

7/13/13

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

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

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 # 5822
Name: Val Energy, Inc
Wellsite Geologist: _____
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: Running Foxes Petroleum, Inc.
Well Name: AG-NH 3-7-2

Original Comp. Date: 7-28-2009 Original Total Depth: 3908
 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 #: _____

3-24-2011	3-26-2011	3-26-2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 191-22562-00-00
Spot Description:
W2_NW_NE_NW Sec. 7 Twp. 33 S. R. 2 East West
330 Feet from North / South Line of Section
1,510 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Sumner
Lease Name: AG-NH Well #: 3-7-2
Field Name: Sauzek
Producing Formation: Mississippian
Elevation: Ground: 1135 Kelly Bushing: _____
Total Depth: 3655 Plug Back Total Depth: 3610
Amount of Surface Pipe Set and Cemented at: N/A (previous 256') 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 #: _____

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INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - KCC 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: 7-14-2011

KCC Office Use ONLY

Letter of Confidentiality Received
Date: 7/13/11 - 7/13/13 RECEIVED
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NJKCC WICHTA Date: _____
JUL 19 2011

Operator Name: Running Foxes Petroleum, Inc. Lease Name: AG-NH Well #: 3-7-2
 Sec. 7 Twp. 33 S. R. 2 East West County: Sumner

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 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, CBL	<input checked="" 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>Heebner</td> <td>2096</td> <td>-961</td> </tr> <tr> <td>Excello</td> <td>3283</td> <td>-2148</td> </tr> <tr> <td>Mississippian</td> <td>3398</td> <td>-2263</td> </tr> <tr> <td>Simpson</td> <td>3751</td> <td>-2616</td> </tr> </table>	Name	Top	Datum	Heebner	2096	-961	Excello	3283	-2148	Mississippian	3398	-2263	Simpson	3751	-2616
Name	Top	Datum														
Heebner	2096	-961														
Excello	3283	-2148														
Mississippian	3398	-2263														
Simpson	3751	-2616														

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	12 1/4	7 7/8"	24 lbs	256	Class A	175	3% Kol-Seal
Production	7 7/8"	5 1/2"	15.5 lbs	3610	Class A	185	5% Kol-Seal
* Previously							

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
4	3398' - 3402'	500 galls 15% HCL	

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	<input type="checkbox"/> Yes <input type="checkbox"/> No	KCC
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)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: RECEIVED JUL 19 2011
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ALLIED CEMENTING CO., LLC. 040056

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lake, Ks.

DATE <u>3-26 2011</u>	SEC. <u>7</u>	TWP. <u>33S</u>	RANGE <u>2E</u>	CALLED OUT <u>2:00 pm</u>	ON LOCATION <u>5:30 pm</u>	JOB START <u>1:00 pm</u>	JOB FINISH <u>2:00 pm</u>
LEASE <u>AG-NH</u>	WELL # <u>3-7-2</u>	LOCATION <u>Wellington, 160 & I 35, 3 ess.</u>			COUNTY <u>Scholar</u>	STATE <u>Ks</u>	
OLD OR <u>NEW</u> (Circle one)		<u>4 South, 1 east, 1 South, 4 east, 8 & E. line</u>					

CONTRACTOR US1 #3

TYPE OF JOB production

HOLE SIZE 7 7/8 T.D. 3655'

CASING SIZE 5 1/2 DEPTH 3610'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 34'

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 8 1/2 bbls of fresh water.

OWNER Runnings Fox

CEMENT

AMOUNT ORDERED 18550 Class A ASC

5 # Kellogg +, 3% FL10

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC	<u>18550</u>	@ <u>19.00</u>	<u>3515.00</u>
<u>Kellogg</u>	<u>935#</u>	@ <u>.89</u>	<u>832.15</u>
<u>FL-160</u>	<u>52#</u>	@ <u>17.20</u>	<u>894.40</u>
<u>500gal Mud Clean</u>		@ <u>1.27</u>	<u>655.00</u>
	@		
	@		
	@		
	@		
HANDLING	<u>243</u>	@ <u>2.25</u>	<u>546.75</u>
MILEAGE	<u>75.11/243</u>		<u>2004.75</u>
TOTAL			<u>8428.05</u>

EQUIPMENT

PUMP TRUCK CEMENTER Derin F

360-265 HELPER Ron G

BULK TRUCK

421-252 DRIVER Bobby W

BULK TRUCK

_____ DRIVER _____

REMARKS:

Pipe on bottom & break circulation
pump 3 bbls of fresh water, pump 500gals
mud clean, pump 3 bbls of fresh water, mix
255 cement for Repl & mouse holes, mix 1600
of #11 cement, shut down, wash pump & lines
Release plug, start displacement, lift pressure
9 & 56 bbls, slow rate to 3 bpm at 75
bbls, bump plug at 8 1/2 bbls 500-1,000 PSI
float & 2

CHARGE TO: Runnings Fox

STREET _____

CITY _____ STATE _____ ZIP _____

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KCC

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment

SERVICE

DEPTH OF JOB	<u>3610'</u>		
PUMP TRUCK CHARGE			<u>2225.00</u>
EXTRA FOOTAGE	<u>1</u>	@	
MILEAGE	<u>150</u>	@ <u>7.00</u>	<u>1050.00</u>
MANIFOLD		@	
<u>Heavy machinery</u>		@ <u>200.00</u>	<u>200.00</u>
<u>Light Vehicle</u>		@ <u>4.00</u>	<u>600.00</u>

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TOTAL 4075.00

PLUG & EQUIPMENT

<u>5 1/2</u>			
<u>1- Rubber plug</u>	@		<u>66.00</u>
<u>1- Guide Shoe</u>	@		<u>178.00</u>
<u>1- AFV Insulator</u>	@		<u>155.00</u>
<u>5- Centralizers</u>	@ <u>49.00</u>		<u>245.00</u>

3560 Packer
 3458 spot
Hurricane Well Service, Inc.
 P.O. Box 782228
 Wichita, KS 67278-2228

Company: Running Forces Date: 4-20-11
 Well Name: Atoka Nighthawk 3-7-2 Sec. T R
 Tubing Size: 2 7/8 Csg. Size: 5 1/2 Perfs: 3398-3402
 B-Plug: _____ Packer Setting: 3325

FED ID # 48-1192756 Office # 316 685-5908
 Shop # 620 437-2661 Office Fax # 316 685-5926
 Cellular # 620 437-7189 Shop Address: 3613A Y Road
 Madison, KS 66860

3305
 8'4" = 12'

PKR	Length		Total		No. Pcs	Length		Total		No. Pcs	Length		Total		No. Pcs	Length		Total	
	Ft.	Ins.	Ft.	Ins.		Ft.	Ins.	Ft.	Ins.		Ft.	Ins.	Ft.	Ins.		Ft.	Ins.	Ft.	Ins.
1	32	50			31	31	60			61	32	35			91	32	50		
2	32	45			32	32	50			62	32	35			92	32	50		
3	32	45			33	32	50			63	32	50			93	32	50		
4	32	50			34	32	55			64	32	40			94	32	45		
5	31	60	161	50	35	32	50	1122	15	65	32	40	2094	40	95	32	50	3065	70
6	31	55			36	32	45			66	31	60			96	32	45		
7	31	50			37	32	50			67	32	40			97	32	50		
8	32	45			38	31	55			68	32	45			98	32	40		
9	32	50			39	31	55			69	31	30			99	32	50		
10	32	50	322	-	40	32	40	1282	60	70	32	45	2254	40	100	32	50	3228	05
11	32	50			41	32	45			71	32	45			101	32	50		
12	32	50			42	32	50			72	32	40			102	31	50	3292	05
13	32	50			43	32	50			73	32	50			103	32	45	3324	50
14	32	50			44	32	50			74	32	50			104	32	50		
15	32	50	484	50	45	32	50	1448	05	75	32	30	2416	75	105	32	45	3389	45
16	32	50			46	32	50			76	32	45			106	32	50	3421	95
17	31	55			47	32	45			77	32	50			107	32	50		
18	32	45			48	32	50			78	32	50			108	32	50		
19	32	50			49	32	50			79	32	30			109				
20	31	50	645	-	50	32	50	1607	50	80	32	35	2578	85	110				
21	31	60			51	32	50			81	32	35			111				
22	31	60			52	32	50			82	32	40			112				
23	31	50			53	32	55			83	32	45			113				
24	31	55			54	32	50			84	32	40			114				
25	31	50	802	75	55	32	45	1770	-	85	32	40	2740	85	115				
26	31	55			56	32	50			86	32	45			116				
27	31	55			57	32	50			87	32	50			117				
28	31	65			58	32	55			88	32	50			118				
29	31	55			59	32	40			89	32	50			119				
30	31	45	960	50	60	32	45	1932	40	90	32	45	2903	25	120				
Total					Total					Total					Total				

Collars
 3282-3317

W/O PKR	
1	
2	
3	
4	
Total	

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RECEIVED
 JUL 19 2011
 No. Joints 102
 Talled by KCC WICHITA