

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED ORIGINAL
JUL 20 2010
Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

KCC WICHITA

OPERATOR: License # 33397
Name: Running Foxes Petroleum, Inc.
Address 1: 7060B 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 Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Cora, Expl., 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
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

3-2-2010 3-5-2010 waiting on completion
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 011-23642-00-00

Spot Description: _____

_____ NW NW Sec. 4 Twp. 24 S. R. 22 East West

660 Feet from North / South Line of Section

660 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Bourbon

Lease Name: Kellogg Well #: 4-4

Field Name: Bronson-Xenia

Producing Formation: Mississippian

Elevation: Ground: 1018' Kelly Bushing: _____

Total Depth: 903' Plug Back Total Depth: 888'

Amount of Surface Pipe Set and Cemented at: 21' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 903

feet depth to: Ø w/ 103 sx 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 #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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.

AFFIDAVIT

I am the affiant and I hereby certify that 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: 7-16-2010

KCC Office Use ONLY

Letter of Confidentiality Received
Date: _____

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: Dg Date: 7/22/10

Operator Name: Running Foxes Petroleum, Inc. Lease Name: Kellogg Well #: 4-4
 Sec. 4 Twp. 24 S. R. 22 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 complete copy of all Electric Wire-line 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray, Compensated Neutron | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Excello RECEIVED 452' 566' Bartlesville JUL 20 2010 730' 288' Mississippi KCC WICHITA 807' 211' |
|---|--|

| 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" | 8.625" | 24 lbs | 21' | Quickset | 4 | Class I / II |
| Production | 6.75" | 4.5" | 10.5 lbs | 903' | Quickset | 103 | 4% Kol-Seal |
| | | | | | | | |

| 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 <i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
| 4 | 438' - 442' / 17 perfs | | |
| 4 | 452' - 456' / 17 perfs | | |
| 4 | 800' - 803' / 13 perfs | | |
| | | | |

| | | | |
|---|-----------|---|-----------------------------------|
| 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 <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: _____ _____ |
|---|--|--|

Kellogg 4-4

Bourbon Co., KS

| Thickness of Strata | Formation | Total Depth | Remarks |
|---------------------|------------------|-------------|--------------------------|
| 0-2 | Sandstone | | |
| 2-38 | LIME | | |
| 38-46 | SHALE | | |
| 46-82 | LIME | | |
| 82-94 | SHALE | | |
| 94-122 | LIME | | RAW 887.80' 4 1/2 3-5-10 |
| 122-206 | BIG SHALE | | |
| 206-209 | LIME | | |
| 209-269 | SHALE | | |
| 269-274 | LIME | | |
| 274-347 | SHALE | | |
| 347-368 | LIME | | ON SAND @ 358-362 |
| 368-373 | SHALE | | |
| 373-378 | LIME | | |
| 378-421 | BL SHALE & SHALE | | |
| 421-435 | 20' LIME | | |
| 435-446 | BL SHALE & SHALE | | |
| 446-450 | 5' LIME | | |
| 450-455 | SHALE | | |
| 455-556 | Sand & Sandstone | | MINES UNDER |
| 556-557 | LIME | | |
| 557-724 | SHALE | | |
| 724-725 | COAL | | |
| 725-743 | SHALE | | |
| 743-744 | COAL | | |
| 744-802 | SHALE | | |
| 802-804 | COAL | | |

804-807 SHALE
807-903 MISS LIME

903 TD

RECEIVED
JUL 20 2010
KCC WICHITA

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
3662

DATE 3-5-10

COUNTY BOUCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Kellog # 4-4 CONTRACTOR McGowan Dalg.

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

DIR. TO LOC. _____ OLD NEW

| Quantity | MATERIAL USED | Serv. Charge | |
|-----------|-------------------------|----------------|-------------|
| | | 750.00 | |
| 103 SK | Quick Set cement | 1699.50 | |
| 412 lbs | KOL-SEAL 4" P/SK | 185.40 | |
| | | | RECEIVED |
| | | | JUL 20 2010 |
| 200 lbs | Gel > Flush Ahead | 50.00 | |
| 5 1/2 Hrs | water Truck | 440.00 | KCC WICHITA |
| 90 | Mileage on Trk #107 | 135.00 | |
| 5.96 Tons | BULK TRK. MILES | 590.04 | |
| 90 | PUMP TRK. MILES | 270.00 | |
| | Rental on winch line | 50.00 | |
| 1 | PLUGS 4 1/2" Top Rubber | 36.50 | |
| | | 6.3% SALES TAX | 124.20 |
| | | TOTAL | 4330.64 |

T.D. 903

CSG. SET AT 888 VOLUME 14 Bbls

SIZE HOLE 6 3/4"

TBG SET AT _____ VOLUME _____

MAX. PRESS. _____

SIZE PIPE 4 1/2"

PLUG DEPTH _____

PKER DEPTH _____

PLUG USED _____

TIME FINISHED _____

REMARKS: Big up to 4 1/2" casing. Break circulation with 5 Bbls water. 10 Bbl Gel Flush circulate. Gel around with fresh water to condition hole. Pumped 8 Bbls Dye water Ahead. Mixed 103 SKs Quickset cement w/ 4" KOL-SEAL. Shutdown-washout Pump & lines. Release Plug - Displace Plug with 14 Bbls water. Final Pumping @ 400 PSI - Pumped Plug to 1000 PSI - Release Pressure - Float Held. Close casing w/ O.P.S.I. Cement returns to surface w/ 4 Bbls slurry.

EQUIPMENT USED

NAME Kelly Kimberlin UNIT NO. 185
Brad Butler
HSI REP.

NAME Jerry #186, Jason #193 UNIT NO. _____
OWNER'S REP.