



KANSAS CORPORATION COMMISSION 1102692
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 # 5786
Name: McGown Drilling, Inc.
Wellsite Geologist: Kurt Hodges
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 #: _____
6/18/2012 6/19/2012 7/5/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-011-23909-00-00

Spot Description: _____
NE SE NE Sec. 1 Twp. 24 S. R. 23 East West
1650 Feet from North / South Line of Section
330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Bourbon

Lease Name: Post Well #: 8-1A

Field Name: _____

Producing Formation: Squirrel

Elevation: Ground: 859 Kelly Bushing: 0

Total Depth: 521 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: Deanna Gantzer Date: 11/29/2012



1102692

Operator Name: Running Foxes Petroleum Inc. Lease Name: Post Well #: 8-1A
 Sec. 1 Twp. 24 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 complete copy of all Electric Wire-line 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 Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Density Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Excello</td> <td>134</td> <td>725</td> </tr> <tr> <td>Bartlesville</td> <td>410</td> <td>449</td> </tr> <tr> <td>Mississippian</td> <td>500</td> <td>359</td> </tr> </tbody> </table>	Name	Top	Datum	Excello	134	725	Bartlesville	410	449	Mississippian	500	359
Name	Top	Datum											
Excello	134	725											
Bartlesville	410	449											
Mississippian	500	359											

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	11	8.625	24	21	Class 1	4	
Production	6.75	4.5	10.5	484	Portland Cement	80	

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 (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: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbl's.	Gas Mcf	Water Bbl's.	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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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McGown Drilling, Inc.
Mound City, Kansas

Operator:

Running Foxes Petroleum, Inc.
Centennial, CO

Post 8-1A

Bourbon Co., KS
1-24-23E
API # 011-23909

Spud Date: 6/18/2012
Surface Casing: 8.625"
Surface Length: 21.40'
Surface Cement: 4 sx

Surface Bit: 11"
Drill Bit: 6.75"
Longstring: 484.45'
Longstring Date:

Driller's Log

Top	Bottom	Formation	Comments
0	10	Clay & Soil	
10	26	Lime	
26	28	Blk. Shale / Shale	
28	36	Lime	
36	78	Blk. Shale	
78	92	Lime	
92	136	Blk. Shale / Shale	
136	186	Sand	Fair oil show
186	248	Shale	
248	258	Sandy Shale	Laminated, poor oil show
258	316	Shale	
316	398	Sandy Shale	Laminated, very poor oil show
398	458	Shale	
458	459	Coal	
459	474	Sand	Shaley, oil show
474	521	Lime	Mississippian
521	TD		