CONFIDENTIAL KANSAS CORPORATION COMMISSION URIGINAL OIL & GAS CONSERVATION DIVISION

___Workover

(Core, WSW, Expl., Cathodic, etc.)

Plug Back Total Depth

P&A 10/05/2010

Completion Date or

Recompletion Date

OPERATOR: License # 5278

Address 2: ____

Name: EOG Resources, Inc.

Contact Person: Sheila Rogers

Name: Kenai Mid-Continent, Inc.

____ Re-Entry

____ SWD ____ SIOW

ENHR _____ SIGW

Original Comp. Date: _____ Original Total Depth: _____

_ Deepening _____Re-perf. ____Conv. to Enhr. ____Conv. to SWD

Docket No.: ___

Docket No.: ___

Docket No.: ___

10/04/2010

Date Reached TD

_ CM (Coal Bed Methane) _____ Temp. Abd.

If Workover/Re-entry: Old Well Info as follows:

Phone: (405) 246-3236

Wellsite Geologist:

Designate Type of Completion:

Purchaser: N/A

✓__ New Well

___ Gas

_ Oil

Operator:

Well Name: ___

___ Plug Back: __

___ Commingled

09/26/2010

Recompletion Date

Spud Date or

___ Dual Completion

Other (SWD or Enhr.?)

CONTRACTOR: License # 34000

Address 1: 3817 NW Expressway, Suite 500

City: Oklahoma City State: OK Zip: 73112 + 1483

--- Form Must Be Typed

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

API No. 15 - 15-189-22755-00-00 Spot Description: ___ NW SE SW SE Sec. 26 Twp. 31 S. R. 39 East West _____ Feet from D North / D South Line of Section 1685' Feet from Fast / West Line of Section Footages Calculated from Nearest Outside Section Corner: □NE □NW ☑SE □SW County: Stevens Lease Name: Central Plains Well #: 26 #1 Field Name: Wildcat Producing Formation: N/A Elevation: Ground: 3189' Kelly Bushing: 3201' Total Depth: 6200' Plug Back Total Depth: N/A Amount of Surface Pipe Set and Cemented at: ____1732'_ Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: ____ If Alternate II completion, cement circulated from: feet depth to: _____w/___ Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) __ppm Fluid volume: 1,000 bbls Chloride content: 4,000 Dewatering method used: Evaporation Location of fluid disposal if hauled offsite: Operator Name: 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 ting and submitted with the form (see rule 82-3-107 for confidenbe attached with this form. ALL CEMENTING TICKETS MUST nporarily abandoned wells. s industry have been fully complied with and the statements herein KCC Office Use ONLY Letter of Confidentiality Received 11 17 10 - 11 17 112 If Denied, Yes Date: _ _____ Wireline Log Received **Geologist Report Received** RECEIVED __ UIC Distribution

of side two of this form will be held confidential for a period of 12 months if requested in wr tiality in excess of 12 months). One copy of all wireline logs and geologist well report sha BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all te
All requirements of the statutes, rules and regulations promulgated to regulate the oil and ga
are complete and correct to the best of my knowledge.
Signature:
Title: Sr. Drilling Eng. Tech Pate: 11/17/2010
Subscribed and sworn to before me this 11th day of November,
20 LO
Notary Public:
Date Commission Expires:
The OK OK The It