



KANSAS CORPORATION COMMISSION 1096087  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
June 2009  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

**CONFIDENTIAL**

**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: Kurt Hodges  
 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 #:  
 6/12/2012 6/14/2012 7/9/2012  
 Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-011-23967-00-00  
 Spot Description:  
 SE NW SE SW Sec. 36 Twp. 24 S. R. 23  East  West  
 810 Feet from  North  South Line of Section  
 1800 Feet from  East  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: Bourbon  
 Lease Name: Wunderly Well #: 14-36B-4  
 Field Name:  
 Producing Formation: Bartlesville  
 Elevation: Ground: 895 Kelly Bushing: 0  
 Total Depth: 575 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  
 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: 10/05/2012  
 Confidential Release Date:  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
 ALT I  II  III Approved by: NAOMI JAMES Date: 10/09/2012