

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

11/03/11

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
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: Joe Taglieri
Purchaser: _____
Designate Type of Completion:
 New Well _____ Re-entry
 Oil _____ SWD _____
_____ Gas _____ ENHR _____
_____ CM (Coal Bed Methane) _____ Temp. _____
_____ Dry _____ Other _____
(Core, WSW, Expl., Cathodic, etc.)

API No. 15 - 011-23537-00-00
Spot Description: _____
SE NE NE NE Sec. 1 Twp. 25 S. R. 23 East West
620 Feet from North / South Line of Section
300 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Gross Well #: 1-1A-4
Field Name: Wildcat
Producing Formation: Bartlesville
Elevation: Ground: 958' Kelly Bushing: _____
Total Depth: 522' Plug Back Total Depth: 500'
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/ _____ sx cmt.

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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.: _____
7/28/2009 7/29/2009 waiting on completion
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

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: Mark Adams
Title: V.P. Engineering Date: 11-12-09
Subscribed and sworn to before me this 12th day of November
20 09
Notary Public: Kenton E. Keppel
Date Commission Expires: 11-13-2011

KENTON E. KEPPEL
NOTARY PUBLIC
STATE OF COLORADO
My Commission Expires November 13, 2011

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