

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33397
 Name: Running Foxes Petroleum
 Address 1: 7060 S TUCSON WAY Suite B
 Address 2: _____
 City: CENTENNIAL State: CO Zip: 80112 + _____
 Contact Person: Kent Keppel
 Phone: (720) 889-0510
 CONTRACTOR: License # 5786
 Name: McGown Drilling
 Wellsite Geologist: Mark Machosky
 Purchaser: _____
 Designate Type of Completion:
 _____ New Well _____ Re-Entry _____ Workover
 _____ Oil _____ SWD _____ SIOW
 _____ Gas ENHR _____ SIGW
 _____ CM (Coal Bed Methane) _____ Temp. Abd.
 _____ 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. _____ Conv. to SWD
 _____ Plug Back: _____ Plug Back Total Depth
 _____ Commingled _____ Docket No.: _____
 _____ Dual Completion _____ Docket No.: _____
 _____ Other (SWD or Enhr.?) _____ Docket No.: _____

<u>9/16/2008</u>	<u>9/18/2008</u>	<u>TBD</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-011-23406-00-00
 Spot Description: _____
 NW - NE - SE - SW Sec. 36 Twp. 24 S. R. 23 East West
1135 Feet from North / South Line of Section
565 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Bourbon
 Lease Name: Vogel Well #: 16-36A-Inj
 Field Name: Devon
 Producing Formation: Bartlesville
 Elevation: Ground: 864' Kelly Bushing: _____
 Total Depth: 510 Plug Back Total Depth: 510
 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: _____
 feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Air II ncl 3-3-09
 (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: Landman Date: 1-14-2009
 Subscribed and sworn to before me this 14th day of January
 20 09
 Notary Public: Karla Peterson

KARLA PETERSON
 NOTARY PUBLIC
 STATE OF COLORADO
 My Commission Expires November 9, 2011

Date Commission Expires:
Nov. 9, 2011

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution (RR)
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JAN 15 2009

CONSERVATION DIVISION
 WICHITA, KS

Operator Name: Running Foxes Petroleum Lease Name: Vogel Well #: 16-36A-Inj
 Sec. 36 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 <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 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: Gamma Ray, Density Neutron, Dual Induction (logs previously sent in with U-1form)	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input 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</td> <td>130'</td> <td>734'</td> </tr> <tr> <td>Upper Bartlesville</td> <td>350'</td> <td>514'</td> </tr> <tr> <td>Mlississippiian</td> <td>498'</td> <td>366'</td> </tr> </table>	Name	Top	Datum	Excello	130'	734'	Upper Bartlesville	350'	514'	Mlississippiian	498'	366'
Name	Top	Datum											
Excello	130'	734'											
Upper Bartlesville	350'	514'											
Mlississippiian	498'	366'											

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	12.25"	8 5/8"	24lbs.	21'	Quickset	20	Kol-Seal
Production	6.75"	2 7/8"	10.5lbs	502'	Quickset	68	Kol-Seal Gel

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>
	well not perfed yet	well not fraced yet

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TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed 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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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 WICHITA, KS**

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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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*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
 Madlson, KS 66860

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

Cement, Acid or Tools
Service Ticket
02765

DATE 9-22-08

COUNTY BOLCO CITY _____

CHARGE TO Pumping Forces
 ADDRESS _____ CITY _____ ST _____ ZIP _____
 LEASE & WELL NO. VOSEL "16-36A JWS CONTRACTOR Hurricane Service
 KIND OF JOB Logging SEC. _____ TWP. _____ RNG. _____
 DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge
		700.00
68 sks	QuickSet cement	979.20
270 lbs	KOI-SEAL 4" PYSK	81.00
100 lbs	Gel Flush	20.00
2 Hrs	Water Truck "88	160.00
2 Hrs	Water Truck "193	160.00
	Rental on Swivel	50.00
3.9 Tons	BULK TRK. MILES	386.10
	PUMP TRK. MILES <u>Trk. in field</u>	N/C
1	PLUGS <u>2 7/8" Top Rubber Plug</u>	15.00
		6.3% SALES TAX
		68.99
		TOTAL
		2620.29

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T.D. 510'
 SIZE HOLE 6 1/4"
 MAX. PRESS. _____
 PLUG DEPTH _____
 PLUG USED _____

CSG. SET AT _____ VOLUME _____
 TBG SET AT 502' VOLUME 2.9 Bbls
 SIZE PIPE 2 7/8" - 8 1/2"
 PKER DEPTH _____
 TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, washed Tubing to bottom. Pumped 5 Bbl Gel Flush, circulate Gel around to condition Hole. Rig up Cement Head. Mixed 68 sks QuickSet cement w/ 1" 1 1/4" KOI-SEAL shut down - wash out Pump Lines - Release Plug - Displace Plug with 3 Bbls water. Final Pumping @ 250 PSI - Bumped Plug to 1000 PSI - close Tubing w/ 1000 PSI. Good cement returns with 3 Bbl slurry. "Thank you"

EQUIPMENT USED

NAME	UNIT NO.	NAME	UNIT NO.
<u>Kelly Klueber</u>	<u>185</u>	<u>Jerry "186, Clayton "193, Adam "88</u>	
<u>Brad Butler</u>		<u>Called by Rick</u>	
HSI REP.		OWNER'S REP.	