

CONFIDENTIAL WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

1/10/13

OPERATOR: License # 5278

Name: EOG Resources, Inc. **KCC**

Address 1: 3817 NW Expressway, Suite 500 **JAN 10 2011**

Address 2: Suite 500 **CONFIDENTIAL**

City Oklahoma City State OK Zip: 73112 +

Contact Person: DAWN ROCKEL

Phone (405) 246-3226

CONTRACTOR: License # 30684

Name: KENAI MID-CONTINENT, INC. **RECEIVED**

Wellsite Geologist: _____ **JAN 12 2011**

Purchaser: N/A **KCC WICHITA**

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>9/14/10</u>	<u>9/20/10*</u>
Spud Date or Recompletion Date	Date Reached TD Completion Date or Recompletion Date

API NO. 15- 189-22618-000601

Spot Description: _____

E2 - SW - NW - SW Sec. 23 Twp. 32 S. R. 37 East West

1620 Feet from North / South Line of Section

500 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County STEVENS

Lease Name UPC Well # 23 #2

Field Name _____

Producing Formation N/A

Elevation: Ground 3112' Kelley Bushing 3123'

Total Depth 6500' Plug Back Total Depth 6500'

Amount of Surface Pipe Set and Cemented at 1568 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: _____

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 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.

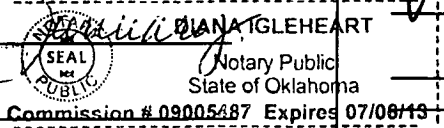
Signature Dawn Rockel

Title SR OPERATIONS ASSISTANT Date 1/10/2011

Subscribed and sworn to before me this 11th day of January

20 11 Notary Public Wesley J. Lehnert

Date Commission Expires 7/6/13



KCC Office Use ONLY	
<input checked="" type="checkbox"/>	Letter of Confidentiality Attached <u>1/10/11</u>
<input type="checkbox"/>	If Denied, Yes <input type="checkbox"/> Date: _____
<input type="checkbox"/>	Wireline Log Received
<input type="checkbox"/>	Geologist Report Received
<input type="checkbox"/>	UIC Distribution
<u>AT 1 - WO - Dlg - 1/24/11</u>	