

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: (303) 617-7242
CONTRACTOR: License # 31280
Name: Birk Petroleum
Wellsite Geologist: Greg Bratton
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.)

API No. 15 - 15-011-23427-00-00
Spot Description: _____
NW NW SW SE Sec. 36 Twp. 24 S. R. 23 East West
1310 Feet from North / South Line of Section
2340 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Vogel Well #: 15-36B-2
Field Name: Wildcat
Producing Formation: Bartlesville
Elevation: Ground: 870' Kelly Bushing: _____
Total Depth: 515 Plug Back Total Depth: 515
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 Alt II nr 3-6-09
(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: [Handwritten Signature]
Title: Landman Date: 1-21-2009
Subscribed and sworn to before me this 21st day of January
20 09
Notary Public: [Handwritten Signature]

Date Commission Expires: Nov. 9, 2011
KARLA PETERSON
NOTARY PUBLIC
STATE OF COLORADO
My Commission Expires November 9, 2011

KCC Office Use ONLY
N Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Operator Name: Running Foxes Petroleum Lease Name: Vogel Well #: 15-36B-2
 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 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: Density Neutron, Dual Induction	<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>156'</td> <td>714'</td> </tr> <tr> <td>Upper Bartlesville</td> <td>369'</td> <td>501'</td> </tr> <tr> <td>Mississippian</td> <td>505'</td> <td>365'</td> </tr> </table>	Name	Top	Datum	Excello	156'	714'	Upper Bartlesville	369'	501'	Mississippian	505'	365'
Name	Top	Datum											
Excello	156'	714'											
Upper Bartlesville	369'	501'											
Mississippian	505'	365'											

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	12.25"	8.625	24lbs.	21'	Quickset	12	KolSeal
Production	6.75"	4.5"	10.5lbs.	506'	Quickset	65	KolSeal Gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" 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
		RECEIVED KANSAS CORPORATION COMMISSION JAN 23 2009 CONSERVATION DIVISION WICHITA, KS

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

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# 105290
Shop # 620 437-2881
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
02786

DATE 9-30-08

COUNTY BOUCCO CITY _____

CHARGE TO Running Force
ADDRESS _____ CITY _____ ST _____ ZIP _____
LEASE & WELL NO. VOGEL 15-36B-2 CONTRACTOR Bulk Well Serv
KIND OF JOB Longstring SEC. _____ TWP. _____ RNG. _____
DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge
65 SKs	Quick Set cement	700.00
260 lbs	KOI-SEAL 4" P/SK	936.00
		78.00
100 lbs	Gel Flush	20.00
2 1/2 Hrs	water Truck #193	200.00
90	mileage and Tick #107	135.00
	BULK CHARGE	
3.75 Trk	BULK TRK. MILES	371.25
90	PUMP TRK. MILES	270.00
	Rental on wire line	50.00
1	PLUGS 4 1/2" Top Rubber	35.00
		67.35
		TOTAL 2862.60

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 23 2009

CONSERVATION DIVISION
WICHITA, KS 672 SALES TAX
TOTAL

T.D. _____ CSG. SET AT 506' VOLUME 8 Bbls
SIZE HOLE 6 3/4" TBG SET AT _____ VOLUME _____
MAX. PRESS. _____ SIZE PIPE 4 1/2"
PLUG DEPTH _____ PKR DEPTH _____
PLUG USED _____ TIME FINISHED _____

REMARKS: Rig up to 4 1/2" casing, Break circulation with 10 Bbls water, 5 Bbl Gel Flush, Saltwater with 20 Bbls water. Mixed 65 SKs Quick Set cement w/ 4" P/SK of KOI-SEAL. Shut down - wash out Pump - Release Plug - Displace Plug with 8 Bbls water. Final Pumping at 300 PSI - Pump Plug to 800 PSI - wait 2 minutes - Release Pressure - Float Held close casing w/ 0 PSI. Good cement returns to surface w/ 4 Bbls slurry

EQUIPMENT USED

NAME UNIT NO. NAME UNIT NO.
Kelly Kimberlin "185" Rodger #91, Adam #193
Brad Butler HSI REP. called by Rick OWNER'S REP.

FEP ID#
MC ID # 165290
Shop # 820 437-2881
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
02786

COPY

DATE 9-30-08

COUNTY BOUCCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. VOGEL 15-36B-2 CONTRACTOR Bulk Well Serv

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

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge
65 SKS	Quick Set cement	700.00
260 lbs	KOL-SEAL 4" P/SK	936.00
		78.00
100 lbs	Gel Flush	20.00
2 1/2 Hrs	water Truck #193	200.00
90	mileage and TRK #107	135.00
	BULK CHARGE	
		RECEIVED KANSAS CORPORATION COMMISSION
3.75 Trk	BULK TRK. MILES	JAN 23 2009 371.25
90	PUMP TRK. MILES	270.00
	Rental on wire line	CONSERVATION DIVISION WICHITA, KS 50.00
1	PLUGS 4 1/2" Top Rubber	35.00
		6.32 SALES TAX 67.35
		TOTAL 2862.60

T.D. _____

SIZE HOLE 6 3/4"

MAX. PRESS. _____

PLUG DEPTH _____

PLUG USED _____

CSG. SET AT 506' VOLUME 8 Bbls

TBG SET AT _____ VOLUME _____

SIZE PIPE 4 1/2"

PKER DEPTH _____

TIME FINISHED _____

REMARKS: Rig up to 4 1/2" casing, Break circulation with 10 Bbls water, 5 BW Gel Flush, Setback with 20 Bbls water. Mixed 65 SKS Quick Set cement w/ 4" P/SK of KOL-SEAL. Shut down - wash out Pump & lines - Release Plug - Displace Plug with 8 Bbls water. Final Pumping at 300 PSI - Bump Plug to 800 PSI - wait 2 minutes - Release Pressure - Float Held close casing w/ 0 PSI. Good cement returns to surface w/ 4 Bbls slurry.

EQUIPMENT USED

NAME Kelly Kimberlin UNIT NO. 185
Brad Butler
HSI REP.

NAME Rodger #91, Adam #193 UNIT NO. _____
called by Rick
OWNER'S REP.

FED ID#
 MC ID# 785290
 Shop # 820 437-2881
 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
 02786

COPY

DATE 9-30-08

COUNTY BOHCO CITY _____

CHARGE TO Running Force
 ADDRESS _____ CITY _____ ST _____ ZIP _____
 LEASE & WELL NO. VOGEL 15-36B-2 CONTRACTOR Birk Well Serv
 KIND OF JOB Logstring SEC. _____ TWP. _____ RNG. _____
 DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
65 SKs	Quick Set cement	700.00	
260 lbs	KOI-SEAL 4" P/SK	936.00	
		78.00	
100 lbs	Gel Flush	20.00	
2 1/2 Hrs	water Truck #193	200.00	
90	mileage and Trk #107	135.00	
	BULK CHARGE		
			RECEIVED
3.75 Trk	BULK TRK. MILES		KANSAS CORPORATION COMMISSION
90	PUMP TRK. MILES	371.25	
		270.00	JAN 23 2009
	Rental on wire line	50.00	
1	PLUGS 4 1/2" Top Rubber	35.00	CONSERVATION DIVISION WICHITA, KS
		67.35	6.72 SALES TAX
		2862.60	TOTAL

T.D. _____ CSG. SET AT 506' VOLUME 8 Bbls
 SIZE HOLE 6 3/4" TBG SET AT _____ VOLUME _____
 MAX. PRESS. _____ SIZE PIPE 4 1/2"
 PLUG DEPTH _____ PKER DEPTH _____
 PLUG USED _____ TIME FINISHED _____

REMARKS: Rig up to 4 1/2" casing, Break circulation with 10 Bbls water, 5 Bbl Gel Flush, Salt water with 20 Bbls water. Mixed 65 SKs Quick Set cement w/ 4" P/SK of KOI-SEAL. Shutdown - wash out Pump & lines - Release Plug - Displace Plug with 8 Bbls water.
Final Pumping at 300 PSI - Bump Plug to 800 PSI - wait 2 minutes - Release Pressure - Float Held close casing w/ 0 PSI Good cement returns to surface w/ 4 Bbls slurry

EQUIPMENT USED

NAME	UNIT NO.	NAME	UNIT NO.
<u>Kelly Kimberlin</u>	<u>185</u>	<u>Rodger #91, Adam #193</u>	
<u>Brad Butler</u>		<u>called by Rick</u>	
HSI REP.		OWNER'S REP.	