RECEIVED FEB 0 9 200 ONF IDENTIFY CORPORATION COMMISSION FEB 0 9 200 ONF IDENTIFY GAS CONSERVATION DIVISION

State: CO Zip: 80112 +

Workover

☐ slow

SIGW

Temp. Abd.

OPERATOR: License # 33397

Contact Person: Kent Keppel

CONTRACTOR: License # 34430

Wellsite Geologist: Chad Counts

Designate Type of Completion:

CM (Coal Bed Methane)

Address 1: Address 2:

City: Centennial

Phone: (_720_)

Purchaser: ___

Oil

☐ Gas

□ og

Operator: ___ Well Name: _

Original Comp. Date: _

Deepening

Plug Back:

Commingled

☐ SWD

☐ ENHR

☐ GSW

Recompletion Date

12-3-2010

Spud Date or

Dual Completion

New Well

Running Foxes Petroleum, Inc.

7060B S. Tucson Way

889-0510

CST Oil & Gas Corporation

D&A

Cathodic Other (Core, Expl., etc.): __
If Workover/Re-entry: Old Well Info as follows:

Re-Entry

SWD

✓ ENHR

GSW

Permit #:

Permit #: _

Permit #: ___

Permit #: _

12-3-2010

Date Reached TD

Original Total Depth: __

Re-perf. Conv. to ENHR Conv. to SWD

_ Plug Back Total Depth

12-3-2010

Completion Date or

Recompletion Date

Permit #: _____

ORIGINAL

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

117/12

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

API No. 15 - 011-23756-00-00	
Spot Description:	24
SE_NE_NE_SW Sec. 96 Twp. 24 S. R.	∡ 3 ☑ East ☐ West
Feet from North /	South Line of Section
2,320 Feet from East / 🗸	West Line of Section
Footages Calculated from Nearest Outside Section	Corner:
□ne □nw □se ☑sw	
County: Bourbon	
Lease Name: Gross	Well #: 11-6A Inj
Field Name: Devon	
Producing Formation: Bartlesville	
Elevation: Ground: 875' Kelly Bushin	g:
Total Depth: 425' Plug Back Total Depth: 40	09'
amount of Surface Pipe Set and Cemented at: $\frac{20}{100}$	Fee
fultiple Stage Cementing Collar Used?	No
yes, show depth set:	Feet
Alternate II completion, cement circulated from: _	
eet depth to:w/	sx cmt
Prilling Fluid Management Plan Data must be collected from the Reserve Pit)	
Chloride content:ppm Fluid volum	e: bbls
Dewatering method used:	
ocation of fluid disposal if hauled offsite:	
Operator Name:	
.ease Name: License #:_	
Quarter Sec TwpS. R	

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:	Tent:	Final	
Title: Landman	7000	Date: 2-7-2011	

KCC Office Use ONLY
Letter of Confidentiality Received Date: 2/7/11 - 2/7//3
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I I II Approved by: Date: