUBING SIZE 2 3/4 DEPTH 5640

DRILL PIPE _____ DEPTH _____

TOOL Retainer DEPTH 5640

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

CEMENT

AMOUNT ORDERED 25sk Thickotropic

25 sk Premium

EQUIPMENT

PUMP TRUCK CEMENTER K.oby

470 HELPER Ryan

BULK TRUCK

472 DRIVER Wagner

BULK TRUCK

_____ DRIVER _____

| |
|---|
| COMMON <u>Premium</u> @ <u>50sk</u> @ <u>16.75</u> <u>837.50</u> |
| POZMIX @ _____ |
| GEL @ _____ |
| CHLORIDE @ _____ |
| ASC @ _____ |
| <u>Grd</u> <u>1 sk</u> @ <u>20.80</u> <u>20.80</u> |
| <u>CC</u> <u>1 sk</u> @ <u>58.20</u> <u>58.20</u> |
| <u>Calcium</u> <u>250 lbs</u> @ <u>89</u> <u>222.50</u> |
| <u>Capsul</u> <u>5 lbs</u> @ <u>29.25</u> <u>146.25</u> |
| _____ @ _____ |
| _____ @ _____ |
| _____ @ _____ |
| _____ @ _____ |
| _____ @ _____ |
| HANDLING <u>59</u> @ <u>2.40</u> <u>139.20</u> |
| MILEAGE <u>5k MT</u> @ <u>10</u> <u>312.00</u> |
| TOTAL <u>1736.20</u> |

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REMARKS:

Load Annulus - 500 Ps.

Pressure Test 2500 Ps.

Injection Rate 2BPM @ 1700 Ps.

Mix 25sk Thickotropic

Mix 25sk Premium

Displace with 7 BBL

Pressured up 2300 Ps.

String out - Reverse out

SERVICE

| | |
|--|----------------|
| DEPTH OF JOB <u>5640 Ft</u> | |
| PUMP TRUCK CHARGE _____ | <u>2745.00</u> |
| EXTRA FOOTAGE @ _____ | |
| MILEAGE <u>37 MT</u> @ <u>7.00</u> <u>259.00</u> | |
| MANIFOLD @ _____ | <u>100.00</u> |
| _____ @ _____ | |
| _____ @ _____ | |
| TOTAL <u>3104.00</u> | |

CHARGE TO: EOG Resources

STREET _____

| | | | | | |
|--------------|---------------------|-----------|--|-----------|-----|
| AFE | BGP | ACP | <input checked="" type="checkbox"/> WFO PU | Rec Other | 7TD |
| LOE | Regular Expense | 240 Accts | | | |
| Well Name: | <u>SAVAGE HEIRS</u> | | | | |
| Terry Wagnon | 409 | 504726 | Turn | | |

PLUG & FLOAT EQUIPMENT

| | | | | | |
|-------------------|---------------------|---------|-----------------|------------|----------|
| Post-it® Fax Note | 7671 | Date | <u>12-30-08</u> | # of pages | <u>1</u> |
| To | <u>Terry</u> | From | <u>Terry</u> | | |
| Co./Dept. | | Co. | | | |
| Phone # | | Phone # | | | |
| Fax # | <u>405-246-3153</u> | Fax # | | | |

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Terry Wagnon

PRINTED NAME _____

10/8/08