



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

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: _____

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 #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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 #: _____

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: _____ Date: _____



1048187

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input 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 Name Top Datum
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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

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 <i>(Amount and Kind of Material Used)</i>	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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
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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 <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	OAKLEAF, LINNAEUS O 17-2
Doc ID	1048187

All Electric Logs Run

CDL
DIL
NDL
TEMP



PostRock
Business Corporation

DATE: 08/09/2010

McPherson Drilling

Geology Brief - Data taken from Driller's Log & Compensated Density Log

WELL NAME:	Oakleaf, Linnaeus O.	SECTION:	17	REPORT #:		SPUD DATE:	8/3/2010
WELL #:	17-2	TWP:	33S	DEPTH:	956		
FIELD:	Cherokee Basin	RANGE:	18E	PBTD:			
COUNTY:	Labette	ELEVATION:	788 Estimated	FOOTAGE:	1980	FT FROM	South
STATE:	Kansas	API #:	15-099-24612-0000		500	FT FROM	East
							SECTION LINE
							SECTION LINE
							W/2E/2NESE

Fireside

ACTIVITY DESCRIPTION:

McPherson Drilling, Mac McPherson, drilled to TD 956 ft. on Wednesday, 08/04/2010 at 8:00 am.

Note: 10 foot rock samples collected for the Kansas Geological Survey (KGS) Rock Library, as required by the State of Kansas.

Surface Casing @ 20.1 ft.

Surface Casing Size: 8 5/8"

GAS SHOWS:	Gas Measured	E-Log	COMMENTS:
Mulberry Coal - poor	0 mcf/day @	205-207 FT.	
Lexington Shale and Coal	0 mcf/day @	232-236 FT.	Gas test at 254 ft.
Summit Shale & Coal	0 mcf/day @	344-349 FT.	Gas check at 353 ft. & 379 ft.
Mulky Shale & Coal	0 mcf/day @	387-392 FT.	
Iron Post Coal	0 mcf/day @	419-421 FT.	
Bevier Coal	0 mcf/day @	429-431 FT.	Gas test at 428 ft.
Verdigris Limestone	0 mcf/day @	442-446 FT.	Upper baffle set at 393.40 ft. Big hole.
#1 Croweburg Coal & Shale	7 mcf/day @	446-452 FT.	7 mcf/day from this area. Gas test at 454 ft.
#2 Croweburg Coal & Shale	7 mcf/day @	458-460 FT.	
Fleming Coal	7 mcf/day @	482-484 FT.	Gas test at 504 ft., 554 ft. & 579 ft.
Weir Coal	7 mcf/day @	580-583 FT.	
Bartlesville Sandstone - poor	7 mcf/day @	583-620 FT.	Lower baffle set at 708.65 ft. Small hole.
Rowe Coal	7 mcf/day @	749-752 FT.	Gas test at 754 ft.
Neutral Coal	12 mcf/day @	Absent FT.	5 mcf/day from this area. Gas test at 815 ft.
Riverton Coal	12 mcf/day @	818-821 FT.	
Mississippi Chat/Limestone	16 mcf/day @	Top at 829 FT.	4 mcf/day from this area. Gas test at 830 ft.
TD: 956 ft.	16 mcf/day @		Gas test same at TD.

Note: Water coming into the hole from zones drilled affects Drilling & Gas Tests. These Wells may require a booster to reach target TD. This water pressure may cause the Gas coming into the hole to be sporadic and/or appear non-existent, giving false readings of initial Gas measured.

Bottom of Production Pipe Tally Sheet: 947.96 ft. Production Casing Set by PostRock.

Bottom Logger: 956.10 ft. Driller TD: 955 ft.

Shoe & Centralizer Set on bottom joint & Centralizers Set every 5 joints to surface.

OTHER COMMENTS:

Information in this report was taken directly from the Drillers hand written notes, Geologists examination of rock samples with a hand lens & the Compensated Density Log only. Gas Tests reflect what the driller wrote down during drilling activities. All zones are picked on site with minimal log correlation. Detailed work with logs may provide more accurate data for reservoir analysis. Below Zones fyi only.

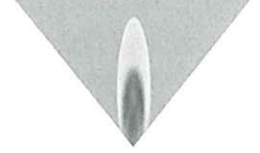
Pawnee LS / Pink	207-232
Oswego Limestone	306-344
Tebo Coal	547-551

CASING RECOMMENDATIONS: Run 5.5 inch casing / Cement to surface

On Site Supervisor/Representative: Ken Recoy, Senior Geologist, AAPG CPG #5927 Cell: 620-305-9900 krecoy@grcp.net
End of Drilling Report. Thank You!

QUEST

Resource Corporation



211 W. 14TH STREET,
CHANUTE, KS 66720
620-431-9500

231
D10014

TICKET NUMBER 918 6965

FIELD TICKET REF # _____

FOREMAN Joe Blanchard

SSI 629510

API 15-099-24612

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-5-10	Oakleaf Linnaeus 17-2	17	33	18	LB

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	7:00	3:30		904850		8.5	Joe Blanchard
Curt Collins	7:00			931585			Curt Collins
LARRY BLOOMER	7:00			903600			
Darrell Cherry	7:00			903197			

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 955 CASING SIZE & WEIGHT 5 1/2 16#
 CASING DEPTH 947.96 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 22.57 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4bpm

REMARKS:

washed 5 Ft 5 1/2 Casing in hole. Installed Cement head RAW 4SKS gel & 15 BBI dye & 130 SKS of cement to get dye to surface. Flush pump. Pump wiper plug to bottom & set float shoe.

2hr wait on water due to Fuel card Problems at Parsons Stockyard. Cement to Surface.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	8.5 hr	Foreman Pickup	
903197	hr	Cement Pump Truck	
903600	hr	Bulk Truck	
	hr	Transport Truck	
	hr	Transport Trailer	
		80 Vac	
	947.96 Ft	Casing	
	5	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac Baffles 4 1/2" x 4"	
	105 SK	Portland Cement	
	25 SK	Gilsonite	
	1 SK	Flo-Seal	
	10 SK	Premium Gel	
	4 SK	Cal Chloride	
		KCL	
	7000 gal	City Water	