

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

12/04/11

CONFIDENTIAL

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.: _____
8/12/2009 8/13/2009 waiting on completion
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

API No. 15 - 011-23590-00-00
Spot Description: _____
NW NW NW NE Sec. 1 Twp. 25 S. R. 23 East West
170 Feet from North / South Line of Section
2,455 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Vogel Well #: 2-1B INJ 2
Field Name: Wildcat
Producing Formation: Bartlesville
Elevation: Ground: 847' Kelly Bushing: _____
Total Depth: 530' Plug Back Total Depth: 519'
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 At INS 12/16/09
(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: President Date: 12/4/09
Subscribed and sworn to before me this 4th day of December,
2009.
Notary Public: Kenton E. Keppel
Date Commission Expires: 11-13-2011

KENTON E. KEPPEL
NOTARY PUBLIC
STATE OF COLORADO
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)

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DEC 08 2009

KCC WICHITA

Operator Name: Running Foxes Petroleum, Inc. Lease Name: Vogel Well #: 2-1B INJ 2
 Sec. 1 Twp. 25 S. R. 23 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 Name Top Datum Exello 140' 707' Bartlesville 350' 597' Mississippian 486' 361'
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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	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

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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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Vogel 2-1B Inj 2

Thickness of Strata	Formation	Total Depth	Remarks
0-10	SAND CLAY		
10-40	SANDY SHALE		
40-65	LIME		
65-113	BL. SHALE + SHALE		Run 519.50' 27/8 8-18-09
113-128	20' LIME		
128-132	BL. SHALE + SHALE		
132-137	5' LIME		
137-139	SHALE		
139-140	COAL		
140-242	SHALE		
242-243	LIME		
243-245	DR. SHALE		
245-246	COAL		
246-351	SHALE		
351-351	GREY SAND		
356-368	SHALE		
368-369	COAL		
369-374	SAND LIGHT OIL (SHOW)		
374-378	SAND BEHIND TO GOOD OIL (SHOW)		BELLO'S REAL GOOD
378-402	SHALE		
402-410	SAND FINEST GOOD OIL (SHOW)		
410-421	SHALE		
421-427	SAND GOOD OIL (SHOW)		
427-434	SHALE + SAND		
434-435	COAL		
435-484	SHALE		
484-485	COAL		
485-486	SHALE		

486-530 MISS LIME

TO 530

SPUD 8/12/09

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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
 3358

DATE 8-24-09

COUNTY BOUCCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. VOGEL #2-1B-TWS 2 CONTRACTOR M'Gowan Drilling

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

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
65 sks	Quick Set cement		1072.50
260 lbs	KOL-SEAL 4" #4 1/2 SK		117.00
100 lb	Gel / Flush Ahead		25.00
3 Hrs	water Truck #193		240.00
90	Mileage on Trk #107		135.00
	BULK CHARGE		
3.75 Trk	BULK TRK. MILES		371.25
90	PUMP TRK. MILES		270.00
	Rental on well line		50.00
1	PLUGS 2 7/8" Top Rubber		17.00
		6.3% SALES TAX	77.58
		TOTAL	3075.33

T.D. _____

CSG. SET AT _____ VOLUME _____

SIZE HOLE _____

TBG SET AT 5 1/2" VOLUME 3 Bbls

MAX. PRESS. _____

SIZE PIPE 2 7/8" - 8" d

PLUG DEPTH _____

PKER DEPTH _____

PLUG USED _____

TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, Break circulation with 10 Bbls water, 5 Bbl Gel Flush, follow with 15 Bbls water, Mixed 65 sks Quick Set cement w/ 4" KOL-SEAL, shut down - washout Pump Lines - Release Plug - Displace Plug with 3 Bbls water. Final Pumping at 300 PSI - Bumped Plug to 1100 PSI - Close Tubing w/ w/ 1100 PSI Good cement returns w/ 2 Bbl slurry

EQUIPMENT USED

NAME _____ UNIT NO. _____

NAME 1 UNIT NO. _____

Kelly Kimberlin 185

Jerry #186, Jason #193

Brad Butler
 HSI REP.

Called by Shawn
 OWNER'S REP.