

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

12/04/11

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

Wellsite Geologist: _____

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.: _____

8/11/2009 8/12/2009 waiting on completion

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

API No. 15 - 011-23587-00-00

Spot Description: _____

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

2440 Feet from North / South Line of Section

490 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Bourbon

Lease Name: Cleaver Well #: 5-6C INJ 2

Field Name: Devon

Producing Formation: Bartlesville

Elevation: Ground: 912' Kelly Bushing: _____

Total Depth: 530' Plug Back Total Depth: 520'

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.

Drilling Fluid Management Plan AK INJ 121609
(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: _____

Title: _____ Date: 12/4/11

Subscribed and sworn to before me this 4th day of December

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 (12/08)

RECEIVED

DEC 08 2009

KCC WICHITA

Operator Name: Running Foxes Petroleum, Inc. Lease Name: Cleaver Well #: 5-6C INJ 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 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: Only: Gamma Ray	<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>154'</td> <td>758'</td> </tr> <tr> <td>Bartlesville</td> <td>365'</td> <td>547'</td> </tr> <tr> <td>Mississippian</td> <td>499'</td> <td>413'</td> </tr> </table>	Name	Top	Datum	Excello	154'	758'	Bartlesville	365'	547'	Mississippian	499'	413'
Name	Top	Datum											
Excello	154'	758'											
Bartlesville	365'	547'											
Mississippian	499'	413'											

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	20'	Quickset	10	Quickset
Production	6.25"	2.875"	6.5 lbs	530'	Quickset	70	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
		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED DEC 08 2009 KCC WICHITA </div>	

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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Cleaver 5-6C Inj 2

Thickness of Strata	Formation	Total Depth	Remarks
0-2	SOIL		
2-51	SAND & SHALE		
51-71	LIME		Run 520.40' 2 1/8 8/12/09
71-125	BL SHALE & SHALE		
125-142	20' LIME		
142-152	BL SHALE & SHALE		
152-155	5' LIME		
155-157	SHALE		
157-158	COAL		
158-257	SHALE		
257-258	LIME		
258-260	DK SHALE		
260-261	COAL		DEC 94
261-264	SHALE		
264-370	GRAY SAND		
370-384	SHALE		
384-388	SAND		
388-423	SHALE		
423-428	SAND LIGHT OR STON		
428-431	SAND GOOD OR STON		
431-454	SHALE / SAND / LAMINATED SAND		
454-455	COAL		
455-493	SHALE		
493-494	COAL		
494-496	SHALE		
496-530	MISS LIME		

TD 530

SPUD 8/11/09

RECEIVED
DEC 08 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
 3362

DATE 8-25-09

COUNTY BOUCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Cleaver # 5-6C-TWT 2 CONTRACTOR M^cGowan Drilling

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

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge
		700.00
70 SKs	Quick Set cement	1,155.00
280 lbs	KOI-SEAL 4" P/SK	126.00
100 lb.	Gel / Flush Ahead	25.00
2 Hrs	Water Truck #183 BULK CHARGE	160.00
4.04 Tons	BULK TRK. MILES	399.96
	PUMP TRK. MILES Trk Infield	N/L
	Rental on wireline	50.00
1	PLUGS 2 7/8" Top Rubber	17.00
	6.3% SALES TAX	83.34
	TOTAL	2,716.30

T.D. _____

SIZE HOLE _____

MAX. PRESS. _____

PLUG DEPTH _____

PLUG USED _____

CSG. SET AT _____ VOLUME _____

TBG SET AT 520' VOLUME 3 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 70 SKs Quick Set cement w/ 4" KOI-SEAL, Shut down - wash out Pump & Lines - Release Plug - Displace Plug with 3 Bbls water, Final Pumping @ 300 PSI - Bumped Plug to 1100 PSI - Close Tubing w/ 1100 PSI Good cement returns w/ 3 Bbl slurry

EQUIPMENT USED

NAME _____ UNIT NO. _____

NAME _____ UNIT NO. _____

Kelly Kimberlin 185

Jerry #186, Jason #193

Brad Butler

Called by shawn

HSI REP.

OWNER'S REP.