

CONFIDENTIAL

WELL COMPLETION FORM

ORIGINAL

Form must be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE

4/27/12

OPERATOR: License # 5278

Name: EOG Resources, Inc.

Address 1: 3817 NW Expressway, Suite 500

Address 2: Suite 500

City Oklahoma City State OK Zip: 73112 +

Contact Person: DAWN ROCKEL

Phone (405) 246-3226

CONTRACTOR: License # 34000 **KCC**

Name: KENAI MID-CONTINENT, INC. **APR 27 2010**

Wellsite Geologist: _____

Purchaser: _____

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: _____

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. _____

<u>1/3/10</u>	<u>1/11/10</u>	<u>3/2/10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API NO. 15- 15-189-22693-00-00

Spot Description: _____

NE - NW - SE - SW Sec. 1 Twp. 34 S. R. 38 East West

1100 Feet from North / South Line of Section

1950 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County STEVENS

Lease Name KRAMER Well # 1 #1

Field Name WILDCAT

Producing Formation MISSISSIPPIAN

Elevation: Ground 3174' Kelley Bushing 3185'

Total Depth 6700' Plug Back Total Depth 6598'

Amount of Surface Pipe Set and Cemented at 1707 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 4000 ppm Fluid volume 1000 **RECEIVED**

Dewatering method used EVAPORATION

Location of fluid disposal if hauled offsite: _____

Operator Name WEST SUNSET DISPOSAL, LLC

Lease Name ROHER License No. 32462

Quarter _____ Sec. 36 Twp. 34 S R. 36 East West

County STEVENS Docket No. D27649

RECEIVED
KANSAS CORPORATION COMMISSION
APR 30 2010
CONSERVATION DIV
WICHITA, KS

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 4/22/2010

Subscribed and sworn to before me this 27th day of April

20 10 Notary Public Diana Igleheart

Date Commission Expires 7/6/13

KCC Office Use ONLY	
Letter of Confidentiality Attached	<input checked="" type="checkbox"/>
If Denied, Yes <input type="checkbox"/> Date: _____	
Wireline Log Received	<input checked="" type="checkbox"/>
Geologist Report Received	<input checked="" type="checkbox"/>
UIC Distribution	<input type="checkbox"/>