



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: _____



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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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	HOLE, LESTER 9-2
Doc ID	1069809

All Electric Logs Run

DIL
DCL
NDL
TEMP

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

December 06, 2011

CLARK EDWARDS
PostRock Midcontinent Production LLC
Oklahoma Tower
210 Park Ave, Ste 2750
OKLAHOMA CITY, OK 73102

Re: ACO1
API 15-133-27576-00-00
HOLE, LESTER 9-2
SE/4 Sec.09-28S-19E
Neosho County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
CLARK EDWARDS

QUEST

Resource Corporation

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

AFE
D11084

TICKET NUMBER ✓ 7151

FIELD TICKET REF # _____

FOREMAN Joe Blanchard

SSI _____

API _____

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-10-11	Hole Lester 9-2				NO

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
JUSTIN JANSZ	10:00	2:30	1:00	903255		4.5	<i>Justin Jansz</i>
DUSTIN FORBES	10:00	1:30	1:00	903600		3.5	<i>Dustin Forbes</i>
Joe Blanchard	10:00	2:30	1:00			4.5	<i>Joe Blanchard</i>

JOB TYPE Surface HOLE SIZE 12" HOLE DEPTH 47 CASING SIZE & WEIGHT 8⁵/₈
 CASING DEPTH 41 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 4bpm

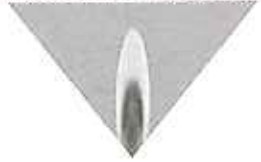
REMARKS:

Hooked up to surface casing swedge Pumped 10 BBL H₂O To get circulation
Started Cement Pumped 25 SKS of cement to get cement to surface.
Pumped 1 BBL H₂O to displace 8⁵/₈ surface Pipe. Cleaned cement equipment
up left location. Arrived on location Bart 10:15 drill Rig had
no Rigged up yet Rig started drilling surface around 11:30 started
Cementing at 1:00 pm.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	4.5 hr	Foreman Pickup	
903255	4.5 hr	Cement Pump Truck	
903600	3.5 hr	Bulk Truck	
		Transport Truck	
		Transport Trailer	
904730	3.5 hr	80 Vac	
		Casing	
		Centralizers	
		Float Shoe	
		Wiper Plug	
		Frac Baffles	
	25 SKS	Portland Cement	
		Gilsonite	
		Flo-Seal	
		Premium Gel	
		Cal Chloride	
		KCL	
	35 BBL	City Water	

QUEST

Resource Corporation



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

#1

A-FE # D11084

TICKET NUMBER

7153

FIELD TICKET REF #

FOREMAN Nathan Galyon

SSI 631760

API 15-133-22576

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-23-11	Hale, Lester 9-2	9	28S	19E	Neosho

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Galyon	6:00	1:00		904850		7	Nathan Galyon
Justin Jones	6:00	1:00		903255		7	Justin Jones
Dustin Porter	6:00	1:00		903600		7	Dustin Porter
Wes Galyon	6:00	1:00		931505	931395	7	Wes Galyon
Robert Rice	6:00	11:00		903139	932895	5	Robert Rice

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1005.60 CASING SIZE & WEIGHT 5.5 14#
 CASING DEPTH 1000.40 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 0
 DISPLACEMENT 24.4 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.0 bpm

REMARKS:

Set up on location. Noted that cement for surface casing had fell back. Had a 2 1/2 hr wait on rig crew. ~~with~~-Helped run casing then installed wash head and washed in 35 ft of casing with 1st gel. Installed plug equipment. Pumped 14 bbl dye then pumped 200sk cement ~~to get plug~~ pumped down wiper plug and set float shoe when we got cement back to surface it started flowing up from around surface casing. after plug was set cement fell back from outside the surface pipe and casing

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	1	Foreman Pickup	
903255	1	Cement Pump Truck	
931600	1	Bulk Truck	
903505	1	Transport Truck	
931395	1	Transport Trailer	
904730	1	80 Vac	
	1000.4 ft	Casing	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac Baffles Small @ 797 Big @ 474	
	159 sk	Portland Cement	
	40 sk	Gilsonite	
	2 sk	Flo-Seal	
	16 sk	Premium Gel	
	6 sk	Cal Chloride	
	2	KCC Cement basket	
	7000 gal	City Water	
903139	903139 1	Casing Truck	
932895	932895 1	Casing trailer	

QUEST

Resource Corporation

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

#2

TICKET NUMBER **7154**

FIELD TICKET REF # _____

FOREMAN Nelson Cochran

SSI _____

API _____

AREA D11089

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-25-11	Hole Lester 9-2				

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE

JOB TYPE _____ HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS:

(Continued from sheet #1) due to the amount the cement had fell back it was decided to do a better top off right away. We topped well off and cement stayed between surface pipe and the casing. But continued to slowly fall back from ground outside of surface pipe, after several attempts cement stayed up. Tore down equipment and moved to next job.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
		Foreman Pickup	
		Cement Pump Truck	
		Bulk Truck	
		Transport Truck	
		Transport Trailer	
		80 Vac	
		Casing	
		Centralizers	
		Float Shoe	
		Wiper Plug	
		Frac Baffles	
		Portland Cement	
		Gilsonite	
		Flo-Seal	
		Premium Gel	
		Cal Chloride	
		KCL	
		City Water	

DD d. Houston Drilling 08/11/11 Thursday @ 1PM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	40.10	40.10		Date: 8/10/11
2	38.65	78.75	Cement Basket	Well Name & #: Hole, Lester 9-2
3	39.95	118.70		Township & Range: 28S-19E
4	39.27	157.97	@157ft.	County/State: Neosho / Kansas
5	40.37	198.34		SSI #: 631760
6	40.60	238.94		AFE#: D11084
7	39.27	278.21		Road Location: 180th & Marshall, West into
8	40.15	318.36		API# 15-133-27576
9	38.25	356.61		
10	38.82	395.43		
11	40.51	435.94		
12	38.58	474.52	← Set Upper Baffles @ 474.52 ft. Big Hole.	
13	38.98	513.50		
14	39.40	552.90		
15	38.82	591.72		
16	38.19	629.91		
17	39.60	669.51		
18	39.77	709.28		
19	38.41	747.69	← Set Lower Baffle @ 747.69 ft. Small Hole.	
20	38.56	786.25		
21	38.30	824.55	← Cement Basket @ 824 ft. above Riverton.	
22	38.66	863.21		
23	38.39	901.60		
24	39.56	941.16		
25	38.56	979.72		
Sub	13.68	993.40		
Sub	7.00	1000.40	Tally Bottom	
Extra	38.56	1038.96	Leave out	
			Use 25 joints + both Subs.	
			Do NOT use the extra joint.	
			Be Safe.	

Miss Top 866 ft.
Tally Bottom 1000.40 ft.
Log Bottom 1005.60 ft.
Driller TD 1006 ft.

Teamwork works! Put Safety 1st!

(SRD) Ke Busby
 Sr. Geologist
 Cell 6203059900
 08-11-2011

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	8/10/2011
Date Completed	8/11/2011

Well No.	Operator	Lease	A.P.I #	County	State
9-2	Post Rock Energy	Hole, Lester	15-133-27576-00-00	Neosho	Kansas

1/4	1/4	1/4	Sec.	Twp.	Rge.
			9	28 S	19 E

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
Sean	Gas	Post Rock	43' 8 5/8	1006	7 7/8

Formation Record

0-3	DIRT	514-517	BLACK SHALE	800-815	SHALE
3-24	CLAY	517-525	SHALE	805	GAS TEST - SAME
24-32	RIVER ROCK	525-526	COAL	815-816	COAL
32-80	LIME	526-547	SHALE	816-850	SHALE
80-85	BLACK SHALE	547-549	LIME	850-853	COAL
85-89	SHALE	549-551	BLACK SHALE	853-866	SHALE
89-178	LIME	551-552	COAL	856	G.T.- 4oz., 1/2" = 12.5 MCF
178-209	SHALE	552-560	SANDY SHALE	866-883	CHAT/CHIRT (MISS.)
209-213	LIME	555	GAS TEST - SAME	881	GAS TEST - SAME
213-217	BLACK SHALE	560-587	SHALE	883-900	LIME
217-223	LIME	587-589	COAL	906	WENT TO WATER
223-230	SHALE	589-600	SAND	900-1006	CHAT/CHIRT
230-254	LIME	600-603	SANDY SHALE	996	LOTS OF WATER
254-314	SHALE	603-604	COAL	1006	G.T.- 2#, 3/8", = 27.0 MCF
305	GAS TEST - NO GAS	604-617	SHALE	1006	TD
314-363	LIME	605	G.T.- 17oz., 1/4" = 6.93 MCF		
363-367	BLACK SHALE	617-628	SAND / OIL ODOR		
367-386	SHALE	628-642	SHALE		
380	GAS TEST - NO GAS	642-643	COAL		
386-406	SAND	643-674	SHALE		
406-424	LIME	674-680	SAND / OIL ODOR		
424-427	BLACK SHALE	680	G.T.- 3oz., 1/2", = 10.9 MCF		
427-429	LIME	680-690	SANDY SHALE		
429-436	BLACK SHALE	690-691	COAL		
430	G.T.- 11oz., 1/4" = 5.60 MCF	691-785	SHALE		
436-440	LIME	780	GAS TEST - SAME		
440-442	BLACK SHALE	785-794	SAND		
442-443	COAL	794-796	COAL		
443-514	SHALE	796-799	SHALE		
455	G.T.- 5oz., 1/4", = 3.71 MCF	799-800	COAL		