



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1189622
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
-----------------------------------	-----------------	---

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: _____

1189622

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No 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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	---	---



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: herrmann9-4dst1

TIME ON: 14:20
TIME OFF: 22:54

Company Running Foxes Petroleum Inc. Lease & Well No. Herrmann #9-4
Contractor C & G Rig #2 Charge to Running Foxes Petroleum Inc.
Elevation 1140 KB Formation Viola Effective Pay -- Ft. Ticket No. S0400
Date 10-25-13 Sec. 4 Twp. 1 S Range 15E W County Brown State KANSAS
Test Approved By Chad Counts Diamond Representative Jacob McCallie

Formation Test No. 1 Interval Tested from 3326 ft. to 3338 ft. Total Depth 3338 ft.

Packer Depth 3321 ft. Size 6 3/4 in. Packer depth -- ft. Size 6 3/4 in.

Packer Depth 3326 ft. Size 6 3/4 in. Packer depth -- ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 3314 ft. Recorder Number 8471 Cap. 10,000 P.S.I.

Bottom Recorder Depth (Outside) 3327 ft. Recorder Number 5515 Cap. 5,000 P.S.I.

Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEMICAL Viscosity 54 Drill Collar Length 280 ft. I.D. 2 1/4 in.

Weight 9.0 Water Loss 9.2 cc. Weight Pipe Length -- ft. I.D. 2 7/8 in

Chlorides 600 P.P.M. Drill Pipe Length 3020 ft. I.D. 3 1/2 in

Jars: Make STERLING Serial Number N/A Test Tool Length 26 ft. Tool Size 3 1/2-IF in

Did Well Flow? NO Reversed Out NO Anchor Length 12 ft. Size 4 1/2-FH in

Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in

Blow: 1st Open: WSB- Built to 1 3/4" in 10 min NOBB

2nd Open: WSB- Built to 5" in 45 min NOBB

Recovered 102 ft. of CO 100% O GRAVITY: 31 @ 60 degrees F

Recovered 30 ft. of HMCO 55% O 45% M

Recovered 132 ft. of TOTAL FLUID

Recovered _____ ft. of _____

Recovered _____ ft. of _____ Price Job

Recovered _____ ft. of _____ Other Charges

Remarks: _____ Insurance

Tool Sample: 39% O 61% M Total

Time Set Packer(s) 4:50 PM A.M. P.M. Time Started Off Bottom 7:40 PM A.M. P.M. Maximum Temperature 105

Initial Hydrostatic Pressure..... (A) 1553 P.S.I.

Initial Flow Period..... Minutes 10 (B) 2 P.S.I. to (C) 15 P.S.I.

Initial Closed In Period..... Minutes 45 (D) 1102 P.S.I.

Final Flow Period..... Minutes 45 (E) 18 P.S.I. to (F) 53 P.S.I.

Final Closed In Period..... Minutes 70 (G) 1072 P.S.I.

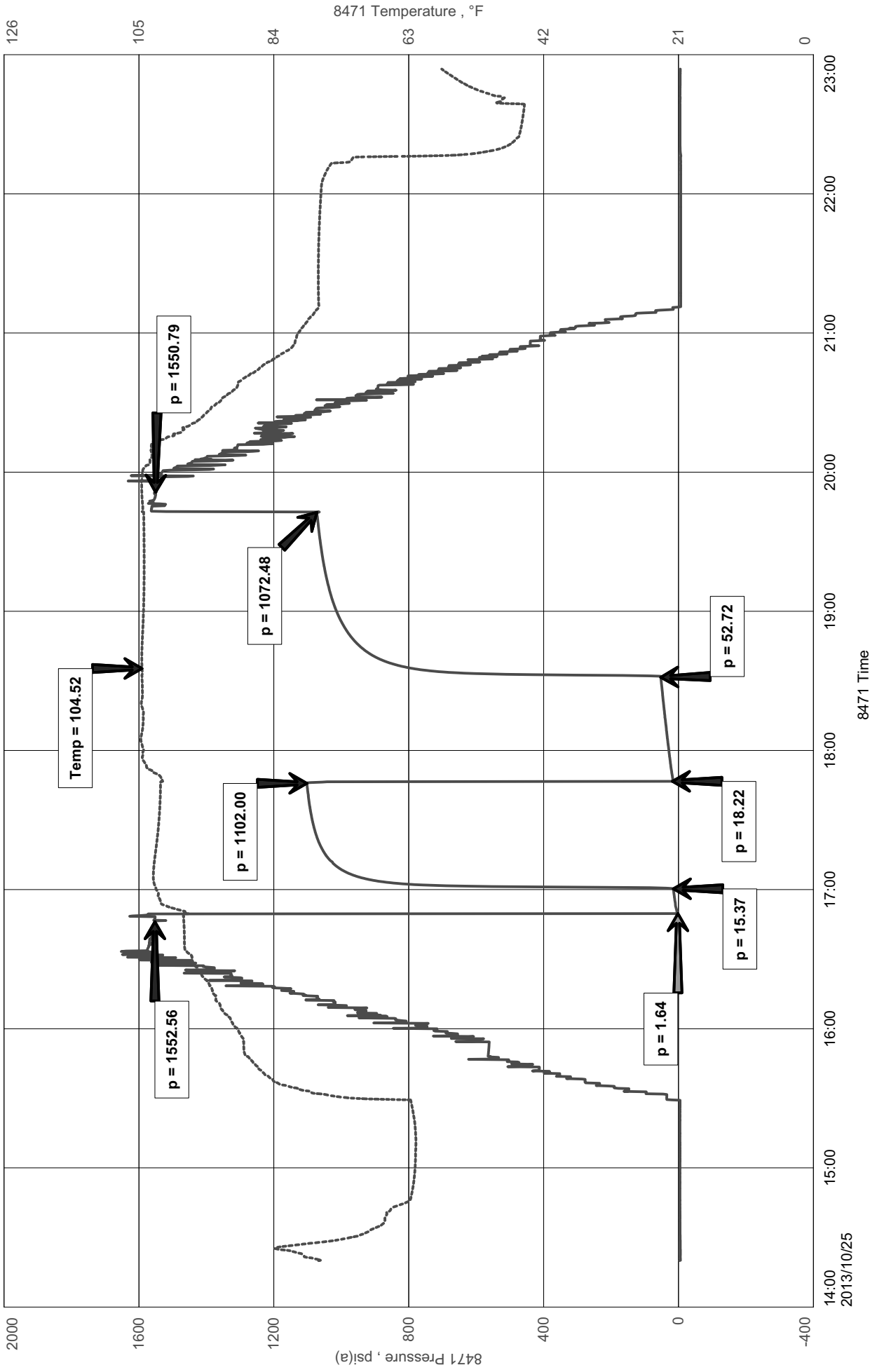
Final Hydrostatic Pressure..... (H) 1551 P.S.I.

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

Running Foxes Petroleum Inc.
DST #1 Viola 3326-3338'
Start Test Date: 2013/10/25
Final Test Date: 2013/10/25

Herrmann #9-4
Formation: DST #1 Viola 3326-3338'
Pool: Infield
Job Number: S0400

Herrmann #9-4



Diamond Testing

General information Report

General Information

Company Name Running Foxes Petroleum Inc.

Contact	Chad Counts	Job Number	S0400
Well Name	Herrmann #9-4	Representative	Jacob McCallie
Unique Well ID	DST #1 Viola 3326-3338'	Well Operator	Running Foxes Petroleum Inc.
Surface Location	SEC 4-1S-15E Brown County	Report Date	2013/10/25
Well License Number		Prepared By	Jacob McCallie
Field	Livingood		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #1 Viola 3326-3338'		
Well Fluid Type	01 Oil	Start Test Time	14:20:00
		Final Test Time	22:54:00
Start Test Date	2013/10/25		
Final Test Date	2013/10/25		
Gauge Name	8471		
Gauge Serial Number			

Test Results

RECOVERED:

102'	CO	100% O	GRAVITY: 31 @ 60 degrees F
30'	HMCO	55% O 45% M	
132'	TOTAL FLUID		

TOOL SAMPLE:
39% O 61% M

ALLIED OIL & GAS SERVICES, LLC 054815

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell KS

DATE <u>10-28-13</u>	SEC <u>4</u>	TWP <u>1</u>	RANGE <u>15</u>	CALLED OUT	ON LOCATION	JOB START <u>12:30pm</u>	JOB FINISH <u>1:00pm</u>
LEASE <u>Herman</u>		WELL# <u>16-4D</u>		LOCATION <u>Sabetha NW 3E No Winto</u>		COUNTY <u>Brown</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR CeG Drilling
 TYPE OF JOB surface
 HOLE SIZE 12 1/4 T.D. 179
 CASING SIZE 8 5/8 23' DEPTH 180.5
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT 15
 CEMENT LEFT IN CSG. 15
 PERFS.
 DISPLACEMENT 10 1/2 bbl

OWNER _____
 CEMENT AMOUNT ORDERED 110 com 32acc 29gel

EQUIPMENT
 PUMP TRUCK CEMENTER Robert V
 # 409 HELPER Nathan D
 BULK TRUCK
 # 410 DRIVER Jesse C
 BULK TRUCK
 # DRIVER

COMMON	<u>110</u>	@	<u>17.90</u>	<u>1969.00</u>
POZMIX		@		
GEL	<u>2</u>	@	<u>23.40</u>	<u>46.80</u>
CHLORIDE	<u>4</u>	@	<u>64.00</u>	<u>256.00</u>
ASC		@		
HANDLING	<u>119.01</u>	@	<u>2.48</u>	<u>295.14</u>
MILEAGE	<u>1314.06</u>	t/m	<u>2.60</u>	<u>3416.56</u>

TOTAL 5983.49

REMARKS:

run 4jts of 8 5/8 23' pump 6 1/2 bbl of water to get circulation mix 110 com 32 acc 29 gel displac 10 1/2 bbl water shut in
cement did circulate to surface
Thank you!!

SERVICE

DEPTH OF JOB	<u>179</u>
PUMP TRUCK CHARGE	<u>1512.25</u>
EXTRA FOOTAGE	@
MILEAGE	<u>242 HVMI @ 7.70 1863.40</u>
MANIFOLD	@
	<u>242 LVMI @ 4.40 1064.80</u>

TOTAL 4440.45

CHARGE TO: Repping Fox
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL _____

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____
 TOTAL CHARGES 10423.94

PRINTED NAME _____
 SIGNATURE Duke Carter

DISCOUNT 2084.79 IF PAID IN 30 DAYS
\$ 8339.15

ALLIED OIL & GAS SERVICES, LLC 054899

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell, Ks

DATE <u>10-26-13</u>	SEC. <u>4</u>	TWP. <u>1</u>	RANGE <u>15</u>	CALLED OUT	ON LOCATION	JOB START <u>7:30</u>	JOB FINISH <u>2:00</u>
LEASE <u>Nelson</u>	WELL # <u>9-4</u>	LOCATION <u>Sabetha, Ks</u>			COUNTY <u>Brown</u>	STATE <u>Kc</u>	
OLD OR NEW (Circle one)		<u>n on Hwy 75 to rd 332 4 1/2 e</u>					

CONTRACTOR C & G Drilling

TYPE OF JOB LS- Production

HOLE SIZE 7 7/8 T.D.

CASING SIZE 5 1/2 DEPTH 3421.50

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT 242.24'

CEMENT LEFT IN CSG. 42.24'

PERFS.

DISPLACEMENT 78.39 H₂O

EQUIPMENT

PUMP TRUCK CEMENTER Andy P / Dave F.

409 HELPER Nathan

BULK TRUCK

410 DRIVER Donny S.

BULK TRUCK

DRIVER

OWNER

CEMENT

AMOUNT ORDERED 160SK

ASC - Blend

COMMON 160SK @ 17.9 \$ 2,864.00

POZMIX @

GEL 3dc @ 23.4 \$ 70.2

CHLORIDE @

ASC 160SK @

Gyp Seal - 19SK @ 37.60 \$ 714.4

Salt - 18SK @ 26.35 \$ 474.3

Flt Seal #25 @ 2.97 \$ 74.25

1 1/2" mud/flush @ 58.70 \$ 704.40

HANDLING 192.02 Flt @ 2.48 \$ 476.20

MILEAGE 2,083.02 M @ 2.60 \$ 5,415.83

TOTAL ~~\$40,377.38~~
10,793.58

REMARKS:

* Ran Float Equipment - See Plug & Float Equipment

* Circulated 1 m³ mud to surface

* Ran 160SK Asc @ 26.91 H₂O cement to surface.

* Displaced cement @ 78.39 H₂O (Landed plug @ 1,600psi cement circulated to surface.)

SERVICE

DEPTH OF JOB 3421.50

PUMPTRUCK CHARGE \$2,558.75

EXTRA FOOTAGE @ ~~28.40~~

MILEAGE Heavy 242 m @ 7.7 \$ 1,863.4

MANIFOLD Light 242 m @ 4.4 \$ 1,064.8

TOTAL ~~\$5,486.75~~

CHARGE TO: Running Foses

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

1x 5 1/2 Float Shoe @ - \$ 239.30

1x 5 1/2 Latch Down @ - \$ 398.75

13x 5 1/2 Centralizer @ 28.40 \$ 369.20

2 x 5 1/2 Basket @ 159.40 \$ 318.80

TOTAL ~~\$1,426.05~~

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any)

TOTAL CHARGES \$17,706.58

DISCOUNT \$3,256.10 IF PAID IN 30 DAYS

PRINTED NAME Butch Carrault

SIGNATURE Butch Carrault

Net 14,450.48