

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

1/20/10

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: Mark Machosky

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.: _____

9/28/2009 9/29/2009 Waiting on Completion

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - 011-23656-00-00

Spot Description: _____

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

2,275 Feet from North / South Line of Section

2,275 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Bourbon

Lease Name: Harvey Well #: 10-6B INJ

Field Name: Devon

Producing Formation: Bartlesville

Elevation: Ground: 859' Kelly Bushing: _____

Total Depth: 462' Plug Back Total Depth: 440'

Amount of Surface Pipe Set and Cemented at: 22' 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 EDR US 1-26-10
(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: President Date: 1/20/2010

Subscribed and sworn to before me this 20th day of January

20 10 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

Y Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution (TV 1/22)

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Operator Name: Running Foxes Petroleum, Inc. Lease Name: Harvey Well #: 10-6B INJ
 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 (Attach Additional Sheets) 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 (Submit Copy) List All E. Logs Run: Gamma Ray	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Excello 89' 770' Bartlesville 300' 559' Mississippian 440' 459'
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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	22'	Quickset	11	Quickset
Production	6.25"	2.875"	6.5 lbs	462'	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 (Amount and Kind of Material Used)	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes 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 (If vented, Submit ACO-18.)	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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Harvey 10-6B Int.

Thickness of Strata	Formation	Total Depth	Remarks
0-1	SOIL		
1-16	LIME		
16-62	SHALE		
62-78	20' LIME		
78-86	DL. SHALE & SHALE		
86-89	5' LIME		
89-90	COAL		
90-194	SHALE		
194-196	LIME		
196-199	DK. SHALE		
199-300	SHALE		
300-307	GRAY SAND		
307-361	SHALE & SOY SHALE		
361-366	SAND LIGHT OIL SHALE		
366-376	SAND GOOD OIL SHALE		MAKES GAS
376-378	SAND FAIRLY GOOD OIL SHALE		
378-389	LAMINATED SAND SHALE		
389-396	COAL		
396-440	SHALE		
440-	MISS LIME		
450	TA		

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MC ID # _____
 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
 3456

DATE 10-1-09

COUNTY POUCCO CITY _____

CHARGE TO Running Focus

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Harvey # 10-6B T&T CONTRACTOR M^cGowan Drilling

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

DIR. TO LOC. _____ OLD NEW

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

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T.D. _____
 SIZE HOLE 6 1/4"
 MAX. PRESS. _____
 PLUG DEPTH _____
 PLUG USED _____

CSG. SET AT _____ VOLUME _____
 TBG SET AT 441' VOLUME 2.55 Bbls
 SIZE PIPE 2 7/8" - 8 gal
 PKER DEPTH _____
 TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, Break circulation with 10 Bbl water, 5 Bbl Gel Flush, followed with 10 Bbl water, Mixed 65 SKS Quick Set cement w/ 4" KOI-SEAL, shutdown - washout pump & lines Release Plug - Displace Plug with 2 1/2 Bbls water, Final Pumping 300 PSI - Pumped Plug to 1000 PSI Close Tubing in w/ 1000 PSI Good cement returns w/ 2 1/2 Bbl slurry

EQUIPMENT USED

NAME	UNIT NO.	NAME	UNIT NO.
<u>Kelly Kimberlin</u>	<u>185</u>	<u>Jerry #91, Jason #193</u>	
<u>Brod Butler</u>		<u>Called by Shawn</u>	
HSI REP.		OWNER'S REP.	