



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: _____



1065842

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
620-431-9500

AFE #
011041

TICKET NUMBER

✓ 7103

FIELD TICKET REF # _____

FOREMAN Joe Blanchard

SSI 631410

API 15-099-24648

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-21-11	Moldenhauer Kenneth 18-1	18	32	19	LB

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	6:00	11:30		904850		4.5	Joe Blanchard
DUSTIN PORTER	6:00	11:30		903600			Dustin Porter
Judith T. Jansen	6:00	11:30		903197			Judith T. Jansen
Wes Gehring	6:00	11:30		931505	931395		Wes Gehring

JOB TYPE Longstring HOLE SIZE 77/8 HOLE DEPTH 951 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 943.95 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 22.47 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4bpm

REMARKS:

Installed cement head Ran 12 BBI dye & 151 SKS of cement to get dye to surface. Flush pump. Pumped wiper plug to bottom & set float shoe.

Started Casing 8:30 started Cement 10:30 Muddy location due to Rain Previous night

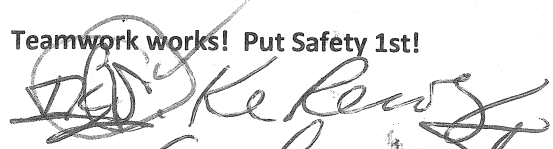
ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	4.5 hr	Foreman Pickup	
903197	hr	Cement Pump Truck	
903600	hr	Bulk Truck	
931505	hr	Transport Truck	
931395	hr	Transport Trailer	
	80 Vac		
	943.95	Casing 5 1/2	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac 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	KCL 5 1/2 Basket	
	5000 gal	City Water	
903142	4.5 hr	Casing tractor	
932900	4.5 hr	Casing tractor	

DD Thornton Drilling Monday 06/20/11 @ 2 PM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	37.90	37.90		Date: 6/20/11
2	38.46	76.36	Cement Basket	Well Name & #: Moldenhauer, Kenneth L. 18-1
3	40.14	116.50		Township & Range: 32S-19E
4	39.85	156.35		County/State: Labette / Kansas
5	39.97	196.32	@ 196ft.	SSI #: 631410
6	40.23	236.55		AFE#: D11041
7	39.43	275.98		Road Location: 18,000 & Irving, N & E into
8	38.41	314.39		API# 15-099-24648
9	39.03	353.42		
10	39.85	393.27	← Set Upper Baffle @ 393.27ft. Big Hole.	
11	39.37	432.64		
12	40.39	473.03		
13	38.34	511.37		
14	39.45	550.82	← Set Lower Baffle @ 550.82ft. Small Hole.	
15	38.62	589.44		
16	39.53	628.97		
17	39.27	668.24		
18	38.86	707.10		
19	37.89	744.99		
20	39.69	784.68		
21	38.62	823.30		
22	40.77	864.07		
23	40.10	904.17		
24	39.78	943.95	Tally Bottom	
Use all 24 joints + No Sub.				
Be Safe!				
Drink fluids. Take breaks!				
				Top Load

Miss Top 800 ft.
Tally Bottom 943.95
Driller TD 950 ft.
Log Bottom 951.60 ft.

Teamwork works! Put Safety 1st!


 Sr. Geologist
 620 305-9900
 06-20-2011

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	6/17/2011
Date Completed	6/20/2011

Well No.	Operator	Lease	A.P.I #	County	State
18-1	Post Rock Energy	Moldenhauer,	15-099-24648-00-00	Labette	Kansas
		Kenneth			
1/4	1/4	1/4	Sec.	Twp.	Rge.
			18	37	19 E

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
Sean	Gas	4	22' 8 5/8	950	7 7/8

Formation Record

0-2	DIRT	505	WENT TO WATER		
2-15	CLAY	515-536	SANDY SHALE		
15-68	SHALE	530	GAS TEST - SAME		
68-73	LIME	536-639	SHALE		
73-78	BLACK SHALE	639-640	COAL ?		
78-89	LIME	640-700	SHALE		
89-111	SAND (DAMP)	700-735	SAND / LITE ODOR		
111-210	SHALE	731	GAS TEST - SAME		
210-235	LIME (PAWNEE)	735-777	SHALE		
230	GAS TEST - NO GAS	777-778	COAL		
235-241	BLK SHALE (LEXINGTON)	778-798	SHALE		
241-294	SHALE	781	GAS TEST - SAME		
255	GAS TEST NO GAS	798-812	CHAT/CHIRT (MISS.)		
294-319	LIME (OSWEGO)	806	GAS TEST - SAME		
305	GAS TEST - NO GAS	812-830	LMY CHIRT		
319-326	BLK SHALE (SUMMIT)	830-891	LIME		
326-345	LIME	891-950	CHAT/CHIRT		
345-349	BLACK SHALE	950	GAS TEST-7OZ ON 1/2 =16.7 MCF		
349-350	COAL (MULKY)	950	TD		
350-356	LIME				
355	GAS TEST-8 1/2 OZ, ON 1/2= 18 MCF				
356-415	SHALE				
415-416	COAL				
416-430	SHALE				
430-431	COAL				
431-450	SHALE				
450-451	COAL				
451-478	SANDY SHALE				
478-479	COAL				
479-515	SHALE				