Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1088867

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
Gas D&A ENHR SIGW	Elevation: Ground: Kelly Bushing:
OG GSW Temp. Abd.	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp S. R East West
Recompletion Date Recompletion Date	County: Permit #:

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY					
Confidentiality Requested					
Date:					
Confidential Release Date:					
Wireline Log Received					
Geologist Report Received					
UIC Distribution					
ALT I II III Approved by: Date:					

	Page Two	1088867
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	
INCTRUCTIONS. Chain important tang of formations panetrated. De	tail all aaraa Bapart all final	agniag of drill atoms tools giving interval toolad, time tool

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken Yes No (Attach Additional Sheets)			-	on (Top), Depth ar		Sample	
Samples Sent to Geolog	jical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
			RECORD Ne				
		Report all strings set-o	conductor, surface, inte	rmediate, producti	on, 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
		ADDITIONAL	CEMENTING / SQU	EEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and F	Percent Additives	

Perforate Protect Casing Plug Back TD Plug Off Zone	lop Bottom				
Did you perform a hydraulic	fracturing treatment	on this well?	Yes	No	(If No, skip questions 2 and 3)

Did you perform a nyuraulic fracturing treatment on this well?	162
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

(If No, skip questions 2 and 3) (If No, skip question 3)

No

No

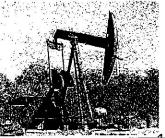
(If No, fill out Page Three of the ACO-1)

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated					/		ement Squeeze Record d of Material Used)	Depth	
TUBING RECORD: Size: Set At: Packer A					r At:	Liner R	un:	No		
Date of First, Resumed	Producti	on, SWD or ENHF	}.	Producing N	lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
									1	
DISPOSITION OF GAS:			METHOD OF COMPLETION:		PRODUCTION INT	ERVAL:				
Vented Solo	nted Sold Used on Lease Open Hole Perf. Dually						Commingled (Submit ACO-4)			
(If vented, Su	Submit ACO-18.) (Submit A				,	(Submit ACC-4)				

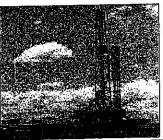
Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

e & Well NO. (Junde		Acid Report	
	<u>sec. 36</u>	ing Contractor	any Tools Date
d of Job/ Ement	~ Sec. 3(0	Twp. 944	Kiig. / 3/-
Quantity Materials	Used		
755KS Portl	and Cement		
		•	<u></u>
Vell T.D. <u>500</u>		Csg. Set At 487	50Volume
ize Hole		Tbg Set AT	Volume
Max. Press	S	Size Pipe 278	
Plug Depth		Pker Depth	
		Time Started	
Plug Used		Time Finished	· · · · · · · · · · · · · · · · · · ·

Name Chuck Hutton Name Bill Thompson Name Greg White



CST Oil & Gas



		Mall 21 A	and the second of	
Operator:	The I-	Well: Telesderlet	14.36 L	1: May
Spud Date:	H-13-12 Completion Date	: 4-17-12 Bit Size: 614	Surface Size	ų.
Depth	Formation	Remarks	Casing	Tally
		12		
				. <u> </u>
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	Chalo	*	166	278
	La androre		.775	274
	- Alle A	· · · · · · · · · · · · · · · · · · ·	299	-438
	Bill level 1	Lood Hour	458	<u> </u>
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			32.50	52.50
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	2-278 Centralizers			
	278 Float Shoe 2-278 Centralizers Tubing Champ			<u> </u>
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Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Mark Sievers, Chairman Thomas E. Wright, Commissioner Sam Brownback, Governor

July 27, 2012

Greg Bratton Running Foxes Petroleum Inc. 6855 S HAVANA ST, STE 400 CENTENNIAL, CO 80112

Re: ACO1 API 15-011-23810-00-00 Wunderly 14-36D INJ SW/4 Sec.36-24S-23E Bourbon County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully, Greg Bratton