

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33397
Name: Running Foxes Petroleum, Inc.
Address: 7060-B South Tucson Way
City/State/Zip: Centennial, CO 80112
Purchaser: _____
Operator Contact Person: Steven Tedesco
Phone: (303) 617-7242
Contractor: Name: McGown Drilling
License: 5786

Wellsite Geologist: Greg Bratton
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>11/2/2007</u>	<u>11/6/2007</u>	<u>TBA</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - ^{oil} ~~001~~-23332-0000
County: Bourbon
NE NW SW SE Sec. 36 Twp. 24 S. R. 23 East West
1290 feet from N (circle one) Line of Section
1995 feet from W (circle one) Line of Section

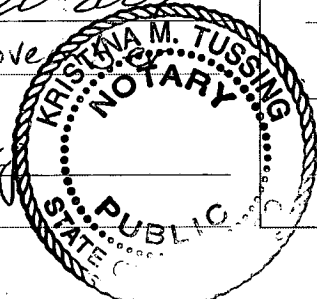
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Vogel Well #: 36-Inj3
Field Name: Devon
Producing Formation: Bartlesville
Elevation: Ground: 858 Kelly Bushing: NA
Total Depth: 472 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 42 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) *ALT II with 12-17-07*
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: Landman Date: 11-20-2007
Subscribed and sworn to before me this 20th day of November
07
Notary Public: [Signature]
Date Commission Expires: 5-22-08



KCC Office Use ONLY

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

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KANSAS CORPORATION COMMISSION
NOV 21 2007
CONSERVATION DIVISION
WICHITA, KS

copies to UIC

Operator Name: Running Foxes Petroleum, Inc. Lease Name: Vogel Well #: 36-Inj3
 Sec. 38 Twp. 24 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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Exello 141' 717'
 Upper Bartlesville 350' 508'

List All E. Logs Run:

Gamma Ray, Density Neutron, Dual Induction

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
Surface	10"	7"		42	QuickSet	25	Gel Flush
Production	6 1/4"	2 7/8"		472'	Quickset	75	Gel Flush

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		Acid, Fracture, Shot, Cement Squeeze Record		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		

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 WICHITA, KS

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval _____

FED ID#
 MC ID # 165290
 Shop # 620 437-2661
 Cellular # 620 437-7582
 Office # 316 685-5908
 Office Fax # 316-685-5926
 Shop Address: 3613A Y Road
 Madison, KS 66860

Hurricane Services, Inc.
 P.O. Box 782228
 Wichita, KS 67278-2228

Cement, Acid or Tools
 Service Ticket
 02175

DATE 11-6-07

COUNTY Bouco CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. VOGEL 36-3 Injection CONTRACTOR M^cGowan Drilling

KIND OF JOB LongString SEC. _____ TWP. _____ RNG. _____

DIR. TO LOC. 1st Job of 2 OLD NEW

Quantity	MATERIAL USED	Serv. Charge	700.00
75 SKS	Quick Set cement		1036.50
100 lbs.	Gel Flush		18.00
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4.13 Ton	BULK TRK. MILES		353.12
90	PUMP TRK. MILES		247.50
CONSERVATION DIVISION WICHITA, KS			
1	PLUGS 2 7/8" Top Rubber		15.00
			6.3% SALES TAX
			67.38
			TOTAL
			2437.50

T.D. 472'
 SIZE HOLE 6 1/4"
 MAX. PRESS. _____
 PLUG DEPTH _____
 PLUG USED 2 7/8" Top Rubber

CSG. SET AT _____ VOLUME _____
 TBG SET AT 465' VOLUME 2.69
 SIZE PIPE 2 7/8" 8^{rod}
 PKER DEPTH _____
 TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, Pumped 10 Bbls water Ahead, 5 Bbl. Gel Flush, followed with 10 Bbl water Mixed 75 SKS Quick Set cement at 13.5 lb. #1/6oz (yield 1.45) shutdown - wash out pump & lines - Release Plug Displace Plug with 2 3/4 Bbls water, Final Pumping at 350 PSI - Bumped Plug to 1200 PSI - close Tubing w/ 1200 PSI Good cement returns to Surface with 3 1/2 Bbls slurry

"Thank you"

EQUIPMENT USED

NAME Dan Kimbelin UNIT NO. 185
Brad Butler
 HSI REP.

NAME Bryan UNIT NO. #91
called by Doug M^cGowan
 OWNER'S REP.