

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 **CONFIDENTIAL**
CONTRACTOR: License # 31280 APR 27 2009
Name: Birk Petroleum
Wellsite Geologist: Greg Bratton **KCB**
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.: _____
1/14/2009 1/17/2009 1/19/2009
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-011-23475-00-00
Spot Description: _____
SE SW SE SE Sec. 36 Twp. 24 S. R. 23 East West
185 Feet from North / South Line of Section
915 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Vogel Well #: 16-36C Inj 2
Field Name: Devon
Producing Formation: Bartlesville
Elevation: Ground: 842' Kelly Bushing: _____
Total Depth: 500' Plug Back Total Depth: 483'
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/ AWZ-Dlg-5/22/09 ^{sq} cmt.

Drilling Fluid Management Plan
(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: Landsman Date: 4-27-2009
Subscribed and sworn to before me this 27th day of April

20 09
Notary Public: [Signature]
KARLA PETERSON
NOTARY PUBLIC
STATE OF COLORADO
Date Commission Expires: _____
My Commission Expires November 9, 2011

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received **KANSAS CORPORATION COMMISSION**
 UIC Distribution (508)
APR 29 2009

RECEIVED