

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, Inc.
Address 1: 7060-B S. Tucson Way
Address 2: _____
City: Centennial State: CO Zip: 80112 + _____
Contact Person: Kent Keppel
Phone: (720) 889-0510
CONTRACTOR: License # 5786
Name: McGown Drilling
Wellsite Geologist: Greg Bratton
Purchaser: _____

Designate Type of Completion:
_____ New Well _____ Re-Entry _____ Workover
_____ Oil _____ SWD _____ SLOW
_____ 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.: _____
2/5/2009 2/6/2009 waiting on completion
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 011-23500-00-00
Spot Description: _____
NW SE SE NW Sec. 36 Twp. 24 S. R. 23 East West
2160 Feet from North / South Line of Section
2150 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Graham Well #: 6-36C-INJ
Field Name: Wildcat
Producing Formation: Bartlesville
Elevation: Ground: 882' Kelly Bushing: _____
Total Depth: 572' Plug Back Total Depth: 553'
Amount of Surface Pipe Set and Cemented at: 22.5' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 553
feet depth to: 0 w/ 75 ^{SX CRT.}
ATP 2 - Dlg - 6/29/09

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: Kent Keppel
Title: Landman Date: 6-4-2009
Subscribed and sworn to before me this 4th day of June

20 09
Notary Public: Karla Peterson

KARLA PETERSON
NOTARY PUBLIC
STATE OF COLORADO
My Commission Expires November 9, 2011

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
JUN 05 2009

KCC WICHITA

Operator Name: Running Foxes Petroleum, Inc. Lease Name: Graham Well #: 6-36C-INJ
 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction, Compensated Neutron, Gamma Ray	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum Excello 177' 705' Bartlesville 405' 477' Mississippian 526' 356'
---	--

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	10.625"	7"	15 lbs.	22.5'	Quickset	15	Quickset
Production	6.25"	2.875"	6.5 lbs	553'	Quickset	73	Kol-Seal 4%

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

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: _____ _____
---	--	--

FED ID#
 MC ID # 165290
 Shop # 620 437-2661
 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
 3004

DATE 2-17-09

COUNTY BOLCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Graham # 6-36C INS. CONTRACTOR _____

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

DIR. TO LOC. 2nd well of 2 OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
73 SKs	Quick Set cement		1204.50
290 lbs	KOL-SEAL 4" P-1/SK		130.50
100 lbs	GeL > Flush Ahead		25.00
3 Hrs.	Water Truck #94 ✓		240.00
	BULK CHARGE		
4.21 Ton	BULK TRK. MILES		416.79
0	PUMP TRK. MILES Trk. Infield		N/C
	Rental on wireline		50.00
1	PLUGS 2 7/8" Top Rubber		17.00
		6.37% SALES TAX	86.75
		TOTAL	2870.54

T.D. 5.72 CSG. SET AT _____ VOLUME _____

SIZE HOLE _____ TBG SET AT 553 VOLUME 3.2 Bbls

MAX. PRESS. _____ SIZE PIPE 2 7/8" - 8th

PLUG DEPTH _____ PKER DEPTH _____

PLUG USED _____ TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, Break circulation with fresh water, 5 Bbl. GeL Flush, followed with 10 Bbl. water, Mixed 73 SKs. Quick Set cement w/ 4" KOL-SEAL. Shutdown wash out Pump & Lines - Release Plug - Displace Plug with 3 1/4 Bbls water. Final Pumping at 350 PSI - Bumped Plug to 1000 PSI - close Tubing in w/ 1000 PSI Good cement returns w/ 3 Bbl. slurry

RECEIVED
 JUN 25 2009
 KCC WICHITA

EQUIPMENT USED

NAME <u>Kelly Kimberlin</u> ✓	UNIT NO. <u>185</u>	NAME <u>Jerry #186, Dave #94</u> ✓	UNIT NO. _____
<u>Brad Butler</u>	HSI REP.	<u>Witnessed by Rick</u>	OWNER'S REP.