



**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: \_\_\_\_\_



1058719

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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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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"/> Commingled <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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**McPherson Drilling LLC Drillers Log**

**PO# LRG022811-1 AFE# D11018**

<b>Rig Number:</b> 1	<b>S. 2 T. 29 R. 17 E</b>
<b>API No. 15- 133-27543</b>	<b>County: Neosho</b>
Elev. 912	<b>Location:</b>

<b>Gas Tests:</b>	
260	0
550	0
615	28.3
630	28.3
710	28.3
725	24.5
775	24.5
790	28.3
810	24.5
820	24.5
875	24.5
950	24.5
960	28.3
1013	24.5
1030	24.5
1155	24.5
<b>Comments:</b>	
Start injecting @	50"

<b>Operator:</b> POSTROCK
<b>Address:</b> 210 Park Ave Ste 2750 Oklahoma City, OK 73102-5641
<b>Well No:</b> 2-3 <b>Lease Name:</b> Goins Liv Trust
<b>Footage Location:</b> 400 ft. from the SOUTH Line
820 ft. from the WEST Line
<b>Drilling Contractor:</b> McPherson Drilling LLC
<b>Spud date:</b> 2/21/2011 <b>Geologist:</b> Ken Recoy
<b>Date Completed:</b> 2/22/2011 <b>Total Depth:</b> 1155

<b>Casing Record</b>			<b>Rig Time:</b>	
	Surface	Production	HIT H2O @	
<b>Size Hole:</b>	11"	7 7/8"	45" 210"	
<b>Size Casing:</b>	8 5/8"		500" 900	lot of h2o
<b>Weight:</b>	20#		<b>ODOR @</b>	579
<b>Setting Depth:</b>	22	MCP	<b>DRILLER:</b>	Andy Coats
<b>Type Cement:</b>	Portland			
<b>Sacks:</b>	4	MCP		

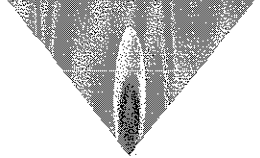
**Well Log**

Formation	Top	Btm.	HRS.	Formation	Top	Btm.	Formation	Top	Btm.
soil	0	2		lime	502	540	shale	817	822
sand	2	14		coal	540	543	sandshale	822	869
sandshale	14	85		shale	543	555	coal	869	871
lime	85	90		sandshale	555	579	shale	871	943
shale	90	103		lime	579	606	blackshale	943	945
lime	103	174		summit	606	611	shale	945	950
coal	174	176		lime	611	618	coal	950	952
shale	176	215		mulky	618	623	shale	952	954
sand	215	221		lime	623	627	blackshale	954	956
lime	221	248		shale	627	705	shale	956	1012
blackshale	248	251		coal	705	707	coal	1012	1014
shale	251	254		shale	707	715	shale	1014	1018
blackshale	254	256		lime	715	718	miss. Lime	1018	1155
shale	256	259		coal	718	720			
lime	259	310		shale	720	745			
shale	310	320		coal	745	746			
blackshale	320	324		shale	746	770			
shale	324	344		blackshale	770	773			
sand	344	352		shale	773	785			
sandshale	352	405		coal	785	787			
lime	405	418		shale	787	807			
shale	418	489		blackshale	807	810			
lime	489	498		shale	810	815			
shale	498	502		blackshale	815	817			

Called Judy @ KCL 9:00 am.

# QUEST

Resource Corporation



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

AFE  
011018

TICKET NUMBER **7034**  
FIELD TICKET REF # \_\_\_\_\_  
FOREMAN Joe Blanchard  
SSI 631040  
API 15-133-27543

## TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-23-11	Goings Living trust 2-3	2	29	17	NO

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	11:30	4:00		904850		4.5	<i>Joe Blanchard</i>
MAHART		3:30		903600		4	<i>Mahart</i>
Nathan Cochran		4:00		903139	932900	4.5	<i>Nathan Cochran</i>
Judith T. Jarman		3:30		Training		4	<i>Judith Jarman</i>
Otto G. Powers		4:00		903255		4.5	<i>Otto G. Powers</i>
Wes Cochran		3:30		931585	931387	4	<i>Wes Cochran</i>

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 1155 CASING SIZE & WEIGHT 5 1/2 14#  
 CASING DEPTH 1150.06 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 27.38 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4bpm

REMARKS:

washed 20 Ft 5 1/2 in hole swept 2 SKS gel to surface. Installed Cement head RAW 19 BBI dye of 190 SKS of cement to get dye to surface. Flush pump. Pump wiper plug to bottom of set float shoe.

1 hr wait on casing truck due to truck being blocked in on 1<sup>st</sup> location. started casing 1:00 started cement 3:00 20 minute wait on water due to water trucks being used to fill frac tanks

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	4.5 hr	Foreman Pickup	
903255	4.5	Cement Pump Truck	
903600	4	Bulk Truck	
931585	4	Transport Truck	
933387	4	Transport Trailer	
904735	4	80 Vac	
	1150.06 FT	Casing 5 1/2	
	7	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac Baffles 4" # 4 1/2	
	140 SK	Portland Cement	
	40 SK	Gilsonite	
	2 SK	Flo-Seal	
	15 SK	Premium Gel	
	6 SK	Cal Chloride	
	1	KCL 5 1/2 Basket	
	7000 gal	City Water	
903139	4.5 hr	Casing tractor	
932900	4.5 hr	Casing trailer	

TDd. M. Pearson Drilling 02/22/2011 Tuesday @ 1 PM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	40.14	40.14		Date: 02-22-2011 Tuesday
2	38.04	78.18	Cement Basket	Well Name & #: Goins Living Trust 2-3
3	38.62	116.80	116 ft. to 155 ft.	Township & Range: 29S-17E
4	38.79	155.59		County/State: Neosho / Kansas
5	38.24	193.83		SSI #: 631040
6	38.16	231.99		AFE#: D11018
7	39.09	271.08		Road Location: 120th & Anderson, E & N into
8	38.36	309.44		API# 15-133-27543
9	37.96	347.40		
10	38.34	385.74		
11	38.95	424.69		
12	38.62	463.31		
13	39.30	502.61		
14	38.82	541.43		
15	39.01	580.44		
16	39.12	619.56		
17	40.13	659.69		← Set Upper Baffle @ 659.69 ft. Big Hole.
18	38.80	698.49		
19	39.47	737.96		
20	38.67	776.63		
21	38.62	815.25		
22	36.35	851.60		
23	38.83	890.43		
24	38.36	928.79		← Set Lower Baffle @ 928.79 ft. Small Hole.
25	38.67	967.46		
26	40.32	1007.78		
27	39.29	1047.07		
28	39.47	1086.54		
29	38.52	1125.06		
Sub	25.00	1150.06		

*Jennifer  
Ken*

Use all 29 joints + the 25 ft. Sub.

**Be Safe!**

Miss. Top 1024 ft.  
Log Bottom 1145.00 ft.  
Tally Bottom 1150.06 ft.  
Driller TD 1155 ft.

**Teamwork works! Put Safety 1st!**  
 TRS ✓ Ke Rawley  
 Sr. Geologist  
 Cell 620-305-9900  
 02-22-2011