



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: _____



1065549

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

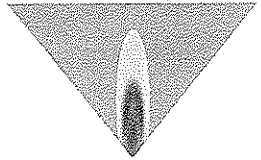
Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

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
620-431-9500AFE#
D11020

TICKET NUMBER

7049

FIELD TICKET REF #

FOREMAN Joe BlanchardSSI 631080API 15-133-27546TREATMENT REPORT
& FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-14-11	Thornton Frances 26-3	26	29	17	NO

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	6:00	12:30		904850		6.5	Joe Blanchard
Nathan Graham	6:00			903255			Nat Graham
Wes Graham	6:00			931585	931387		Wes Graham
Chris Mitchell	6:00			903142	932895		Chris Mitchell
Justin F. Jansen	6:00			903204			Justin F. Jansen

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 1231 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 1222.12 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 29.09 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4bpm

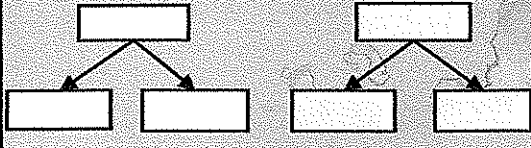
REMARKS:

washed 35 Ft 5 1/2 in hole swept 2 SKS gel • Installed Cement head RAN 21
 BBI dye at 200 SKS cement to get dye to surface. Flush pump. Pump wiper plug
 to bottom of set float shoe.

Did not have tally sheet until 9:15 AM started casing 10:00 started
 cement 11:30

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	6.5 hr	Foreman Pickup	
903255		Cement Pump Truck	
903206		Bulk Truck	
931387		Transport Truck	
931585		Transport Trailer	
904730		80 Vac	
	1222.12 Ft	Casing 5 1/2	
	7	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac Baffles 4' # 4 1/2"	
	150 SK	Portland Cement	
	40 SK	Gilsonite	
	2 SK	Flo-Seal	
	15 SK	Premium Gel	
	6 SK	Cal Chloride	
	1	Kit 5 1/2 Basket	
	7000 gal	City Water	
903142	6.5 hr	Casing tractor	
932895	6.5 hr	Casing trailer	

TD'd. McPherson Drilling 03-12-2011 Saturday @ 1 PM.

Pipe #	Length	Running Total	Baffle Location	Casing Tally Sheet				
1	38.14	38.14		Location: Thornton, Frances 26-3				
2	39.14	77.28	Conestoga	SSI# 12345 631080				
3	40.33	117.61		Date: 3/12/2011				
4	38.49	156.10	Barked	Well TD: 1231'				
5	39.75	195.85	156 ft.	AFE # 12345 D11026				
6	39.86	235.71		API #15-133-27546 T29S-R17E				
7	38.61	274.32		Neosho County, KS.				
8	38.92	313.24		1/2 mile West of 85th & Bethany, N into ✓				
9	39.23	352.47		<div style="text-align: center;"> Baffle Location  </div>				
10	39.28	391.75						
11	38.81	430.56						
12	39.58	470.14						
13	38.71	508.85						
14	38.63	547.48						
15	40.11	587.59						
16	38.28	625.87						
17	39.58	665.45						
18	39.75	705.20	← Set Upper Baffle @ 705.20 ft. Big Hole.				Notes	
19	39.11	744.31						
20	39.18	783.49						
21	39.91	823.40						
22	39.62	863.02						
23	39.38	902.40						
24	38.1	940.50						
25	38.81	979.31	← Set Lower Baffle @ 979.31 ft. Small Hole.					
26	39.18	1018.49						
27	38.61	1057.10						
28	39.02	1096.12						
29	38.81	1134.93						
30	38.52	1173.45						
31	38.67	1212.12						
Sub	10	1222.12	Tally Bottom					
Use all 31 joints + the 10 ft. Sub.								

Max Top = 1092 ft.
 Tally Bottom = 1222.12 ft.
 Drill TD = 1231 ft.
 Log Bottom = 1231.10 ft.

Ke Recoy
 Thank You! ✓
 Ken Recoy, Sr. Geologist
 Cell 620-305-9900
 3/14/2011

McPherson Drilling LLC Drillers Log

PO# LRG031211-7 AFE# D11026

Rig Number: 1	S. 26	T. 29	R.17 E
API No. 15- 133-27546	County: Neosho		
Elev. 963	Location:		

Gas Tests:	
79	0
204	0
279	0
360	0
379	0
555	SB
605	SB
630	SB
655	SB
680	SB
750	SB
765	SB
805	SB
930	SB
1030	SB
1080	10.90
1105	10.90
1231	10.90
Comments:	
Start injecting @	

Operator: POSTROCK
Address: 210 Park Ave Ste 2750 Oklahoma City, OK 73102-5641
Well No: 26-3 Lease Name: THORTON FRANCES
Footage Location: 660 ft. from the NORTH Line 660 ft. from the WEST Line
Drilling Contractor: McPherson Drilling LLC
Spud date: 3/11/2011 Geologist: Ken Recoy
Date Completed: 3/12/2011 Total Depth: 1231

Casing Record			Rig Time:	
	Surface	Production	h2o @ 1087'	
Size Hole:	11"	7 7/8"		
Size Casing:	8 5/8"			
Weight:	20#			
Setting Depth:	22	MCP		
Type Cement:	Port		DRILLER: Andy Coats	
Sacks:	4	MCP		

Well Log										
Formation	Top	Btm.	HRS.	Formation	Top	Btm.		Formation	Top	Btm.
soil	0	2		lime	436	441		shale	910	1015
sand shale	2	8		shale	441	458		coal	1015	1017
shale	8	56		black shale	458	459		shale	1017	1021
coal	56	58		shale	459	549		coal	1021	1023
shale	58	102		lime	549	550		shale	1023	1076
lime	102	115		coal	550	552		coal	1076	1078
shale	115	127		lime	552	587		shale	1078	1087
lime	127	196		coal	587	589		miss lime	1087	1231
black shale	196	198		shale	589	628				
lime	198	199		coal	628	629				
sand shale	199	234		lime	629	649				
coal	234	236		summit	649	653				
shale	236	240		lime	653	662				
lime	240	269		mulky	662	670				
shale	269	275		lime	670	672				
coal	275	278		shale	672	739				
lime	278	343		coal	739	741				
shale	343	353		shale	741	756				
coal	353	355		lime	756	758				
shale	355	363		coal	758	760				
coal	363	364		shale	760	795				
shale	364	394		coal	795	797				
coal	394	395		shale	797	908				
shale	395	436		coal	908	910				



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

October 07, 2011

POSTROCK MIDCONTINENT PRODUCTION LLC
OKLAHOMA TOWER
210 PARK AVE, STE 2750
OKLAHOMA CITY, OK 73102

RE: API Well No. 15-133-27546-00-00
THORNTON, FRANCES 26-3
NWNW, 26-29S-17E
NEOSHO County, Kansas

Dear Operator:

Upon review of the above referenced well, the following documentation appears to be incomplete pursuant to K.A.R. 82-3-107. The requested information below should be submitted to the KCC to my attention by October 21, 2011 for processing. Failure to submit the requested documentation may be punishable by an administrative penalty pursuant to the General Rules and Regulations for the State of Kansas.

- | | |
|--|---|
| <input checked="" type="checkbox"/> All drilling and completion information. No ACO-1 has been received as of this date. | <input type="checkbox"/> TD and Completion date. (Month, Day, Year) |
| <input type="checkbox"/> Must be notarized and signed. | <input type="checkbox"/> Must have Footages from nearest outside corner of section. |
| <input type="checkbox"/> Must have the ORIGINAL HARD COPY of ACO-1. | <input type="checkbox"/> Side two on back of ACO-1 must be completed. |
| <input type="checkbox"/> We do not accept fax copies. | <input type="checkbox"/> Must have final copies of DST's/Charts. |
| <input type="checkbox"/> Must be put on new form and typed. | <input type="checkbox"/> All original complete open and cased hole wireline logs run. |
| <input type="checkbox"/> API # or date when original well was first drilled. | <input type="checkbox"/> A copy of geological reports compiled by wellsite geologist. |
| <input type="checkbox"/> Contractor License #. | <input type="checkbox"/> A copy of all cement job logs showing type, amounts and additives used to cement casing strings, squeeze and/or to plug and abandon. (Note: Cement tickets must be from company providing the cement, not necessarily the contractor.) |
| <input type="checkbox"/> Designate type of Well Completion. | <input type="checkbox"/> Any commingling information; File on the ACO-4 form. |
| <input type="checkbox"/> If Workover/Re-entry, need old well information, including original completion date. | <input type="checkbox"/> Anything HIGHLIGHTED on ACO-1. |
| <input type="checkbox"/> Spud date. (Month, Day, Year) | |
| <input type="checkbox"/> Other: | |

K.C.C. regulation 82-3-107 provides confidentiality, upon written request, for a period of one year from the date of such letter request. Confidentiality rights are waived if the ACO-1 remains incomplete, or is not timely filed (within 120 days from the well's spud date) including: electric logs, geologist's wellsite reports, driller's logs, and Kansas Geological Survey requested samples.

Do not hesitate to call the Kansas Corporation Commission, Conservation Division, at (316) 337-6200 if there are any questions. PLEASE RETURN THIS FORM AND ANY ENCLOSURES WITH YOUR REPLY. Note: If the intent is incorrect, you need to file a corrected intent.

Sincerely,

DEANNA GARRISON
Production Department