

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

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 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>7/18/04</u>	<u>7/19/04</u>	<u>8/30/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 011-22983-00-00
County: Bourbon
SE NE Sec. 16 Twp. 25 S. R. 23 East West
1900 feet from S N (circle one) Line of Section
600 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: French Well #: A-8-16
Field Name: Wildcat

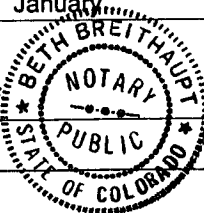
Producing Formation: _____
Elevation: Ground: 900 Kelly Bushing: _____
Total Depth: 210 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at _____ Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) P+A KGR 2/26/08
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: **RECEIVED**
KANSAS CORPORATION COMMISSION
Operator Name: _____ **JAN 21 2005**
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. **CONSERVATION DIVISION**
WICHITA, KS
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: 1/18/05
Subscribed and sworn to before me this 18th day of January,
2005.
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

Operator Name: Running Foxes Petroleum Inc. Lease Name: French Well #: A-8-16
 Sec. 16 Twp. 25 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 (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: Gamma Ray / Neutron / CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name <u>Cherokee</u> Top <u>130</u> Datum <u>770</u>
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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	9-5/8	8-5/8	24	20	Class A	4	None

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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	210	Class A	40	

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	

TUBING RECORD	Size <u>N/A</u>	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 Bbls.	Gas Mcf	Water Bbls.	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 _____



CONSOLIDATED

OIL WELL SERVICES
AN INFINITY COMPANY

TICKET NUMBER **24247**

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

LOCATION Chanute

FIELD TICKET

8-16

DATE <i>7/14/04</i>	CUSTOMER ACCT #	WELL NAME <i>French</i>	QTR/QTR	SECTION	TWP	RGE	COUNTY <i>Rawlson</i>	FORMATION
CHARGE TO <i>Running Fox</i>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
<i>5401</i>	<i>1 Well</i>	<i>PUMP CHARGE Cement Pump</i>		<i>525⁰⁰</i>
<i>1178</i>	<i>4 Sack</i>	<i>Prem Gel 2 Ahead of Job 2 In Cement</i>	<i>11²⁰</i>	<i>47²⁰</i>
<i>1107</i>	<i>2 Sack</i>	<i>FloSack 1</i>	<i>37¹⁵</i>	<i>75⁵⁰</i>
<i>14404</i>	<i>1</i>	<i>4 1/2 Rubber Plug</i>	<i>27⁰⁰</i>	<i>27⁰⁰</i>
<i>1123</i>	<i>3000 Gal</i>	<i>CITY Water Per 1000 Gal</i>	<i>11²⁵</i>	<i>33⁷⁵</i>
<i>5407</i>	<i>min milage</i>	BLENDING & HANDLING TON-MILES <i>Delivery</i> STAND BY TIME	<i>190⁰⁰</i>	<i>190⁰⁰</i>
<i>5501</i>	<i>3 hr</i>	MILEAGE WATER TRANSPORTS VACUUM TRUCKS	<i>75⁰⁰</i>	<i>225⁰⁰</i>
<i>1124</i>	<i>117 sack</i>	FRAC SAND RECEIVED KANSAS CORPORATION COMMISSION JAN 21 2005 CEMENT	<i>6⁰⁰</i>	<i>772²⁰</i>
		SALES TAX <i>100⁰⁰</i>		<i>772²⁰</i>
		CONSERVATION DIVISION WICHITA, KS		<i>772²⁰</i>
		ESTIMATED TOTAL		<i>1955⁸⁶</i>

Revin 2750

CUSTOMER OR AGENTS SIGNATURE *[Signature]*

CIS FOREMAN *Dwayne*

CUSTOMER OR AGENT (PLEASE PRINT) _____ DATE *189761*

