

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

5/4/12

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

KCC

CONTRACTOR: License # 34000

MAY 04 2010

Name: KENAI MID-CONTINENT, INC.

CONFIDENTIAL

Wellsite Geologist: _____

Purchaser: DCP MIDSTREAM, LP

Designate Type of Completion

- New Well _____ Re-Entry _____ Workover
- _____ Oil _____ SWD _____ SLOW
- 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. _____

2/22/2010 2/27/2010 4/1/2010

Spud Date or Date Reached TD Completion Date or

Recompletion Date Recompletion Date

API NO. 15- 129-21901-00-00

Spot Description: _____

_____ - NW - NW - NW Sec. 33 Twp. 32 S. R. 39 East West

_____ 330 Feet from North / South Line of Section

_____ 330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County MORTON

Lease Name HULL Well # 33 #1

Field Name WILDCAT

Producing Formation MORROW

Elevation: Ground 3236' Kelley Bushing 3247'

Total Depth 6245' Plug Back Total Depth 6173'

Amount of Surface Pipe Set and Cemented at 1699 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 bbls

Dewatering method used EVAPORATION

Location of fluid disposal if hauled offsite: **RECEIVED**
KANSAS CORPORATION COMMISSION

Operator Name _____ **MAY 28 2010**

Lease Name _____ License # _____ **CONSERVATION DIVISION**
WICHITA, KCC

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

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 Dawn Rockel

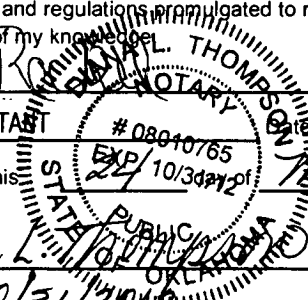
Title SR. OPERATIONS ASSISTANT 5/3/2010

Subscribed and sworn to before me this _____ day of _____

20 10

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