

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONFIDENTIAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 33397
 Name: Running Foxes Petroleum Inc.
 Address: 14550 E Easter Ave., Ste 1000
 City/State/Zip: Centennial, CO 80112
 Purchaser: Seminole Energy
 Operator Contact Person: Steven Tedesco
 Phone: (303) 671-7242
 Contractor: Name: McGowan Drilling
 License: 5786
 Wellsite Geologist: None
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

| | | |
|-----------------------------------|-----------------|---|
| <u>11/16/04</u> | <u>11/18/04</u> | <u>12/28/04</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

RECEIVED
 KANSAS CORPORATION COMMISSION
 FEB 07 2005
 CONSERVATION DIVISION
 WICHITA, KS

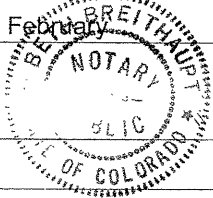
API No. 15 - 011-23025-00-00
 County: Bourbon
SE NE Sec. 22 Twp. 26 S. R. 23 East West
1980 feet from S (N) (circle one) Line of Section
660 feet from (E) / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) (NE) SE NW SW
 Lease Name: Crays Well #: 8-22
 Field Name: Elmore West
 Producing Formation: Mississippian
 Elevation: Ground: 900 Kelly Bushing: _____
 Total Depth: 562 Plug Back Total Depth: 555.9
 Amount of Surface Pipe Set and Cemented at 20 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 560
 feet depth to surface w/ 83 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 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 of 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: [Signature]
 Title: President Date: 2/4/05
 Subscribed and sworn to before me this 4th day of February
20 05
 Notary Public: [Signature]
 Date Commission Expires: 9/9/08



KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied. Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution