



KANSAS CORPORATION COMMISSION 1101919
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: Greg Bratton
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 #: _____

<u>8/15/2012</u>	<u>8/16/2012</u>	<u>8/17/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-011-23933-00-00

Spot Description: _____
NE NE NW SE Sec. 6 Twp. 25 S. R. 24 East West

2440 Feet from North / South Line of Section

1450 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Bourbon

Lease Name: Harvey Well #: 10-6A-1

Field Name: _____

Producing Formation: Bartlesville

Elevation: Ground: 846 Kelly Bushing: 0

Total Depth: 438 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 crnt.

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 Garrison Date: 12/27/2012



1101919

Operator Name: Running Foxes Petroleum Inc. Lease Name: Harvey Well #: 10-6A-1
 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 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<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>82</td> <td>764</td> </tr> <tr> <td>Bartlesville</td> <td>356</td> <td>490</td> </tr> <tr> <td>Mississippian</td> <td>433</td> <td>413</td> </tr> </tbody> </table>	Name	Top	Datum	Excello	82	764	Bartlesville	356	490	Mississippian	433	413
Name	Top	Datum											
Excello	82	764											
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Mississippian	433	413											

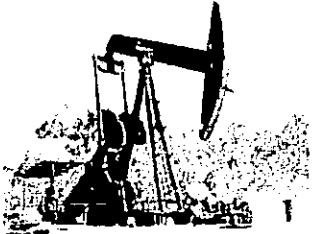
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.25	8.625	24	20	Class 2	6	

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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	-			
	-			

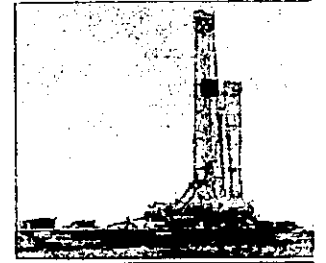
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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 (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 <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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CST Oil & Gas



Operator: RF Well: Harvey 10-6A-1

Spud Date: 8-15-12 Completion Date: 8-16-12 Bit Size: 6 3/4 Surface Size: 8 7/8

Depth	Formation	Remarks	Casing Tally	
	Soil		0	2
	Lign		2	18
	Shale		18	65
	Lign	ft scot	65	84
	Shale		84	90
	Lign	5'	90	95
	Shale		95	205
	Lign	ardmore	205	206
	Shale		206	392
	Black sand	No bleed	392	398
	Black sand	Little bleed	398	407
	Black sand	& shale	407	438
		TD 438		
		DRY HOLE		

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. Harvey 10-6A-1 Drilling Contractor Company Tools 9-17-12
Kind of Job Cement Sec. 6 Twp. 25s Rng. 23E

Quantity	Materials Used
<u>35sks</u>	<u>Portland Cement</u>

Well T.D. 438

Csg. Set At _____ Volume _____

Size Hole _____

Tbg Set AT _____ Volume _____

Max. Press _____

Size Pipe _____

Plug Depth _____

Pker Depth _____

Plug Used _____

Time Started _____

Time Finished _____

Remarks: Ran 1" Pipe to TD. Mixed cement and pumped it down
1" pipe pulling pipe every so often. Pumped cement until well was
full.

Witnessed By:

Name Shawn Gurnery Name Dakota Sigg Name Jesse Smith



For customer inquiries contact us at:
 1-800-356-9033 or visit us online
 www.MyJDFAccount.com

TRANSACTIONS POSTED TO YOUR ACCOUNT ... continued

Tran. Date	Date Posted	Invoice # / Reference	Description	Transaction Amount
09/05/12	09/05/12	J40730	PURCHASE CEMENT/MASONARY TAXABLE PO# VOGEL	76.70
			<i>VOGEL 10-36A INT</i>	
			Quantity: 0 6.00 BG	Unit Price: 0 11.75 BG
			Item Total: 0.00 70.50 6.20 Tax	Invoice Item Description: Authorized Buyer ROBERT HIXON PORTLAND CEMENT Tax
09/11/12	09/11/12	J41115	PURCHASE PLUMBING TAXABLE PO# SNYDER	18.21
			Quantity: 0 6.00 EA	Unit Price: 0 2.79 EA
			Item Total: 0.00 16.74 1.47 Tax	Invoice Item Description: Authorized Buyer ROBERT HIXON 3" DWV PIPE COUPLING Tax
				<i>POST TANKS VANBUSKIRK TANKS</i>
09/11/12	09/11/12	J41104	PURCHASE CEMENT/MASONARY TAXABLE PO# RAKE	89.49
			Quantity: 0 7.00 BG	Unit Price: 0 11.75 BG
			Item Total: 0.00 82.25 7.24 Tax	Invoice Item Description: Authorized Buyer KURT PORTLAND CEMENT Tax
				<i>GRAHAM 5-36P INC 2 5-36C INC 3</i>
09/11/12	09/11/12	J41111	PURCHASE PLUMBING TAXABLE PO# SNYDER	113.49
			Quantity: 0 6.00 EA 2.00 EA 1.00 EA	Unit Price: 0 14.79 EA 6.29 EA 2.99 EA
			Item Total: 0.00 88.74 12.58 2.99 9.18 Tax	Invoice Item Description: Authorized Buyer SHAWN GUMFORY 3" X 10' SCH 40 PVC DWV PIPE 3" CLEAN-OUT FITTING W/ PLUG 3 PLUG Tax
				<i>POST TANKS VANBUSKIRK TANKS</i>
09/17/12	09/17/12	J41523	CREDIT MEMO RETURNED MERCHANDISE	102.27CR
			Quantity: 0 -8.00 BG 0	Unit Price: 0 11.75 BG 0
			Item Total: 0.00 94.00 204.54 -8.27 Tax	Invoice Item Description: Authorized Buyer ROBERT HIXON PORTLAND CEMENT Other tender Tax
				<i>GRAHAM 5-36D-3</i>
09/17/12	09/17/12	J41522	PURCHASE CEMENT/MASONARY TAXABLE PO# RIG	204.54
			Quantity: 0 8.00 BG 8.00 BG	Unit Price: 0 11.75 BG 11.75 BG
			Item Total: 0.00 94.00 94.00 16.54 Tax	Invoice Item Description: Authorized Buyer SHAWN GUMFORY PORTLAND CEMENT PORTLAND CEMENT Tax
				<i>GRAHAM 5-36D-3</i>
				<i>WUNDERLY 14-36A-4 UB</i>
09/17/12	09/17/12	J41496	PURCHASE CEMENT/MASONARY TAXABLE PO# HARVEY	465.94
			Quantity: 0 35.00 BG 1.00 EA	Unit Price: 0 11.75 BG 17.00 EA
			Item Total: 0.00 411.25 17.00 37.69 Tax	Invoice Item Description: Authorized Buyer SHAWN GUMFORY PORTLAND CEMENT QUIKRETE PALLETS Tax
				<i>HARVEY 10-6A-1</i>
09/20/12	09/20/12	J41788	PURCHASE PLUMBING TAXABLE	50.34
				<i>CST SHOP</i>

continued ...

