



KANSAS CORPORATION COMMISSION 1065611
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

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: _____



1065611

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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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	COOPER, S DWIGHT 14-1
Doc ID	1065611

All Electric Logs Run

DIL
CDL
NDL
TEMP

QUEST

Resource Corporation

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

TICKET NUMBER

[Signature] 7075 ✓

FIELD TICKET REF #

FOREMAN Joe Blanchard

SSI 629680

API 15-099-24645

AFE
D11038

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-9-11	Cooper Dwight 14-1	14	35	18	LB

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	7:00	1:30		904850		6.5	<i>[Signature]</i>
Dustin Porter	6:30	12:00		903600		5.5	<i>[Signature]</i>
Wes Gahgan	7:00	12:00		931505	931395	5	<i>[Signature]</i>
Justin T. Jansen	7:00	1:30		903255		4.5	<i>[Signature]</i>
Nathan Gahgan	6:30	1:30		Foreman AU TRAINING		6.5	<i>[Signature]</i>

JOB TYPE Longstrung HOLE SIZE 7 7/8 HOLE DEPTH 1009 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 1000.95 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 23.83 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS:

~~Installed~~ Installed wash head RAV 15K gal & 16 BB dye & 150 SKS of cement to get dye to surface. Flush pump. Pump wiper plug to bottom of set float shoe.

Started casing 9:00 Started cement 11am

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	6.5 hr	Foreman Pickup	
903255	4.5 hr	Cement Pump Truck	
903600	5.5 hr	Bulk Truck	
931505	5 hr	Transport Truck	
931395	5 hr	Transport Trailer	
		80 Vac	
	1000.95 ft	Casing 5 1/2"	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	1	Frac Baffles	
	130 SK	Portland Cement	
	30 SK	Gilsonite	
	1 SK	Flo-Seal	
	9 SK	Premium Gel	
	5 SK	Cal Chloride	
	1	5 1/2 Basket	
	7000 gal	Quarry Water	
903142	4 hr	Casing tractor	
932900	4 hr	Casing trailer	

4" SMALL Hole

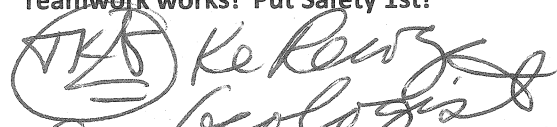
903142
932900

TDd. McPherson Drilling Wednesday June 08, 2011 @ 1PM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	38.60	38.60		Date: 6/8/11
2	38.11	76.71	Cement Basket	Well Name & #: Cooper, S. Dwight 14-1
3	39.10	115.81		Township & Range: 35S-18E
4	39.99	155.80	@ 115ft.	County/State: Labette / Kansas
5	39.78	195.58		SSI #: 629680
6	39.02	234.60		AFE#: D11038
7	39.20	273.80		Road Location: Nation and Gray, E & N into
8	39.07	312.87		API# 15-099-24645
9	38.60	351.47		PO# MB10060711-2
10	38.93	390.40		
11	39.15	429.55	No upper Baffle here. Not enough room.	
12	39.47	469.02		
13	40.57	509.59		
14	39.34	548.93		
15	39.47	588.40		
16	38.86	627.26		
17	39.63	666.89	Set Lower Baffle @ 666.89ft. Small Hole.	
18	38.30	705.19		
19	39.10	744.29		
20	38.25	782.54		
21	39.44	821.98		
22	39.07	861.05		
23	39.51	900.56		
24	39.64	940.20		
25	35.75	975.95		
Sub	25.00	1000.95	Tally Bottom	
Use all 25 joints + the 25ft. Sub.				
Put Safety 1st!				
Push fluids! Take breaks!				

Miss Top 865ft.
Tally Bottom 1000.95ft.
Drill TD 1005ft.
Log Bottom 1009.70ft.

Teamwork works! Put Safety 1st!


 Ke Roney
 Geologist
 Cell 620 3059900
 06-08-2011

