



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: _____



1056309

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

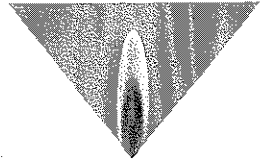
Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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QUEST

Resource Corporation



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

TICKET NUMBER 7007

FIELD TICKET REF # _____

FOREMAN Joe Blanchard

SSI _____

API _____

D10080

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-12-11	TRIPlett CW 34-4	34	28	18	NO

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	7:00	5:45		904850		10.75	<i>Joe Blanchard</i>
OTTO Lowers	7:00	5:00		903197		10	<i>OTTO Lowers</i>
John Walker	7:00	4:00		931310	932895	9	<i>Joe Walk</i>
Wes Gahman	7:00	5:30		931585	931387	10.5	<i>Wes Gahman</i>
Matt Kraft	7:00	3:30		903600		8.5	<i>Matt Kraft</i>

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 1140 CASING SIZE & WEIGHT 5 1/2 16#
 CASING DEPTH 1136.95 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 27.07 DISPLACEMENT PSI _____ MIX PSI _____ RATE 46rpm

REMARKS:

Safety Meeting 7:00 to 8:00 After thawing trucks out we arrived on location at 10:45 started in hole 11:10 washed on almost every joint. landed casing around 1:30 pm waited 1hr on transport to go after load of H₂O. started cement 2:30 installed cement head Ran 18 bbl dye @ 160 SKS of cement to get dye to surface. Flush Pump. Pump wiper plug to bottom of set float shoe. left location 3:30 pm Cement to surface. Cold & Valves kept freezing up.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	10.75 hr	Foreman Pickup	
903197	10 hr	Cement Pump Truck	
903600	8.5 hr	Bulk Truck	
931585	10.5 hr	Transport Truck	
931387	10.5 hr	Transport Trailer	
		80 Vac	
	1136.95 FT	Casing 5 1/2	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	0	Frac Baffles	
	110 SK	Portland Cement	
	30 SK	Gilsonite	
	2 SK	Flo-Seal	
	13 SK	Premium Gel	
	5 SK	Cal Chloride	
	1	KCL 5 1/2 Basket	
	7000 gal	City Water	
931300	9 hr	Casing tractor	
932852	9 hr	Casing trailer	

Michael Drilling, LLC
P.O. Box 402
Iola, KS 66749
620-496-7795

P.O.#D10080

Company: Post Rock Energy Corp.
Address: 210 Park Ave. Suite 2750
Oklahoma City, Oklahoma 73102
Ordered By: LRG 011811-1

Date: 01/08/11
Lease: C.W. Triplett
County: Neosho
Well#: 34-4
API#: 15-133-27532-00-00

Drilling Log

FEET	DESCRIPTION	FEET	DESCRIPTION
0-21	Overburden	790-816	Shale
21-70	Lime	816-818	Coal
70-190	Shale	818-840	Shale
190-265	Lime - Water	840-841	Coal
265-364	Shale	841-985	Shale
364-380	Lime	940	Gas Test 3"at 1/4" Choke
380-448	Shale	985-988	Coal
448-460	Lime	988-1000	Shale
460-461	Coal	990	Gas Test 12"at 1/4" Choke
461-466	Shale	1000-1140	Mississippi Lime
466-515	Lime	1015	Gas Test 12"at 1/4" Choke
515-516	Coal	1140	Gas Test 12"at 1/4" Choke
516-523	Shale	1140	TD
523-524	Coal		
524-539	Lime		Surface 21'
539-540	Coal		
540-547	Shale		
547-548	Coal		
548-580	Lime		
580-581	Coal		
581-710	Shale		
710-712	Coal		
712-789	Shale		
789-790	Coal		

RECEIVED
JAN 21 2011
BY: _____