

**ORIGINAL**

6/10/12

**CONFIDENTIAL**

**WELL COMPLETION FORM**

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

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

Name: KENAI MID-CONTINENT, INC.

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion Recompletion

\_\_\_ New Well \_\_\_ Re-Entry X Workover

\_\_\_ Oil \_\_\_ SWD \_\_\_ SIOW

X 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: HAWKINS OIL & GAS INC.

Well Name: THEIS 13 #1

Original Comp. Date 8/29/81 Original Total Depth 6350'

\_\_\_ Deepening X 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. \_\_\_\_\_

2/11/10 3/4/10  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API NO. 15- 119-20492-00-02

Spot Description: \_\_\_\_\_

- -52-N/2 Sec. 13 Twp. 35 S. R. 26  East  West

1400 Feet from  North /  South Line of Section

2640 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

County MEADE

Lease Name THEIS Well # 13 #1 OWWO

Field Name MCKINNEY

Producing Formation CHESTER

Elevation: Ground 2258 Kelley Bushing 2271

Total Depth 6363 Plug Back Total Depth 6290 EST.

Amount of Surface Pipe Set and Cemented at \_\_\_\_\_ 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 72,000 ppm Fluid volume \_\_\_\_\_ bbls

Dewatering method used EVAPORATION **RECEIVED**

Location of fluid disposal if hauled offsite: JUN 11 2010

Operator Name KCC WICHITA

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

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 Date 6/9/2010

Subscribed and sworn to before me this 9/10 day of September 2010

Notary Public Diana Igleheart

Date Commission Expires 7/6/13

**KCC Office Use ONLY**

Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution