



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1188416
OIL & GAS CONSERVATION DIVISION

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: 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 Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

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: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

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: _____

1188416

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

CASING RECORD <input type="checkbox"/> New <input 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

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				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes 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	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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CST Oil & Gas Corporation

1690 155th St. Fort Scott, KS

Fax: 1-620-829-5306

Office: 1-620-829-5307

Cement & Acid Report

Lease & Well No. C.HEIM 2-19 INJ 2 Contractor C & G DRILLING Date 11/11/2013

Kind of Job CEMENT Sec. 19 Twp. 8S Rng. 22e

Quantity	Materials Used
135 SKS	Portland Cement
5 SKS	Bentonite

Well T.D. 1269 Csg. Set At 1262.5 Volume

Size Hole Tbg Set At Volume

Max. Press Size Pipe 2 7/8

Plug Depth Pker Depth

Plug Used Time Beg. Time End

Remarks: Hooked onto well. Pumped 135 sks. Of cement until it reache surface. Unhooked from well..

Witnessed By: Name PRESTON SPENCER Name ROBERT HIXON Name DANIEL DALTON

Daily Drilling Report

Operator: Running Foxes Petroleum	Location: 660' FNL & 2620' FEL	Coord.: W2 W2 NW NE
Well Name: C Heim 2-19 Inj2	County: Leavenworth State: KS	Sec.: 19
Project Area: Leavenworth	API #: 15-103-21383-0000	Twp.: 8S
Spud Date: 10/10/2013	Lat/Long: -95.0014215 39.3445099	Rge.: 22E
Field: Leavenworth Northeast	Logging Geologist: Kurt Hodges	GL Elev.: 875' Est KB: N/A

Drilling Contr.: HAT Drilling	Toolpusher: Mike Thompson
Surf. Casing: 8 5/8"	Cement Date: _____
Surf. Bit: 12 1/4"	Hole size: 6 3/4"
Bit #1: 6 3/4" PDC	Drilling fluid: Water based mud
Bit #2: _____	Mud Pumps: Gardner-Denver 5x8
Bit #3: _____	

Date	Start Depth	End Depth	Ft. Drilled
10/16/13	1269'	1269'	0'

Operations

7:00am HAT arrived and circulated. 8:00am TOOH. 10:00am Tucker Wireline arrived on location. 10:30am Logging began. 12:30pm Tucker off location. HAT will run casing before moving to the Runnebaum 1-22 SWD.

Time	Depth	Bit Weight	Pump PSI	Pump SPM	Table RPM	Mud Weight	Viscosity	Chlorides

Mud/Chemicals Mixed:

Formation Entered	Depth	Subsea	Units Gas	BG GAS	Prognosis	Hi/Low	Core Run	From	To	Recovery	
Stark	N/A				416		#1	1164	1191	22'	Cement Surface
Hushpucney	N/A				443						Sacks
BKC	470	405			463	7' low					130
Wayside	585	290			578	7' low					Class
Altamont	622	253			616	6' low					A
Lake Neosho	627	248			621	6' low					Depth@TD
Anna	671	204			665	6' low					220' KB
Little Osage	692	183			688	4' low					
Excello	715	160			709	6' low					
Squirrel	724	151			714	10' low					
Ardmore	814	61			811	3' low					
V Shale	816	59			813	3' low					
Tebo	885	-10			881	4' low					
Weir	901	-26			893	8' low					
Bartlesville	962	-87			961	1' low					Cement
Riverton coal marker	1084	-209			1086	2' high					Longstring
McLouth A	1098	-223			1103	5' high					Sacks
McLouth B	1121	-246			1133	12' high					
McLouth C	1172	-297			1168	4' low	DST#				RECOVERY
McLouth D	1203	-328			1205	2' high	Interval:				Class
Burgess	1244	-369			1243	2' low	Formation				
Mississippian	1267	-392			1278	11' high	Times				
							ISIP				
							IIFP				Depth@TD
							FFP				
							FSP				

OIL SHOWS	DESCRIPTION
1172-1191 poor-fair show	1172-1191 McLouth C - Sand: grey-tan, well consolidated, slightly argillaceous, fine grained, sub rounded, poor-fair porosity, fair-good odor, occ brown stain, v little observed bleed, poor-fair show.

Comments:

C Heim 2-19 Inj2

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Thomas E. Wright, Commissioner
Jay Scott Emler, Commissioner

Sam Brownback, Governor

February 14, 2014

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

Re: ACO-1
API 15-103-21383-00-00
C Heim 2-19 INJ2
NE/4 Sec.19-08S-22E
Leavenworth County, Kansas

Dear Greg Bratton:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 10/10/2013 and the ACO-1 was received on February 10, 2014 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department