

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008

*AMENDED:

Producing Formation Name **WELL COMPLETION FORM**
from Morrow to Cherokee. **WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form must be Typed

1/20/13

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 # 30684

Name: KENAI MID-CONTINENT, INC.

Wellsite Geologist: _____

Purchaser: ANADARKO PETROLEUM COMPANY

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: _____

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. _____

9/30/2010 _____ 10/11/2010

Spud Date or _____ Date Reached TD _____
Recompletion Date _____ Completion Date or
Recompletion Date _____

API NO. 15- 129-21815-0000

Spot Description: _____

NE - SW - SE - NW Sec. 22 Twp. 34 S. R. 43 East West

2130 Feet from North / South Line of Section

1900 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County MORTON

Lease Name CNG Well # 22 #1

Field Name _____

Producing Formation CHEROKEE *

Elevation: Ground 3453 Kelley Bushing 3465

Total Depth 5025' Plug Back Total Depth 4470'

Amount of Surface Pipe Set and Cemented at _____ 1697 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

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. _____

RECEIVED
MAR 21 2011
KCC WICHITA

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 3/17/2011

Subscribed and sworn to before me this 18th day of March DIANA IGLEHEART

Notary Public Diana Igleheart Notary Public
State of Oklahoma
Commission # 09005487 Expires 07/06/13

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 _____

AM-Dlg - 3/22/11

Operator Name EOG RESOURCES, INC. Lease Name CNG Well # 22 #1

Sec. 22 Twp. 34 S.R. 43 East West County MORTON

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums		<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum	
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	BASE OF HEEENER	3013	452	
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	LANSING	3078	387	
List All E.Logs Run:		MARMATON	3485	-20	
ARRAY SONIC, SD/DS NEUTRON MICRO, MICRO, ANNLR HOLE VOL., RESISTIVITY		ATOKA	4039	-574	
		MORROW	4082	-617	

CASING RECORD <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
SURFACE	12 1/4	8 5/8	24#	1697'	MIDCON2 PP	300	SEE CMT TIX
					PREM PLUS	180	
PRODUCTION	7 7/8	4 1/2	10.5	5011	50/50POZ PP	320	SEE CMT TIX

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	3923'--3928'	ACIDIZED w/500 GAL HCL	3923-3928
	CIBP - 3900'		
4	3826'--3830'	ACIDIZED w/500 GAL HCL.	3826-3830

TUBING RECORD	Size 2 3/8	Set At 3886'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. RECOMPLETION 1ST SALES 10/12/2010	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) Plunger lift
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Estimated Production Per 24 Hours 10/25	Oil Bbls. -0-	Gas Mcf 165	Water Bbls. -0-	Gas-Oil Ratio ---	Gravity ---
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval 3826'-3830'
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