

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

Operator: License # 33397
Name: Running Foxes Petroleum Inc.
Address: 7060-B So. Tucson Way
City/State/Zip: Centennial, CO 80112
Purchaser: Seminole Energy
Operator Contact Person: Carol Sears
Phone: (303) 671-7242
Contractor: Name: HAT Drilling
License: 33734
Wellsite Geologist: Brian Walsh

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. _____

5/18/07	5/18/07	5/18/07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 011-23258-00-00
County: Bourbon
C SW NE Sec. 36 Twp. 24 S. R. 23 East West
1980 feet from S / N (circle one) Line of Section
1980 feet from E / W (circle one) Line of Section

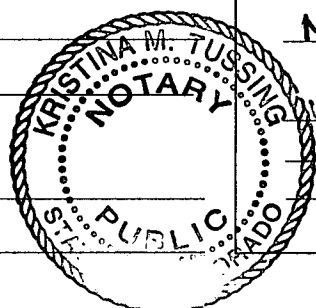
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Graham Well #: 7-36 CBM
Field Name: Ft Scott
Producing Formation: N/A
Elevation: Ground: 890' Kelly Bushing: _____
Total Depth: 126' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at _____ 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 PA AH II NH 7-14-08
(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: Carol Sears
Title: Land Administrator Date: 7/18/07
Subscribed and sworn to before me this 18 day of July
20 07
Notary Public: Kristina M. Tussing
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

RECEIVED
KANSAS CORPORATION COMMISSION
JUL 24 2007

Operator Name: Running Foxes Petroleum Inc. Lease Name: Graham Well #: 7-36 CBM
 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 <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 checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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		removed					
Production							

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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>	Depth

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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas	METHOD OF COMPLETION	Production Interval	RECEIVED
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____		KANSAS CORPORATION COMMISSION
			JUL 24 2007

FED ID #
 Shop # (620) 437-2661
 Cellular # (620) 437-7582
 Office # (316) 685-5908
 Office Fax # (316) 685-5926

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

MC ID # 165290

Shop Address: Route 1
 Madison, KS 66860

Customer:
 RUNNING FOXES PETROLEUM INC.
 7060-B SOUTH TUCSON WAY
 CENTENNIAL CO 80112

Invoice Date 5/21/2007
 Invoice # 8338
 Lease Name FT SCOTT PROJECT
 Well # GRAHAM 7 - 36CBM
 County:

Date	Description	Hrs/Qty	Rate	Total
5/18/2007	Drove to location, rigged up and plugged to abandon well per attached Service ticket #T1868.			
	Regular Class A cement	40.00	10.73	429.20T
	Gel 2%	75.00	0.18	13.50T
	Calcium Chloride 2%	75.00	0.42	31.50T
	Flocele 1/4# per sack	10.00	1.75	17.50T
	Bulk truck mileage	1.00	167.58	167.58
	Pump Charge	1.00	400.00	400.00
	Pump truck mileage - N/C			

Sales Tax (6.3%) \$30.98

Total \$1,090.26

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!

RECEIVED
 KANSAS CORPORATION COMMISSION

JUL 24 2007

CONSERVATION DIVISION
 WICHITA, KS

FED ID #
 Shop# (620) 437-2661
 Shop Fax # (620) 437-2881
 Office # (316) 685-5908 *Wichita*
 Office Fax # (316) 685-5926 *Lila*

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

Lic. #

Shop Address: Route 1
 Madison, KS 66860

Customer:

RUNNING FOXES PETROLEUM INC.
 7060-B SOUTH TUCSON WAY
 CENTENNIAL CO 80112

Invoice Date 5/21/2007
 Invoice # 6172
 Lease Name GRAHAM
 Well # 7 - 36 CBM
 County BOURBON

Date	Description	HRS/QTY	Rate	Total
5/18/2007	Drove to location. Rigged up. Ran 3 jts of 2 3/8" tubing in well to plug surface hole - cemented. Rigged down and drove to shop per attached work ticket #19400 of Rig #5.	5.00	140.00	700.00

Sales Tax (6.3%) \$44.10

Total \$744.10

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

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 KANSAS CORPORATION COMMISSION

JUL 24 2007

CONSERVATION DIVISION
 WICHITA, KS