



KANSAS CORPORATION COMMISSION 1096208
OIL & GAS CONSERVATION DIVISION

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 SIOW
 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 #: _____

<u>10/12/2011</u>	<u>10/13/2011</u>	<u>1/5/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-011-23774-00-00
Spot Description: _____
SW NW NW SE Sec. 33 Twp. 23 S. R. 25 East West
2040 Feet from North / South Line of Section
2430 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Payne Well #: 10-33B-3
Field Name: _____
Producing Formation: Bartlesville
Elevation: Ground: 791 Kelly Bushing: 0
Total Depth: 465 Plug Back Total Depth: _____
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

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bbls
Dewatering 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 Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NAOMI JAMES Date: 10/08/2012



1096208

Operator Name: Running Foxes Petroleum Inc. Lease Name: Payne Well #: 10-33B-3
 Sec. 33 Twp. 23 S. R. 25 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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Excello	37	754
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bartlesville	217	574
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Mississippian	415	376

List All E. Logs Run:

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	8.625	24	20	Class 1	6	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ 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

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 <i>(Explain)</i> _____			
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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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CST Oil & Gas Corporation

1690 155th St. Fort Scott, Ks

Fax: 1-620-829-5306

Office: 1-620-829-5307

Cement & Acid Report

Lease & Well NO. Payne 10-33B3 Drilling Contractor Company Tools Date 1-5-12
Kind of Job Plug Sec. 33 Twp. 23 Rng. 25E

Quantity	Materials Used
<u>80 sacks</u>	<u>Portland Cement</u>

Well T.D. 465 Csg. Set At _____ Volume _____
Size Hole 6 3/4 Tbg Set AT _____ Volume _____
Max. Press _____ Size Pipe _____
Plug Depth _____ Pker Depth _____
Plug Used _____ Time Started _____
Time Finished _____

Remarks: _____

Witnessed By:
Name Chuck Hutton Name Robert Hixon Name Nathan Allison

802 N. Industrial Rd.
P.O. Box 664
Iola, Kansas 66749
Phone: (620) 365-5588

Payless Concrete Products, Inc.



CONDITIONS
Concrete to be delivered to the nearest accessible point over passable road, under truck's own power. Due to delivery at owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request.
NOTICE TO OWNER
Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

CR001
CASH CUSTOMER

Well #1
Wanderly 11-36A-3

RU11/18
RUNNING FOXES PETROLEUM
1690 155TH ST
54 E TO 155TH N 3 MI TO
POPLAR RD E N 6D
FORT SCOTT, KS 66701

Well #2
Payne
10-32B-3

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	% CAL	DRIVER/TRUCK	% AIR	PLANT/TRANSACTION #
08:23:26a	WELL	15.00 yd	15.00 yd	0.00	WK 35	0.00	BOUCO
DATE	LOAD #	YARDS DEL	BATCH #	WATER TRIM	SLUMP	TICKET NUMBER	
01-05-12	1	15.00 yd	19452	0.0	4.00 in	30888	

WARNING
IRRITATING TO THE SKIN AND EYES
Contains Portland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water. If Irritation Persists, Get Medical Attention. KEEP CHILDREN AWAY.

CONCRETE is a PERISHABLE COMMODITY and BECOMES the PROPERTY of the PURCHASER UPON LEAVING the PLANT. ANY CHANGES OR CANCELLATION of ORIGINAL INSTRUCTIONS MUST be TELEPHONED to the OFFICE BEFORE LOADING STARTS.
The undersigned promises to pay all costs, including reasonable attorneys' fees, incurred in collecting any sums owed.
All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per annum.
Not Responsible for Resective Aggregate or Color Quality. No Claim Allowed Unless Made at Time Material is Delivered.
A \$25 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.
Excess Delay Time Charged @ \$50/Hr.

PROPERTY DAMAGE RELEASE
(TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)
Dear Customer-The driver of this truck in presenting this RELEASE to you for your signature is of the opinion that the size and weight of his truck may possibly cause damage to the premises and/or adjacent property if it places the material in the load where you desire it. It is our wish to help you in every way that we can, but in order to do this the driver is requesting that you sign this RELEASE relieving him and this supplier from any responsibility from any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc., by the delivery of this material, and that you also agree to help him remove mud from the wheels of his vehicle so that he will not litter the public street. Further, as additional consideration, the undersigned agrees to indemnify and hold harmless the driver of this truck and this supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.
SIGNED
X _____

Excessive Water is Detrimental to Concrete Performance
H₂O Added By Request/Authorized By
GAL X _____
WEIGHMASTER

NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.
LOAD RECEIVED BY:
X *Charles Hall*

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
15.00	WELL	WELL (10 SACKS PER UNIT)	15.00	\$765.00
1.00	TRUCKING	TRUCKING CHARGE	2.50	2.50
1.00	MIX & HALL	MIXING & HAULING	15.00	15.00

Arrived at second well 10:52
empty 11:28
20000
\$375.00

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION / UNDER TEST TAKEN	TIME ALLOWED
12:35	11:37	11:28	1. JOB NOT READY 2. BLOCK POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER	
8:39	9:30	9:19	6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME	DELAY TIME	

ADDITIONAL CHARGE 1 97.82
ADDITIONAL CHARGE 2 _____
GRAND TOTAL 1437.82



CST Oil & Gas



Operator: R. P. P. Well: Chicki 2-16-2
 Spud Date: 10-17-11 Completion Date: 10-11-11 Bit Size: 6 3/4 Surface Size: 8 5/8

Depth	Formation	Remarks	Casing Tally
			0
	soil		2
	sandstone		17
	shale	oil show	27
	shale		29
	shale		67
	shale		81
	shale		84
	shale		90
	shale		138
	shale		155
	shale		161
	shale		166
	shale		168
	shale		170
	shale		171
	shale		174
	shale		177
	shale		187
	shale		207
			30.45
			33.00
			20.60
			31.65
			31.45
			31.00
			30.95
			31.45
			30.65
			31.30
			31.05
			30.75
			31.85
			30.15
			30.40
			30.90
			31.40
			30.60
			559.70

FD 575

cored 444-464



CST Oil & Gas



Operator: *RFP* Well: *Payne 10-32B-3*
 Spud Date: *10-12-11* Completion Date: *10-13-11* Bit Size: *16 3/4* Surface Size: *8 7/8*

Depth	Formation	Remarks	Casing Tally	
	<i>Top</i>		<i>0</i>	<i>11</i>
	<i>Clay</i>		<i>11</i>	<i>19</i>
	<i>Shale</i>		<i>19</i>	<i>30</i>
	<i>Shale</i>	<i>5</i>	<i>30</i>	<i>33</i>
	<i>Shale</i>		<i>33</i>	<i>39</i>
	<i>Shale</i>		<i>39</i>	<i>132</i>
	<i>Shale</i>		<i>132</i>	<i>137</i>
	<i>Shale</i>		<i>137</i>	<i>412</i>
	<i>Shale</i>		<i>412</i>	<i>465</i>
		<i>TD 465</i>		
		<i>cored 234-254</i>		
		<i>DRY HOLE</i>		



CST Oil & Gas



Operator: *RFP* Well: *Payne 10-33B-4*
 Spud Date: *10-13-11* Completion Date: *10-19-11* Bit Size: *6 3/4* Surface Size: *8 5/8*

Depth	Formation	Remarks	Casing Tally	
	<i>Sand</i>		0	7
	<i>Clay</i>		7	16
	<i>Shale</i>		16	117
	<i>Red sand</i>		117	119
	<i>oil sand</i>	<i>good show</i>	119	185
	<i>Shale</i>		185	189
	<i>oil sand</i>	<i>show</i>	189	212
	<i>Shale</i>		212	215
	<i>Miss. sand</i>		215	364
			364	425
				31.20
				31.50
				31.35
				31.45
				29.45
				31.55
				21.00
				31.35
				30.95
				31.55
				31.60
				31.90
				31.65
				406.10
	<i>Corred 212 - 237</i>			
	<i>Corred 355 - 365</i>			

AD 1
119.5
Corred 212 - 237
Corred 355 - 365