



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



1069794

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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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	STICH, JOHN R 15-5
Doc ID	1069794

All Electric Logs Run

CDL
NDL
TEMP
GRN



k 47 - Yale S 1/2 down lease Rd  
 east side  
 AFE #  
 011079

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

TICKET NUMBER 7121  
 FIELD TICKET REF # \_\_\_\_\_  
 FOREMAN Nathan Gahman  
 SSI 631630  
 API 15-205-27962

**TREATMENT REPORT  
 & FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-29-11	Stich, John R. 15-5	15	29	17	WL

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Jim Blanchard	8:00	12:00		904850		4	<i>Jim Blanchard</i>
Nathan Gahman	8:00			903103		4	<i>Nat Gah</i>
Justin T. Jensen	8:00			903255		4	<i>Justin Jensen</i>
Wes Gahman	8:00			903400	932705	4	<i>Wes Gah</i>
DUSTAN POKORNY	8:00			903606		4	<i>Dustan Pokorny</i>
Matt Nuff	8:00			903139	932895	4	<i>Matt Nuff</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1146 CASING SIZE & WEIGHT 5.5 14#  
 CASING DEPTH 1142.72 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 22.20 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 bpm

REMARKS:  
 Installed cement head RAW 1SK gal & 16 <sup>BBI</sup> dye & 165 SKS of cement to get dye to surface. Flush pump. Pump wiper plug to bottom & set float shoe.

accidentally left joint #1 out. Landed plug at 1095 <sup>ft</sup> At 2000psi was following plug with wire line. Ken Reay & Troy Combs & John Michaels were notified. Joint 1 fell down into bottom load of casing on trailer & was hidden.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	4 hr	Foreman Pickup	
903255	4 hr	Cement Pump Truck	
903103	4 hr	Bulk Truck	
903400	4 hr	Transport Truck	
932705	4 hr	Transport Trailer	
904730	4 hr	80 Vac	
	1142.72 ft	Casing 5 1/2	
	7	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac Baffles 4" 4 1/2"	
	130 sk	Portland Cement	
	30 sk	Gilsonite	
	1 sk	Flo-Seal	
	<del>5 sk</del> 135K	Premium Gel	
	5 sk	Cal Chloride	
	1	<del>ker</del> 5 1/2" basket	
	7000 gal	City Water	
903139	4 hr	casing tractor	
932895	4 hr	casing trailer	

TD #1, Thornton Drilling Thursday 07-28-11 @ 4PM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	39.36	39.36		Date: 7/28/11
2	39.59	78.95	Cement Basket	Well Name & #: Stich, John R. 15-5
3	40.39	119.34		Township & Range: 29S-17E
4	39.06	158.40		County/State: Wilson / Kansas
5	38.23	196.63	@ 119 ft.	SSI #: 631630
6	39.44	236.07		AFE#: D11079
7	39.10	275.17		Road Location: K47 & Yale, S & E into
8	38.78	313.95		API# 15-205-27962
9	38.93	352.88		
10	38.12	391.00		
11	38.98	429.98		
12	38.34	468.32		
13	38.37	506.69		
14	38.98	545.67		
15	38.58	584.25		
16	38.31	622.56		
17	38.63	661.19	← Set Upper Baffle @ 661.19 ft. Big Hole.	
18	39.82	701.01		
19	38.81	739.82		
20	39.03	778.85		
21	40.00	818.85		
22	39.71	858.56		
23	39.14	897.70	← Set Lower Baffle @ 897.70 ft. Small Hole.	
24	38.67	936.37		
25	39.70	976.07		
26	38.30	1014.37		
27	38.97	1053.34		
28	39.66	1093.00		
29	39.62	1132.62		
Sub	10.10	1142.72	Tally Bottom	
<del>30</del>	<del>39.65</del>	<del>---</del>	Leave this joint out.	
<del>Sub</del>	<del>18.14</del>	<del>---</del>	Leave this Sub out.	

JOINT #1 was left out accidentally NEW TD 1093

Be Safe!

Dunk liquids!

Take Breaks!!

Use 29 joints + the 10 ft. Sub.  
Do NOT use the 18 ft Sub or joint 30.

Miss Top 1009 ft.  
Tally Bottom 1142.72 ft.  
Log Bottom 1146.30 ft.  
Driller TD 1150 ft.

Put Safety 1st! Teamwork works!!

DKS. Ke Reuzy  
Sr. Geologist  
620 305 9900 Cell  
07-28-2011

Air Drilling Specialist  
Oil & Gas Wells

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

PO Box 449  
Caney, KS 67333

Date Started	<b>7/27/2011</b>
Date Completed	<b>7/28/2011</b>

Well No.	Operator	Lease	A.P.I #	County	State
<b>15-5</b>	<b>Post Rock Energy</b>	<b>Stich, John R.</b>	<b>15-205-27962-00-00</b>	<b>Wilson</b>	<b>Kansas</b>

1/4	1/4	1/4	Sec.	Twp.	Rge.
			<b>15</b>	<b>29 S</b>	<b>17 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>1150</b>	<b>7 7/8</b>

### Formation Record

0-1	DIRT	626-627	COAL		
1-8	CLAY	627-632	LIME		
8-11	LIME	630	G.T. - 14 oz., 3/8" = 13.40 MCF		
11-68	SHALE	632-690	SHALE		
68-77	LIME	690-691	COAL		
77-88	SHALE	691-710	SHALE		
88-159	LIME	710-712	LIME		
159-162	BLK SHALE (WET)	712-714	SHALE		
162-168	LIME	714-715	COAL		
168-213	SANDY SHALE	715-756	SANDY SHALE		
213-311	LIME	756-757	COAL ?		
255	WENT TO WATER	757-854	SHALE		
311-366	SHALE	854-856	COAL		
366-411	LIME	856-948	SHALE		
411-445	SAND	931	G.T. - 5 oz., 1/2" = 14.1 MCF		
445-504	SHALE	948-950	COAL		
480	GAS TEST - NO GAS	950-954	SHALE		
504-508	LIME	954-955	COAL		
508-509	COAL (MULBERRY)	955-1003	SHALE		
509-544	LIME (PAWNEE)	956	G.T. - 9 oz., 1/2" = 18.8 MCF		
530	GAS TEST - SAME	1003-1005	COAL		
544-548	BLK SHALE (LEXINGTON)	1005-1011	SHALE		
548-584	SHALE	1006	G.T. - 5 1/2 oz., 1" = 60.5 MCF		
555	G.T.- 14 oz., 1/4" = 6.33 MCF	1011-1021	CHAT/CHIRT (MISS.)		
584-607	LIME (OSWEGO)	1021-1050	BRN LIME / CHIRT		
605	GAS TEST - SAME	1031	GAS TEST - SAME		
607-615	BLK SHALE (SUMMIT)	1050-1073	LIME		
615-623	LIME	1073-1150	CHAT / CHIRT		
620	G.T.- 8 oz., 3/8" = 10.10 MCF	1150	TD		
623-626	BLACK SHALE				