



KANSAS CORPORATION COMMISSION 1065618  
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: \_\_\_\_\_



1065618

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	BRADLEY, RICHARD E 3-1
Doc ID	1065618

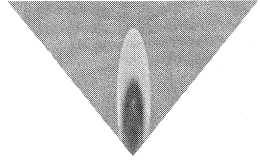
All Electric Logs Run

DIL
CDL
NDL
TEMP

# QUEST

Resource Corporation

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



AFE  
D11050

TICKET NUMBER ✓ 7083

FIELD TICKET REF # \_\_\_\_\_

FOREMAN Joe Blanchard

SSI 631190

API 15-125-32088

## TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-13-11	Bradley Richard 3-1	3	35	17	MG

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	11:00	4:00		904850		5	Joe Blanchard
Justin T. Jansen	11:00	↓		903255		↓	Justin T. Jansen
Wes Cochran	11:00			931505	931395		Wes Cochran
Dustin Porter	11:00			903600			Dustin Porter

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 1032 CASING SIZE & WEIGHT 5 1/2 14  
 CASING DEPTH 1019.82 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 24.28 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 46bpm

REMARKS:

washed 50 Ft 5 1/2 in hole swept 2 SKS gel. Installed Cement head Ran 16 BBI dye & 155 SKS of Cement to get dye to surface - Flush pump. Pump Plug to bottom set float shoe.  
 started casing 11:30 started Cement 3:00  
 4 hr Round trip for Bulk truck to reload in Humboldt KS

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	5 hr	Foreman Pickup	
903255	hr	Cement Pump Truck	
903600	hr	Bulk Truck	
931505	hr	Transport Truck	
931395	hr	Transport Trailer	
		80 Vac	
	1019.82	Casing 5 1/2	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac Baffles 4" #4 1/2	
	120 SK	Portland Cement	
	30 SK	Gilsonite	
	1 SK	Flo-Seal	
	8 SK	Premium Gel	
	5 SK	Cal Chloride	
	1	5 1/2 Basket	
	7000 gal	City Water	
903142	2 hr	Casing TRACTOR	
932900	2 hr	Casing tractor	

Drill. McPherson drilling Friday 06/10/11 @ 1PM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	39.11	39.11		Date: 6/10/11
2	39.53	78.64	Cement Basket	Well Name & #: Bradley, Richard E. 3-1
3	39.18	117.82		Township & Range: 35S-17E
4	39.80	157.62	@ 157 ft.	County/State: Montgomery / Kansas
5	38.41	196.03		SSI #: 631190
6	40.66	236.69		AFE#: D11050
7	39.42	276.11		Road Location: 3000 and Anderson, S & W into
8	39.19	315.30		API# 15-125-32088
9	39.62	354.92		PO# MB10061011
10	40.07	394.99		
11	37.84	432.83	← Set Upper Baffle @ 432.83 ft. Big Hole.	
12	38.57	471.40		
13	38.21	509.61		
14	39.45	549.06		
15	38.14	587.20		
16	39.19	626.39		
17	38.26	664.65		
18	38.90	703.55		
19	38.02	741.57		
20	38.44	780.01	← Set Lower Baffle @ 780.01 ft. Small Hole.	
21	39.49	819.50		
22	38.69	858.19		
23	38.69	896.88		
24	38.83	935.71		
25	36.22	971.93		
26	39.89	1011.82		
Sub	8.00	1019.82	Tally Bottom	
Use all 26 joints + the 8 ft. Sub.				
Be Safe.				
This is the bottom load!				

Miss Top 898 ft.  
Tally Bottom 1019.82 ft.  
Driller TD 1030 ft.  
Log Bottom 1032.00 ft.

Teamwork works! Put Safety 1st!

~~TKD~~ Ke Reury  
 Sr. Geologist  
 620 305 9900 Cell  
 06-10-2011



