

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

7/13/13

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: 7060-B S. Tucson Way
Address 2: _____
City: Centennial State: CO Zip: 80112 + _____
Contact Person: Kent Keppel
Phone: (720) 889-0510
CONTRACTOR: License # 34430
Name: CST Oil & Gas
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 #: _____

3-21-2011	4-6-2011	4-20-2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 001-3013100-00
Spot Description: _____
SE SE SE Sec. 22 Twp. 24 S. R. 21 East West
330 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: Allen
Lease Name: Dickerson Well #: 16-22D
Field Name: Bronson-Xenia
Producing Formation: Bartlesville
Elevation: Ground: 1103' Kelly Bushing: _____
Total Depth: 898' Plug Back Total Depth: 830'
Amount of Surface Pipe Set and Cemented at: 19' 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: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.
Signature: _____
Title: Geologist Date: 7/13/2011
CONFIDENTIAL
Date: JUL 13 2011

KCC Office Use ONLY
 Letter of Confidentiality Received
Date: 7/13/11 - 7/13/13
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: MS **RECEIVED**
Date: JUL 19 2011

KCC

KCC WICHITA

Operator Name: Running Foxes Petroleum, Inc. Lease Name: Dickerson Well #: 16-22B D
 Sec. 22 Twp. 24 S. R. 21 East West County: Allen

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: Neutron-Density, Gamma Ray	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Excello</td> <td>485</td> <td>618</td> </tr> <tr> <td>Bartlesville</td> <td>650</td> <td>453</td> </tr> <tr> <td>Mississippian</td> <td>810</td> <td>293</td> </tr> </table>	Name	Top	Datum	Excello	485	618	Bartlesville	650	453	Mississippian	810	293
Name	Top	Datum											
Excello	485	618											
Bartlesville	650	453											
Mississippian	810	293											

CASING RECORD <input 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	10 5/8"	8 5/8"	24 lbs	19'	Quickset	4	4% Kol-Seal
Production	6 3/4"	4 1/2"	10.5 lbs	830'	Quickset	93	4% Kol-Seal

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 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
	Not Perfed		

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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ <div style="text-align: center; border: 1px solid black; padding: 5px; font-weight: bold;">RECEIVED</div>
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CST Oil & Gas



Operator: *RFP* Well: *16-22 D Dickerson*

Depth	Formation	Remarks	Casing Tally
0-5	<i>soil & clay</i>		
5-49	<i>lime</i>		39.25
49-53	<i>shale</i>	<i>black</i>	40.10
53-58	<i>lime</i>		39.10
58-62	<i>shale</i>		40.25
62-88	<i>lime</i>		39.65
88-93	<i>shale</i>		40.40
93-124	<i>lime</i>		38.85
124-285	<i>shale</i>		39.55
285-306	<i>lime</i>		39.35
306-345	<i>shale</i>		40.35
345-351	<i>sand</i>		39.70
351-385	<i>shale</i>		39.70
385-403	<i>lime</i>		40.30
403-455	<i>shale</i>		38.10
455-471	<i>lime</i>		39.25
471-477	<i>shale</i>	<i>ft scott</i>	39.30
477-482	<i>lime</i>	<i>black</i>	39.50
482-584	<i>shale</i>	<i>5'</i>	39.60
584-586	<i>lime</i>		40.20
586-810	<i>shale</i>		39.15
810-900	<i>lime</i>	<i>misc</i>	40.10
			831.75

TD 900'

DATE SPURD 3/21/10
COMPLETED 4/8/10

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JUL 13 2013

JUL 19 2011

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FED ID# 48-1214033
 MC ID # 165290
 Shop # 620 437-2661
 Cellular # 620 437-7582
 Office # 316 685-5908
 Office Fax # 316-685-5926
 Shop Address: 3613A Y Road
 Madison, KS 66860

Hurricane Services, Inc.
 P.O. Box 782228
 Wichita, KS 67278-2228

Cement, Acid or Tools
 Service Ticket
 4401

DATE 4-20-11

COUNTY Allen CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Dickerson #16-220 CONTRACTOR _____

KIND OF JOB Longstring SEC. _____ TWP. _____ RNG. _____

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			750.00
93 sks	Quick Set cement		1534.50
372 lb	Kol-SEAL 4" P/SK		167.40
250 lb	Gel > Flush Ahead		62.50
4 1/2	Hrs water Truck #105		360.00
	Rental on wireline		50.00
	BULK CHARGE		
5.43 Trk	BULK TRK. MILES #203		418.11
70	PUMP TRK. MILES		210.00
70	Mileage on Trk #290		105.00
1	PLUGS 4 1/2" Top Rubber		38.00
		7.3% SALES TAX	131.58
		TOTAL	3827.09

T.D. _____

SIZE HOLE 6 3/4"

MAX. PRESS. _____

PLUG DEPTH _____

PLUG USED _____

CSG. SET AT 830 VOLUME 13 Bbls

TBG SET AT _____ VOLUME CONFIDENTIAL

SIZE PIPE 4 1/2" JUL 1 8 2013

PKER DEPTH _____ KCC

TIME FINISHED _____

REMARKS: Rig up to 4 1/2" casing, Break circulation with 10 Bbls water, 10 Bbl. Gel Flush, circulate Gel around to condition hole. Mixed 93 sks Quick Set cement w/ 4" Kol-SEAL. Shut down - wash out pump & lines - Release Plug - Displace Plug with 13 Bbls water. Final Pumping @ 400 PSI - Bumped Plug to 800 PSI - Release Pressure - Float Held. Close casing in w/ 0 PSI. Good cement returns w/ 4 Bbl. slurry

EQUIPMENT USED

NAME Kelly Kimberlin UNIT NO. #201
Brad Butler

NAME Clayton #203, Rodger #105
[Signature] [Signature]

RECEIVED

JUL 1 2011

KCC WICHITA