



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



1065841

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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# QUEST

Resource Corporation

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

AFE 011043

## TREATMENT REPORT & FIELD TICKET CEMENT

TICKET NUMBER

✓7093

FIELD TICKET REF #

FOREMAN Joe Blanchard

SSI 630430

API 15-099-24650

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-20-11	ORTh Jill 32-1	32	33	18	LB

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	6:00	10:45		904850		4.75	Joe Blanchard
Justin T. James	6:00	↓		903197		↓	Justin T. James
Wes Graham	6:00		931505	931395	Wes Graham		
DUSTEN PORTER	6:00		903600		DUSTEN PORTER		

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 983 CASING SIZE & WEIGHT 5 1/2 14#  
 CASING DEPTH 974.02 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 23.19 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4bpm

REMARKS:

washed 10 Ft swept 1SK gel. Installed Cement head RAN 14 BBI dye & 153 SKS of Cement to get dye TO surface. Flush pump. Pumped Wiper plug to bottom & set float shoe.

started casing 8:30 started cement 9:45

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	4.75 hr	Foreman Pickup	
903197	hr	Cement Pump Truck	
903600	hr	Bulk Truck	
901505	hr	Transport Truck	
931395	hr	Transport Trailer	
		80 Vac	
	974.02	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	
	9 SK	Premium Gel	
	5 SK	Cal Chloride	
	1	5 1/2 Basket	
	7000 gal	City Water	
903139	4.5 hr	Casing tractor	
932895	4.5 hr	Casing trailer	

TD'd. Houston Drilling Friday 06-17-11 @ 1 PM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	39.24	39.24		Date: 6/17/11
2	38.98	78.22	Cement Basket	Well Name & #: Orth, Jill A. 32-1
3	38.48	116.70		Township & Range: 33S-18E
4	38.60	155.30	@ 155 ft.	County/State: Labette / Kansas
5	39.89	195.19		SSI #: 630430
6	38.43	233.62		AFE#: D11043
7	39.66	273.28		Road Location: 1000 & Douglas, E & S into
8	39.95	313.23		API# 15-099-24650
9	38.32	351.55		
10	38.59	390.14	← Set Upper Baffle @ 390.14 ft. Big Hole.	
11	38.30	428.44		
12	39.23	467.67		
13	38.89	506.56		
14	38.65	545.21		
15	39.17	584.38		
16	38.14	622.52		
17	39.43	661.95		
18	39.56	701.51		
19	38.56	740.07	← Set Lower Baffle @ 740.07 ft. Small Hole.	
20	38.45	778.52		
21	39.28	817.80		
22	38.54	856.34		
23	38.34	894.68		
24	38.75	933.43		
25	40.59	974.02	Tally Bottom	
Use all 25 joints & No Sub.				
Be Safe !!				
Pick up any Tools at the Well Site.				
Top Load				

Miss Top 837 ft.  
Tally Bottom 974.02 ft.  
Driller TD 981 ft.  
Log Bottom 982.80 ft.

Teamwork works! Put Safety 1st!

JAS. Ke Remy  
 Sr. Geologist  
 620 305 9900  
 06-17-2011

Air Drilling Specialist  
Oil & Gas Wells

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

PO Box 449  
Caney, KS 67333

Date Started	<b>6/16/2011</b>
Date Completed	<b>6/17/2011</b>

Well No.	Operator	Lease	A.P.I #	County	State
<b>32-1</b>	<b>Post Rock Energy</b>	<b>Orth, Jill A.</b>	<b>15-099-24650-00-00</b>	<b>Labette</b>	<b>Kansas</b>

1/4	1/4	1/4	Sec.	Twp.	Rge.
			<b>32</b>	<b>33</b>	<b>18 E</b>

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
<b>Sean</b>	<b>Gas</b>	<b>4</b>	<b>22' 8 5/8</b>	<b>981</b>	<b>7 7/8</b>

**Formation Record**

0-3	DIRT	448-450	LIME		
3-7	CLAY	450-454	BLACK SHALE		
7-15	LIME	454-456	COAL		
15-35	SHALE	456-467	SHALE		
35-36	COAL	467-469	BLACK SHALE		
36-40	SHALE	469-473	SHALE		
40-52	LIME	473-475	COAL		
52-54	BLACK SHALE	475-578	SHALE		
54-66	LIME	480	GAS TEST-10 1/2 OZ., 1/2=20 MCF		
66-100	SHALE	578-579	COAL		
100-115	SAND	579-610	SHALE		
115-197	SHALE	610-618	SAND		
197-218	LIME (PAWNEE)	618-625	SANDY SHALE		
218-224	BLK SHALE (LEXINGTON)	625-626	COAL		
224-300	SHALE	626-691	SANDY SHALE		
230	GAS TEST - NO GAS	680	GAS TEST - SAME		
300-334	LIME (OSWEGO)	691-692	COAL ?		
330	GAS TEST - NO GAS	692-823	SHALE		
334-340	BLK SHALE (SUMMIT)	806	GAS TEST - SAME		
355	GAS TEST - NO GAS	823-826	COAL		
340-368	LIME	826-835	SHALE		
368-372	BLK SHALE (MULKY)	831	GAS TEST-3#, 1/2", MCF-59.2		
372-373	COAL	835-845	CHAT/CHIRT (MISS.)		
373-384	LIME	845-900	LIME		
380	GAS TEST-4 1/2OZ, 1/2=13.3 MCF	856	GAS TEST - SAME		
384-415	SHALE	900-932	CHAT/CHIRT		
415-417	COAL	932-981	LMY CHIRT		
417-433	SHALE	981	GAS TEST-1#, 1", MCF-25.8		
433-434	COAL	981	TD		
434-448	SHALE				