

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: HAT Drilling
License: 33734
Wellsite Geologist: Greg Bratton

Designate Type of Completion:
____ New Well ____ Re-Entry ____ Workover
 Oil ____ SWD ____ SIOW ____ Temp. Abdr.
____ 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. _____

7/24/2007	7/25/2007	TBA
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 011-23267-0000
County: Bourbon
SW SE NW Sec. 36 Twp. 24 S. R. 23 East West
2310 feet from S N (circle one) Line of Section
1850 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 #: 6-36C
Field Name: Wildcat

Producing Formation: Bartlesville
Elevation: Ground: 875' Kelly Bushing: NA
Total Depth: 556 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 II NR 1-13-09
(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
20 07.
Notary Public: [Signature]
Date Commission Expires: 5-22-08



KCC Office Use ONLY

Letter of Confidentiality Received **RECEIVED**
If Denied, Yes Date _____ KANSAS CORPORATION COMMISSION
Wireline Log Received
Geologist Report Received **OCT 22 2007**
LIC Distribution
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Running Foxes Petroleum Inc. Lease Name: Graham Well #: 6-36C
 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 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: Gamma Ray, Density Neutron, Dual Induction	<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>171'</td> <td>704'</td> </tr> <tr> <td>Upper Bartlesville</td> <td>378'</td> <td>497'</td> </tr> <tr> <td>Mississippian</td> <td>520'</td> <td>355'</td> </tr> </table>	Name	Top	Datum	Excello	171'	704'	Upper Bartlesville	378'	497'	Mississippian	520'	355'
Name	Top	Datum											
Excello	171'	704'											
Upper Bartlesville	378'	497'											
Mississippian	520'	355'											

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	70	Quickset	40	Kolseal
Production	6 3/4"	4 1/2"	10.5 LBS	545	Quickset	75	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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TUBING RECORD		Size	Set At	Packer At	Liner Run			
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 _____

FED ID#
 MC ID # 156212
 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 Truck Services, Inc.
 P.O. Box 782228
 Wichita, KS 67278-2228

Cement and Acid
 Service Ticket
 T 1968

DATE 7-26-07

COUNTY BOUCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Graham 6-36C CONTRACTOR HATS Dils.

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

DIR. TO LOC. 1st Job of 4 OLD NEW

Quantity	MATERIAL USED	Serv. Charge	700.00
75 SKs	Quick Set cement		1036.50
300 lbs	KOI-SEAL 4 ² P/SK		75.00
100 lbs.	Gel Flush		18.00
	BULK CHARGE		
4.28 ^{Tow}	BULK TRK. MILES		365.94
90	PUMP TRK. MILES		247.50
1	PLUGS 4 1/2" Top Rubber		35.00
		6.3% SALES TAX	73.36
		TOTAL	2551.30

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T.D. 556'
 SIZE HOLE 6 3/4"
 MAX. PRESS. _____
 PLUG DEPTH _____
 PLUG USED _____

CSG. SET AT 545' VOLUME 8.67 Bbls
 TBG SET AT _____ VOLUME _____
 SIZE PIPE 4 1/2" - 10.5 lb.
 PKER DEPTH _____
 TIME FINISHED _____

REMARKS: Rig up to 4 1/2" casing, Break circulation w/ 5 Bbl. water, 5 Bbl. Gel Flush, followed with 15 Bbl. water spacer. Mixed 75 SKs Quick Set cement w/ 4²P/SK of KOI-SEAL at 13.8 lb. P²/GAL. Shut down - wash out pump & lines - Release plug - Displace plug with 8 1/2 Bbls. water. Final Pumping at 350 PSI - Pump Plug to 1000 PSI - wait 2 min - Release Pressure - Float Held close casing in w/ 0 PSI Good cement returns to surface w/ 4 Bbl. slurry

EQUIPMENT USED

NAME Dave Kimbark UNIT NO. 185
Brad Butler
 CEMENTER OR TREATER

NAME Bryan #186 - J. Barr UNIT NO. #91
called by Randy
 OWNER'S REP.