

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

Operator: License # 33397
Name: Running Foxes Petroleum Inc.
Address: 14550 East Easter Ave., Ste. 1000
City/State/Zip: Centennial, CO 80112
Purchaser: Southern Star
Operator Contact Person: Steven Tedesco
Phone: (303) 617-7242
Contractor: Name: McGown Drilling, Inc.
License: 5786
Wellsite Geologist: Chris Ryan, Pete Vollmer

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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>03-18-04</u>	<u>03-24-04</u>	<u>03-24-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 011-22963-00-00
County: Bourbon AP 100' W of
E/2 SW NE Sec. 15 Twp. 26 S. R. 23 East West
1980 1931 feet from S / (N) (circle one) Line of Section
1750 1805 feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:

(circle one) (NE) SE NW SW
Lease Name: Schaff Well #: 7-15

Field Name: Petersburg
Producing Formation: Cherokee Coals

Elevation: Ground: 880 Kelly Bushing: _____

Total Depth: 480' Plug Back Total Depth: _____

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 400'

feet depth to surface w/ ALT II WITH 2-6-07 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.: _____

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 05 2004
CONSERVATION DIVISION
WICHITA, KS

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.

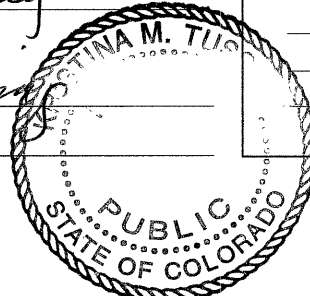
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: [Signature]
Title: President Date: May 3, 2004

Subscribed and sworn to before me this 3rd day of May

20 04
Notary Public: [Signature]

Date Commission Expires: 5-22-04



KCC Office Use ONLY

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

✓

X

Operator Name: Running Foxes Petroleum Inc. Lease Name: Schaff Well #: 7-15
 Sec. 15 Twp. 26 S. R. 23 East West County: Bourbon

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Dual Compensated Porosity Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Excello Shale</td> <td>108</td> <td>772</td> </tr> <tr> <td>Mississippian</td> <td>478</td> <td>402</td> </tr> <tr> <td colspan="3">See mud log for additional data</td> </tr> </table>	Name	Top	Datum	Excello Shale	108	772	Mississippian	478	402	See mud log for additional data		
Name	Top	Datum											
Excello Shale	108	772											
Mississippian	478	402											
See mud log for additional data													

CASING RECORD <input checked="" 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
Surface	12 1/4"	10"	20	20'	Portland	5	none
Long String	9 1/4"	7"	16	400'			

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 <i>(Amount and Kind of Material Used)</i>
		RECEIVED KANSAS CORPORATION COMMISSION MAY 05 2004 CONSERVATION DIVISION WICHITA, KS

TUBING RECORD	Size 2 3/8	Set At 400	Packer At NA	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. Awaiting Pipeline Hook up		Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
		10	0	

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

LOCATION Chanute

FIELD TICKET

DATE <u>3/19/04</u>	CUSTOMER ACCT # <u>6960</u>	WELL NAME <u>Skaff 7-15</u>	QTR/QTR	SECTION <u>16</u>	TWP <u>26 S</u>	RGE <u>23 E</u>	COUNTY <u>Burbon</u>	FORMATION
CHARGE TO <u>Running Fox</u>				OWNER				
MAILING ADDRESS				OPERATOR <u>Mike Gray</u>				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1 well	PUMP CHARGE <u>Cement Pump</u>		525 ⁰⁰
1118	4 Sacks	<u>Prem Gel 2 EA Load</u> <u>2 Ahead of Job</u>	11 ⁸⁰ SK	47 ²⁰
5407	<u>M.A. Delivery</u>	BLENDING & HANDLING TON-MILES STAND BY TIME MILEAGE WATER TRANSPORTS		190 ⁰⁰
5502	4 hr	VACUUM TRUCKS FRAC SAND		300 ⁰⁰
1124	118	CEMENT <u>50/50 Poz</u>	6 ⁶⁸ SK	778 ⁸⁰
			SALES TAX	292⁰⁰ 62¹⁰ 52 ⁰⁴
ESTIMATED TOTAL				1970⁸⁰ 1893 ⁰⁴

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 05 2004
CONSERVATION DIVISION
WICHITA, KS

Ravin 2790

CUSTOMER or AGENTS SIGNATURE

Mike Gray CIS FOREMAN Prayer

CUSTOMER or AGENT (PLEASE PRINT)

DATE

189366

CONSOLIDATED

WELL SERVICES, INC.

INFINITY COMPANY

11 W. 14th, P.O. Box 884 Chanute, KS 66720 • 620/431-9210 • 1-800/467-8676

Page 1

INVOICE DATE	INVOICE NO.
03/22/04	00189366

100 EASTER AVE, SUITE 1000
 CENTRAL CO 80112

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAY 05 2004
 CONSERVATION DIVISION
 WICHITA, KS

TERMS: Net 30 Days

A Finance Charge computed at 1% per month (annual percentage rate of 12%) will be added to balances over 30 days.

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.		
10	SHAFF 7-15	03/19/2004	4239		
DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE	
CEMENT PUMPER	1.0000	525.0000	EA	525.00	
PREMIUM GEL	4.0000	11.8000	SK	47.20	
BULK CEMENT DELIVERY/MIN BULK DEL	1.0000	190.0000	EA	190.00	
80 BBL VACUUM TRUCK	4.0000	75.0000	HR	300.00	
50/50 POZ CEMENT MIX	118.0000	6.6000	SK	778.80	

893 04

TAX 52.04

REMITTANCE COPY

PLEASE PAY
 03/22/04