



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: _____



1065845

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) _____

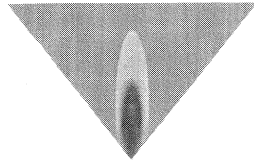
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD 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 D11059

TICKET NUMBER ✓ 7106

FIELD TICKET REF # _____

FOREMAN Joe Blanchard

SSI 631510

API 15-133-27557

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-22-11	Kromer Jerry 31-3	31	29	19	NO

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	2:30	7:00		904850		4.5	<i>Joe Blanchard</i>
DUSTIN PODDA	2:30	6:00		903600		3.5	<i>Dustin Podda</i>
Wes Gorman	2:30	7:00		931505	931395	4.5	<i>Wes Gorman</i>
Justin T. Johnson	2:30	7:00		903197		4.5	<i>Justin T. Johnson</i>

JOB TYPE long string HOLE SIZE 7 7/8 HOLE DEPTH 1120 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 1109.30 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 26.41 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4bpm

REMARKS:

Installed Cement head Ray 1 sk gel & 16 BBI dye & 165 sks of Cement to get dye to surface. flush pump Pumped wiper plug to bottom & set float shoe.

started Casing 3:00 started Cement 5:30
1 1/2 wait on Bulk truck to Return from Reloading.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	4.5 hr	Foreman Pickup	
903197	4.5 hr	Cement Pump Truck	
903600	3.5 hr	Bulk Truck	
931505	4.5 hr	Transport Truck	
931395	4.5 hr	Transport Trailer	
904730	hr	80 Vac	
	1109.30 Ft	Casing 5 1/2	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac Baffles 4" + 4 1/2"	
	125 SK	Portland Cement	
	35 SK	Gilsonite	
	1 SK	Flo-Seal	
	9 SK	Premium Gel	
	5 SK	Cal Chloride	
	1	5 1/2 Basket	
	7000 gal	City Water	
903139	3.5 hr	Casing tractor	
902900	3.5 hr	Casing trailer	

W.D. Hunter Drilling @ 2 PM Tuesday 06/21/11.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	39.53	39.53		Date: 6/21/11
2	40.95	80.48	Cement Basket	Well Name & #: Kramer, Jerry L. 31-3
3	38.21	118.69		Township & Range: 29S-19E
4	40.70	159.39	@ 159 ft.	County/State: Neosho / Kansas
5	39.32	198.71		SSI #: 631510
6	40.77	239.48		AFE#: D11059
7	39.79	279.27		Road Location: 70th & Irving, N & E into
8	39.35	318.62		API# 15-133-27557
9	38.05	356.67		
10	38.25	394.92		
11	38.38	433.30		
12	38.21	471.51		
13	39.51	511.02		
14	38.59	549.61		
15	38.97	588.58	← Set Upper Baffle @ 588.58 ft. Big Hole.	
16	38.46	627.04		
17	39.70	666.74		
18	39.03	705.77		
19	38.22	743.99		
20	39.46	783.45		
21	38.68	822.13		
22	38.34	860.47	← Set Lower Baffle @ 860.47 ft. Small Hole.	
23	39.17	899.64		
24	39.43	939.07		
25	38.19	977.26		
26	39.16	1016.42		
27	38.65	1055.07		
28	39.23	1094.30		
Sub	15.00	1109.30	Tally Bottom	
Use all 28 joints of the 15 ft. Sub.				
Be Safe. Work Together.				
Bottom Load				

Miss Top 980 ft.
Tally Bottom 1109.30 ft.
Driller TD 1120 ft.
Log Bottom 1120.65 ft.

Teamwork works! Put Safety 1st!

W.D. Keary
 Sr. Geologist
 620305 9900 Cell
 06-21-2011



Thornton Air Rotary, LLC

PO Box 449
Caney, KS 67333

Date	Invoice #
6/22/2011	144-2

Phone # 620-879-2073 E-Mail
Fax # 620-879-2073 thorntonairrotary@hotmail.com

Bill To
Post Rock Energy Corporation 210 Park Avenue, Suite 2750 Oklahoma City, OK 73102

Terms
Due on receipt

Description	Footage/Quantity	Rate	Amount
Kramer, Jerry L. Well # 31-3	1,120	8.50	9,520.00
Surface Pipe	22	20.00	440.00
Water Truck Charge (100 barrel) for loading hole		90.00	90.00
Cement	4	12.00	48.00

We appreciate the opportunity to work for you!	Total	\$10,098.00
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Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	6/20/2011
Date Completed	6/21/2011

Well No.	Operator	Lease	A.P.I #	County	State
31-3	Post Rock Energy	Kramer, Jerry L.	15-133-27557-00-00	Neosho	Kansas

1/4	1/4	1/4	Sec.	Twp.	Rge.
			31	29	19 E

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
Sean	Gas	4	22' 8 5/8	1120	7 7/8

Formation Record

0-2	DIRT	455	GAS TEST - NO GAS	800-836	SANDY SHALE
2-12	CLAY	458-460	SHALE	836-912	SHALE
12-62	LIME	460-465	LIME	912-916	BLACK SHALE
62-64	BLACK SHALE	465-469	BLK SHALE (LEXINGTON)	916-974	SHALE
64-69	LIME	469-510	SHALE	931	GAS TEST-30Z ON 1/8= .915 MCF
69-88	SHALE	480	GAS TEST - NO GAS	974-975	COAL
88-104	SAND	510-532	LIME (OSWEGO)	975-977	SHALE
104-132	SHALE	532-536	BLK SHALE (SUMMIT)	977-1010	CHAT/CHIRT (MISS.)
132-148	LIME	536-540	SHALE	981	WENT TO WATER
148-181	SHALE	540-546	LIME	1006	GAS TEST-1 1/2OZ ON 1/2= 7.42 MCF
181-197	LIME	546-550	BLK SHALE (MULKY)	1010-1060	LMY CHIRT
197-200	BLACK SHALE	550-552	LIME	1060-1120	CHAT/CHIRT
200-210	SHALE	552-556	SHALE	1120	GAS TEST - SAME
210-214	BLACK SHALE	555	GAS TEST-SLIGHT BLOW	1120	TD
214-224	SHALE	556-570	SAND		
224-226	LIME	570-631	SHALE		
226-239	SHALE	631-632	COAL		
239-245	LMY SHALE	632-650	SHALE		
245-283	SHALE	650-652	LIME		
283-286	LIME	652-655	BLACK SHALE		
286-299	SHALE	655-656	COAL		
299-314	LMY SHALE	656-672	SAND		
314-323	LIME	672-710	SHALE		
323-326	BLACK SHALE	705	GAS TEST - SAME		
326-337	LIME	710-720	SAND-GOOD OIL ODOR/SHOW		
337-431	SHALE	720-735	SANDY SHALE		
380	GAS TEST - NO GAS	735-758	SHALE		
431-432	COAL (MULBERRY)	758-761	BLACK SHALE		
432-434	SHALE	761-785	SHALE		
434-458	LIME (PAWNEE)	785-800	SAND		