

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1065772

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 #		API No. 15
Name:		Spot Description:
Address 1:		
Address 2:		Feet from North / South Line of Section
City: Sta	ate: Zip:+	Feet from East / West Line of Section
		Footages Calculated from Nearest Outside Section Corner:
		County:
		Lease Name: Well #:
		Field Name:
-		
		Producing Formation:
Designate Type of Completion:		Elevation: Ground: Kelly Bushing:
New Well Re-I	Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW	SWD SIOW	Amount of Surface Pipe Set and Cemented at: Fee
Gas D&A	ENHR SIGW	Multiple Stage Cementing Collar Used? Yes No
OG	GSW Temp. Abd.	If yes, show depth set: Fee
CM (Coal Bed Methane)		If Alternate II completion, cement circulated from:
Cathodic Other (Core,	Expl., etc.):	feet depth to:w/sx cmi
If Workover/Re-entry: Old Well Info	o as follows:	
Operator:		
Well Name:		Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:	Original Total Depth:	
Deepening Re-perf.	Conv. to ENHR Conv. to SWD	Chloride content: ppm Fluid volume: bbls
		Dewatering method used:
Plug Back:	Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled	Permit #:	
Dual Completion	Permit #:	Operator Name:
	Permit #:	Lease Name: License #:
	Permit #:	Quarter Sec TwpS. R East Wes
GSW	Permit #:	County: Permit #:
Spud Date or Date Read Recompletion Date	ched TD Completion Date or Recompletion Date	

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:

	Side Two	1065772
Operator Name:	Lease Name:	Well #:
Sec TwpS. 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.

Yes No		-	n (Top), Depth an		Sample
Yes No	Name	e		Тор	Datum
<pre>Yes □ No Yes □ No Yes □ No Yes □ No</pre>					
CASING	RECORD Ne	w Used			
Report all strings set-c	onductor, surface, inte	rmediate, producti	on, etc.		
Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
	Yes No Yes No Yes No Yes No Yes No CASING Report all strings set-co Size Casing	Yes No Yes No Yes No Yes No Yes No Yes No Size Casing Weight	Yes No Size Casing Weight	Name Yes No Size Casing Weight Setting Type of	Name Top Yes No CASING RECORD New Used Report all strings set-conductor, surface, intermediate, production, etc. Size Casing Weight Setting Type of

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Shots Per Foot		PERFORATION Specify Fo		RD - Bridge F Each Interval		e			ement Squeeze Record d of Material Used)	Depth
TUBING RECORD:	Si	ze:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed F	Product	ion, SWD or ENHF	λ .	Producing N		ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITIO	N OF (GAS:			METHOD	OF COMPLE	TION:		PRODUCTION INTER	RVAL:
Vented Sold		Used on Lease		Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)		
(If vented, Sub	mit ACC)-18.)		Other (Specify))					

Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	BUETOW, KEVIN 29-1
Doc ID	1065772

All Electric Logs Run

GRN	
DIL	
NDL	
CDL	
TEMP	



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

<u>30 sr</u>

95

7000gal

35

SK

SK

SIC

h

Gilsonite Flo-Seal

Premium Gel

Cal Chloride

City Water

*=- 51/2

Casing

Casing tractor

AFE DII045

FOREMAN	Jan Block
SSI	

FIELD TICKET REF # _____

TICKET NUMBER

7087

			TREAT & FIELD	MENT REPORT TICKET CEMEN	г /	\PI		
DATE	WELL NAME & NUMBER SECTION TOWNSHIP RA							COUNTY
6-14-11	Bue	tow	Kevina	29-	1			MG
FOREMAN / OPERATOR	TIME	TIME	LESS LUNCH	TRUCK #	TRAILER #	TRUC		EMPLOYEE SIGNATURE
Wes Gahman	12:00	2:00	9	931505	971395	; 2	C	in John
The BLANChord				904850			Jac	Berla
Justin 7. Janson				903235				st ffrom
Dustu Brtck		V		903600			- ⁽ 2	sta lotez.
SLURRY WEIGHT <u>13</u> DISPLACEMENT REMARKS: <u>Twstalled</u> SKS of con bottom d	Cemen Cemen Sut f	the togen	e at	IX PSI	Flus	те <u>4</u> 16 <u>В</u> ВІ ритр І	dye Dump 1	4 160 Plug to
was a		vaare	49++4/U 3.2	5 10 6				· · · · · · · · · · · · · · · · · · ·
ACCOUNT CODE	QUANTITY or U	INITS		DESCRIPTION OF SEF	RVICES OR PROD	UCT		TOTAL AMOUNT
904850	2		Foreman Pickup					
903255			Cement Pump Truck					
903600			Bulk Truck					
931505			Transport Truck					
931365		K	Transport Trailer 80 Vac					
	1067.	21 81	Casing 51/2			\rightarrow		
	1001.	L C	Centralizers					
		1	Float Shoe			}		
			Wiper Plug	~	1 1			
9		1	Frac Baffles	2 1310	holf			
	125	SK	Portland Gement					

Basket

freilor

903142 932900

VDd. Aanton Onelling 06/13/11 monday @ 2 PM ≥ Kevin Buetow 29-1 Pipe # Length **Running Total Baffle Location Casing Tally Sheet** 38 12 Location. 39.44 Cenn 7.56 SSI# 87 Date: 6/13/11 1081 55.58 Well TD: 5 94.96 - AFEAD/1045 39,87 39.51 39.43 313 CODEC CASU 39.26 353.03 PO# MB10061311-2 10 39.37 392.40 l 38.42 30.82 Nourd **Baffle Location** .72 509.09 39 31 Nº NOWNO 39.50 39.59 16 39.24 666. Notes 39,58 706. 38.23 144. 54 Boffle@823.57ft. Big Aole. A 35 90 38.90 40.05 980.85 ,25 1020 39,26 1059.36 8.00 TallyBollon 1067. Sr. Geologist messtop 945 fd.) QUEST Tally Bottom 1067.36 ft. This is the TOPT prille TO 1081 ft. Log Botton 1083.42fd-1,OAD Cell 6203059900 * Using a Big Hole Boffle of the Lower to use up the Big Holes. 06-13-11-

Air Drilling Specialist Oil & Gas Wells

THORNTON AIR ROTARY, LLC Office Phone: 620-879-2073

PO Box 449 Caney, KS 67333

Date Started	6/10/2011
Date Completed	6/13/2011

Vell No.	Operator	Lease	A.P.I #	County	State
29-1	Post Rock Energy	Buetow, Kevin	15-125-32097-00-00	Montgomery	Kansas
1/4	1/4	1/4	Sec.	Twp.	Rge.
			29	34	17
			X		
Drillor	Tune /M/all	Commentitiend	Casing Lload	Donth	Cize of Llele

Sean	Gas	4	22'	8 5/8	1081	7 7/8	
Driller	Type/Well	Cement Used	Casing Used		Depth	Size of Hole	

Formation Record

0-2	DIRT	444-449	BLACK SHALE	
2-17	CLAY	449-451	LIME	
17-25	SHALE	451-469	SHALE	
25-33	LIME	455	GAS TEST-SLIGHT BLOW	
33-86	SHALE	469-470	COAL	
86-99	LIME	470-483	SHALE	
99-102	BLACK SHALE	483-498	SANDY SHALE	
102-115	LIME	498-500	LIME	
115-140	SHALE	500-503	SHALE	
140-143	SAND	503-504	COAL	
143-150	SANDY SHALE	504-531	BLACK SHALE	
150-185	SAND	531-532	COAL	
185-207	SANDY SHALE	532-562	SAND	
205	GAS TEST - NO GAS	555	GAS TEST - SAME	
207-251	SHALE	562-564	COAL	
251-254	LIME	564-585	SAND	
254-259	SHALE	585-600	SANDY SHALE	
259-279	LIME (PAWNEE)	600-927	SHALE	
279-285	79-285 BLACK SHALE		GAS TEST-4 1/2 OZ., 1/4 = 3.58	
280	GAS TEST - NO GAS	927-928	COAL	
285-286	COAL	928-941	SHALE	
286-290	SHALE	931	GAS TEST - SAME	
290-365	SAND(PERU) GOOD OIL ODOR 302-330	941-960	LMY CHAT (MISS.)	
365-379	365-379 SANDY SHALE		GAS TEST-6 1/2 OZ., 1/4 = 4.30	
379-410	LIME (OSWEGO)	960-1050	LIME	
380	WENT TO WATER	1050-1081	CHAT/CHIRT /PICKED UP WATER	
405	GAS TEST - NO GAS	1081	GAS TEST - SAME	
410-414	BLACK SHALE	1081	TD	
414-444	LIME			
430	GAS TEST - NO GAS			