



# CONFIDENTIAL

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1083165

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

### WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33397  
Name: Running Foxes Petroleum Inc.  
Address 1: 6855 S HAVANA ST, STE 400  
Address 2: \_\_\_\_\_  
City: CENTENNIAL State: CO Zip: 80112 + \_\_\_\_\_  
Contact Person: Greg Bratton  
Phone: ( 303 ) 617-7242  
CONTRACTOR: License # 34430  
Name: CST Oil & Gas Corporation  
Wellsite Geologist: Chad Counts  
Purchaser: \_\_\_\_\_

**Designate Type of Completion:**

- ☒ New Well    ☐ Re-Entry    ☐ Workover
- ☐ Oil    ☐ WSW    ☐ SWD    ☐ SLOW  
☐ Gas    ☐ D&A    ☒ ENHR    ☐ SIGW  
☐ OG    ☐ GSW    ☐ Temp. Abd.  
☐ CM (Coal Bed Methane)  
☐ Cathodic    ☐ Other (Core, Expl., 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  
☐ Conv. to GSW

☐ Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
☐ Commingled    Permit #: \_\_\_\_\_  
☐ Dual Completion    Permit #: \_\_\_\_\_  
☐ SWD    Permit #: \_\_\_\_\_  
☐ ENHR    Permit #: \_\_\_\_\_  
☐ GSW    Permit #: \_\_\_\_\_

4/5/2012    4/9/2012    4/26/2012  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-011-23830-00-00**Spot Description:**

SE SE NE SW Sec. 36 Twp. 24 S. R. 23 ☒ East ☐ West  
1630 Feet from ☐ North / ☒ South Line of Section  
2620 Feet from ☐ East / ☒ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE    ☐ NW    ☐ SE    ☒ SWCounty: BourbonLease Name: Wunderly Well #: 11-36D INJ2

Field Name: \_\_\_\_\_

Producing Formation: BartlesvilleElevation: Ground: 866 Kelly Bushing: 0Total Depth: 520 Plug Back Total Depth: \_\_\_\_\_Amount of Surface Pipe Set and Cemented at: 20 FeetMultiple 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**

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bblsDewatering method used: Evaporated

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**AFFIDAVIT**

I am the affiant and I hereby certify that 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.

Submitted Electronically

**KCC Office Use ONLY**☒ Letter of Confidentiality ReceivedDate: 06/04/2012☐ Confidential Release Date: \_\_\_\_\_☒ Wireline Log Received☐ Geologist Report Received☒ UIC DistributionALT ☐ I ☒ II ☐ III Approved by: NAOMI JAMES Date: 06/05/2012