

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

12/11/11

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 DEC 11 2009

Wellsite Geologist: Joe Taglieri

Purchaser: _____

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.: _____

8/25/2009 8/26/2009 9/14/2009

Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

API No. 15 - 011-23645-00-00

Spot Description: _____

SE SW SW NE Sec. 6 Twp. 25 S. R. 24 East West

2,410 Feet from North / South Line of Section

2,090 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Bourbon

Lease Name: Cleaver Well #: 7-6C-4

Field Name: Devon

Producing Formation: Bartlesville

Elevation: Ground: 865' Kelly Bushing: _____

Total Depth: 522' Plug Back Total Depth: 513'

Amount of Surface Pipe Set and Cemented at: 23' 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 Att # NJ 12 2309
(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: Mack Mad...

Title: V.P. Engineering Date: 12-11-2009

Subscribed and sworn to before me this 11th day of December

2009 Kenton E. Keppel

Notary Public: _____

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

RECEIVED

DEC 14 2009

KCC WICHITA

Operator Name: Running Foxes Petroleum, Inc. Lease Name: Cleaver Well #: 7-6C-4
 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 type="checkbox"/> Yes <input checked="" 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, Dual Induction, DSC Compensated Neutron	<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>99'</td> <td>766'</td> </tr> <tr> <td>Bartlesville</td> <td>314'</td> <td>551'</td> </tr> <tr> <td>Mississippian</td> <td>450'</td> <td>415'</td> </tr> </table>	Name	Top	Datum	Excello	99'	766'	Bartlesville	314'	551'	Mississippian	450'	415'
Name	Top	Datum											
Excello	99'	766'											
Bartlesville	314'	551'											
Mississippian	450'	415'											

CASING RECORD <input checked="" 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"	7.0"	15 lbs	23'	Quickset	12	Quickset
Production	6.25"	2.875"	6.5 lbs	522'	Quickset	65	Kol-Seal 4%

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
2	373' - 384' / 24 shots		

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 Bbbls. _____ Gas Mcf _____ Water Bbbls. _____	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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LEAVER 7-6C-4

Thickness of Strata	Formation	Total Depth	Remarks
0-1	SOIL		
1-21	LIME		RUN 514.25' 27/8 P-22-08
21-69	SHALE		
69-86	20' LIME		
86-95	BL. SHALE & SHALE		
95-99	5' LIME		
99-101	SHALE		
101-102	COAL		
102-204	SHALE		
204-205	LIME		
205-208	DK SHALE		
208-209	COAL		
209-310	SHALE	DEC 14 2009	
310-318	GRAY SAND		
318-369	SHALE		
369-372	SAND LIGHT OIL SHOW		
372-385	BELOW SAND ^{SOME} ^{GRAY} ^{SHALE} ^{SHOW}		
385-397	SAND & SHALE SAND OIL		
397-398	COAL		
398-441	SHALE		
441-442	COAL		MAKES GAS
442-448	SHALE		
448-522	MIST LIME		

TD 522

RECEIVED
 DEC 14 2009
 KCC WICHITA

FED ID#
 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
 3385

DATE 8-31-09

COUNTY BOUCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Cleaver # 7-6C-4 CONTRACTOR M^cGowan Drilling

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

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
65 SKs	Quick Set cement		1,072.50
260 lb.	KOI-SEAL 4" 1 1/2" SK		117.00
100 lb.	Gel > Flush Ahead		25.00
3 Hrs	Water Truck #193		240.00
	BULK CHARGE		
3.75 Trks	BULK TRK. MILES	RECEIVED	371.25
0	PUMP TRK. MILES <u>Trk Infield</u>	DEC 14 2009	M/C
	Rental on wireline		50.00
1	PLUGS 2 7/8" Top Rubber	KCC WICHITA	17.00
		6.3% SALES TAX	77.58
		TOTAL	2670.33

T.D. _____

SIZE HOLE _____

MAX. PRESS. _____

PLUG DEPTH _____

PLUG USED _____

CSG. SET AT _____ VOLUME _____

TBG SET AT 513' VOLUME 2.97 Bbls

SIZE PIPE 2 7/8" - 8#

PKER DEPTH _____

TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, Break circulation with 10 Bbls water, 5 Bbl. Gel Flush, followed with 15 Bbls water, Mixed 65 SKs. Quick Set cement w/ 4" KOI-SEAL. Shut down - washout Pump lines - Release Plug - Displace Plug with 3 Bbls water, Final Pumping @ 300 PSI - Pumped Plug to 1100 PSI - close Tubing w/ 1100 PSI Good cement returns w/ 2 1/2 Bbl. Slurry

EQUIPMENT USED

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

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