

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

4/27/09

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
Address 1: 7060 S TUCSON WAY Suite B
Address 2: _____
City: CENTENNIAL State: CO Zip: 80112 + _____
Contact Person: Kent Keppel **CONFIDENTIAL**
Phone: (303) 617-7242
CONTRACTOR: License # 5786 APR 27 2009
Name: McGown Drilling **KCC**
Wellsite Geologist: Greg Bratton

Designate Type of Completion:
____ New Well ____ Re-Entry ____ Workover
 Oil ____ SWD ____ SIOW
____ 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.: _____
1/22/2009 1/23/2009 1/30/2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-011-23481-00-00
Spot Description: _____
NW SE SW NW Sec. 6 Twp. 25 S. R. 24 East West
1990 Feet from North / South Line of Section
670 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Cleaver Well #: 5-6D-2
Field Name: Devon
Producing Formation: Bartlesville
Elevation: Ground: 898' Kelly Bushing: _____
Total Depth: 522' Plug Back Total Depth: 508'
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/ ATZ-Dg - 5/22/09 ^{px} 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 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: Landman Date: 4-27-2009
Subscribed and sworn to before me this 27th day of April
20 09
Notary Public: [Signature]
Date Commission Expires: _____

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
KANSAS CORPORATION COMMISSION
APR 29 2009

RECEIVED

Operator Name: Running Foxes Petroleum Lease Name: Cleaver Well #: 5-6D-2
 Sec. 6 Twp. 25 S. R. 24 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 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: Density Neutron, Dual Induction, Gamma Ray	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Excello 136' 762' Upper Bartlesville 347' 551' Mississippian 479' 419' <div style="text-align: right; font-size: 1.2em;"> KCC APR 27 2009 </div>
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CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used CONFIDENTIAL							
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"	24lbs.	21'	Quickset	12	KolSeal
Production	6.75"	4.5"	10.5lbs.	508'	Quickset	58	KolSeal Gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" 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>
	Waiting on records	
		KANSAS CORPORATION COMMISSION
		APR 29 2009
		RECEIVED

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: _____ _____
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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
 02970

DATE 1-30-09

COUNTY BOLCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Cleaver #5-60-2 CONTRACTOR _____

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

DIR. TO LOC. 1st Job of 3 OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
58 SKS	QuickSet cement		957.00
230 lbs	KOL-SEA2 4" P ² /SK		103.50
100 lbs	Gel > Flush Ahead		25.00
2 Hrs	Water Truck #193		160.00
90	mileage on Truck #107		135.00
	BULK CHARGE		
3.34 Ton	BULK TRK. MILES		330.66
90	PUMP TRK. MILES		270.00
	Rental on wireline		50.00
1	PLUGS 4 1/2" Top Rubber		36.50
		6.3% SALES TAX	70.68
		TOTAL	2838.34

T.D. _____ CSG. SET AT 508' VOLUME 8 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: Rig up to 4 1/2" casing, Break circulation with 10 Bbls water, 5 Bbl. Gel Flush, follow with 15 Bbls water, Mixed 58 SKS QuickSet cement w/ 4" KOL-SEA2, shut down, wash out Pump & lines - Release Plug - Displace Plug with 8 Bbls water, Final Pumping @ 300 PSI - Bumped Plug to 800 PSI - Release Pressure - Float Held close casing in w/ 0 PSI Good cement returns w/ 3 Bbl. slurry

EQUIPMENT USED

NAME	UNIT NO.	NAME	UNIT NO.
<u>Kelly Kimberlin</u>	<u>185</u>	<u>Rodger-Dave #186</u>	<u>Jason #193</u>
<u>Brad Butler</u>		<u>witnessed by Rick</u>	
HSI REP.		OWNER'S REP.	