

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: 7060B South Tucson Way
 City/State/Zip: Centennial, CO 80112
 Purchaser: _____
 Operator Contact Person: Steven Tedesco
 Phone: (303) 617-7242
 Contractor: Name: McGowan 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>6/26/2007</u>	<u>7/14/2007</u>	<u>TBA</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

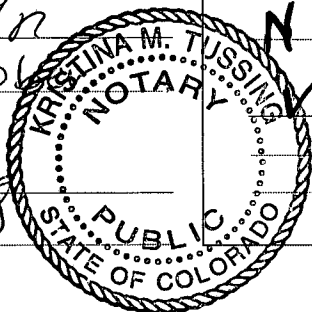
API No. 15 - 011-23283-0000
 County: Bourbon
NW NW NE NE Sec. 1 Twp. 25 S. R. 23 East West
330 feet from S N (circle one) Line of Section
2310 feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Vogel Well #: 2-1B
 Field Name: Wildcat
 Producing Formation: Bartlesville
 Elevation: Ground: 844' Kelly Bushing: NA
 Total Depth: 502' 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 AH 7 NH 7-23-08
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used air dry
 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: President Date: 10/18/07
 Subscribed and sworn to before me this 18th day of October
 2007
 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
RECEIVED
 KANSAS CORPORATION COMMISSION
OCT 22 2007
 CONSERVATION DIVISION
 WICHITA, KS

Operator Name: Running Foxes Petroleum Inc. Lease Name: Vogel Well #: 2-1B
 Sec. 1 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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input 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:	<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>139'</td> <td>705'</td> </tr> <tr> <td>Upper Bartlesville</td> <td>346'</td> <td>498'</td> </tr> <tr> <td>Mississippian</td> <td>479'</td> <td>365'</td> </tr> </table>	Name	Top	Datum	Excello	139'	705'	Upper Bartlesville	346'	498'	Mississippian	479'	365'
Name	Top	Datum											
Excello	139'	705'											
Upper Bartlesville	346'	498'											
Mississippian	479'	365'											

Density Neutron, Dual Induction, Gamma Ray

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 5/8"	24 LBS	42'	Quickset	20	Kolseal
Production	6 3/4"	4 1/2"	10.5 LBS	502'	Thickset	57	Kolseal/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 (Amount and Kind of Material Used)	Depth
	Waiting on Completion		

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WICHITA, KS

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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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
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Disposition of Gas	METHOD OF COMPLETION	Production Interval
<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) _____	

CONSOLIDATED OIL WELL SERVICES, INC.
P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 15530
LOCATION otxawa
FOREMAN Alan Mader

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-16-07	6960	Vogel 2-1B	36	24	23	BB

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Running Foxes Mailing Address 7060 B S Tucson Way City Centennial State CO Zip Code 80112	516	Alan M		
	164	Rick A		
	365	Gary A		
	122	Tabor H		

JOB TYPE long string HOLE SIZE 6 3/4 HOLE DEPTH 502 CASING SIZE & WEIGHT 5 1/2
 CASING DEPTH 492 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 7 3/4 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS: Established rate. Mixed & pumped 200# gel to flush hole. Mixed & pumped 3 bbl dye followed by 57 ex Thickset cement with 5# Kolseal, 1/4# flo-seal. Circulated dye to surface. Flushed pump clean. Pumped 4 1/2 plug to TD of casing. Circulated cement to surface. Checked depth with wire line. Well held 600 PSI. Set float.

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	164	840.00
5406	70	MILEAGE	164	231.00
5402	492'	casing footage	164	N/C
5407A	1/2 min	ton miles	122	142.50
5502C	2	80 val	369	180.00
1110A	285#	Kolseal		108.30
1107	14#	flo-seal		26.60
1118B	200 #	gel		30.00
1126A	540#	Thickset cement	831.60	245.20
4404	1	1/2 plug		40.00
				<u>2430</u>

RESERVATION DIVISION
WICHITA, KS
OCT 22 2007
Sub

AUTHORIZATION Frank Drenning TITLE Well 214775 SALES TAX 65.3
 ESTIMATED TOTAL 2495.
 DATE 7/16/07

CEMENTING WORK ORDER

CONSOLIDATED OIL WELL SERVICES, LLC
Phone (620) 431-9210 Chanute, Kansas 66720

DAY Monday
DATE 7/16/2007
Month / Day / Time

NAME OF CUSTOMER: Running Foxes

LEASE # vogel WELL # 2-1B

JOB DESCRIPTION: longstring

PIPE SIZE 4 1/2 SIZE OF HOLE: 6 3/4

DEPTH OF WELL: 502

TYPE OF RIG: AIR MUD

AMOUNT OF CEMENT NEEDED 57 sks Thickset

% OF GEL NEEDED: _____

MATERIALS: 54 sks cem, 285# kolseal, 14# floseal, 114# gel

TRUCKS: VAC TRANSPORT

LOCATION OF JOB: _____

516-AM, 164-RA, 369-GA, 122-JH

ORDER TAKEN BY: Jim Green

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