



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



1095760

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 (Specify) _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	EBY 4-11
Doc ID	1095760

All Electric Logs Run

GRN
DIL
CDL
NDL
TEMP





**PostRock**  
Energy Corporation

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

TICKET NUMBER 7353 ✓  
FIELD TICKET REF# \_\_\_\_\_  
FORMAN Nathan Gahman  
AFE D12001  
SSI \_\_\_\_\_  
API \_\_\_\_\_

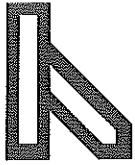
**TREATMENT REPORT  
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
6-8-12	Eby 4-11						
FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahman	6:45	11:30		905575		4.75	<i>[Signature]</i>
Dustin Porter	7:00			903103		4.5	<i>[Signature]</i>
Justin Jansen	7:00			903197		4.5	<i>[Signature]</i>
Aaron Mattox	7:00	12:30		903400		4.5	<i>[Signature]</i>
Chris Mitchell	7:00			904735		4.5	<i>[Signature]</i>

JOB TYPE Block Squeeze HOLE SIZE \_\_\_\_\_ HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING 730 OTHER 605 Jono rig crew  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS:  
rig crew on location at 8:30 set up on location tripped in tubing with packer set at 730' tried to pump into zones to be squeezed but could not break into them. Pressure up to 1000 psi fall back to 700 and held. Could not get acid truck today so job was called off.

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
905575	1	Forman Pickup	
903197	1	Cement Pump Truck	
903103	1	Bulk Truck	
903400	1	Transport Truck	
	1	Transport Trailer	
904735	1	80 Vac	
		Casing Truck	
		Casing	
		Centralizers	
		Float Shoe	
		Wiper Plug	
		Frac Baffles	
	<u>- sk</u>	Portland Cement	
		Gilsonite	
		Flo-Seal	
		Premium Gel	
		Cal Chloride	
	<u>- bbl</u>	City Water	
		KCL	
		KOL Seal	
		Cotton Seed Hulls	



**PostRock**  
Energy Corporation

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

① 1/3

TICKET NUMBER 7355 ✓  
FIELD TICKET REF# \_\_\_\_\_  
FORMAN Nathan Gahman  
AFE D12001  
SSI \_\_\_\_\_  
API \_\_\_\_\_

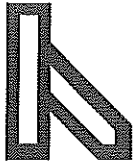
**TREATMENT REPORT  
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
6-11-12	Eby 4-11						
FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahman	6:45	6:45		905525		12	Nate G
Justin Jansen	7:00	6:30		903197		11.5	Justin Jansen
Dustin Porter	6:45	6:15		903103		11.5	Dustin Porter
Jae Rodgers	7:00	11:30		903406		4.5	Jae Rodgers
Aaron Mattox	7:00 AM	6:15		903400	932705	11.25	Aaron Mattox
Chris Mitchell	7:00	6:15		904735		11.25	Chris Mitchell

JOB TYPE Block Squeeze HOLE SIZE 7 7/8 HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 5 1/2 14#  
 CASING DEPTH Plus at 1050' DRILL PIPE \_\_\_\_\_ TUBING 2 3/8 730' OTHER Gus Jones Rig Crew  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL 75 sk WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI 500-800 RATE \_\_\_\_\_

REMARKS:  
Set packer at 730' Layed out iron and frac valve, Pumped with acid pump. Breakdown pressure was 3200 psi, rate after breakdown was 1.2 bpm at 2400 psi Staged 200gal 15% HCL 3 times to get pressure down to 700 psi at 3 bpm, Unhooked acid pump and iron hooked up cement pump Flushed 30 bbl water to displace acid.

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
905525	1	Forman Pickup	
903197	1	Cement Pump Truck	
903103	1	Bulk Truck	
903400	1	Transport Truck	
932705	1	Transport Trailer	
904735	1	80 Vac	
		Casing Truck	
		Casing	
		Centralizers	
		Float Shoe	
		Wiper Plug	
		Frac Baffles	
	<u>75 sk</u>	Portland Cement	
		Gilsonite	
		Flo-Seal	
		Premium Gel	
		Cal Chloride	
	<u>160 bbl</u>	City Water	
		KCL	
		KOL Seal	
		Cotton Seed Hulls	
903406	1	Acid Pump	
	<u>200gal</u>	<u>15% HCL</u>	



**PostRock**  
Energy Corporation

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

②  
2/3

TICKET NUMBER 7356  
FIELD TICKET REF# \_\_\_\_\_  
FORMAN Nathan Cochran  
AFE D 12001  
SSI \_\_\_\_\_  
API \_\_\_\_\_

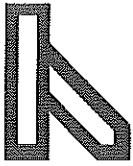
**TREATMENT REPORT  
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY		
6-11-12	E by 4-11						
FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	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:  
 Rig crew forgot their wellhead, 1hr 30min downtime to go back to Chanute to get one. Pumped 17 bbl cement down tubing squeezed well off at 900 psi shut in 8 min pressure dropped to 750 bumped back to 900 then shut in well. Cleaned up cement pump then tripped out 2 joints tubing circulated up back side to clear tubing

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



**PostRock**  
Energy Corporation

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

③ 3/3

TICKET NUMBER 7357  
FIELD TICKET REF# \_\_\_\_\_  
FORMAN Nathan Gager  
AFE D12001  
SSI \_\_\_\_\_  
API \_\_\_\_\_

**TREATMENT REPORT  
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER			SECTION	TOWNSHIP	RANGE	COUNTY
6-11-12	E by 4-11						
FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	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:  
 Reset packed pressured up to 500 psi then let sit for 1hr.  
 Tripped out of well with tubing and packer. Well started back flowing  
 so I installed wedge with ball valve and let sit for 1 hr 30 min  
 tripped in catcher with tubing washed in 6 joints tubing, washed off  
 plug then tripped out with plug

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



Air Drilling Specialist  
Oil & Gas Wells

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

PO Box 449  
Caney, KS 67333

Date Started	<b>5/30/2012</b>
Date Completed	<b>5/31/2012</b>

Well No.	Operator	Lease	A.P.I #	County	State
<b>4-11</b>	<b>Post Rock Energy</b>	<b>EBY</b>	<b>15-205-28014-00-00</b>	<b>Wilson</b>	<b>Kansas</b>

1/4	1/4	1/4	Sec.	Twp.	Rge.
			<b>4</b>	<b>27</b>	<b>15</b>

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
<b>Brantley</b>	<b>Oil</b>		<b>22' 5" 8 5/8</b>	<b>1305</b>	<b>7 7/8</b>

**Formation Record**

0-10	MUD	541-589	LIME	1041-1061	SHALE
10-22	SHALE	554	GAS TEST - SAME	1055	G.T.- 34", 1/2"= 36 MCF
22-34	SHALE	589-671	SHALE	1061-1084	SANDY SHALE
34-55	SAND / WET SAND	654	GAS TEST - SAME	1084-1090	SAND (BVILLE) / LT ODOR
34	WENT TO WATER	671-675	LIME	1090-1115	SAND / LT ODOR
55-60	LIME	675-729	LMY SHALE	1105	G.T.- 18", 3/4"= 60 MCF
60-62	SHALE	729-803	SHALE	1115-1180	DARK SAND / LT ODOR
62-64	LIME	803-804	BLK SHALE / COAL	1180-1224	SHALE
64-71	SHALE	804-825	LIME (PAWNEE)	1224-1225	BLACK SHALE
71-74	LIME	825-829	BLACK SHALE (LEXINGTON)	1225-1242	SHALE
74-76	SHALE	829	GAS TEST - SAME	1230	G.T.-32", 3/4"= 80 MCF
76-103	LIME	829-853	LMY SHALE	1242-1243	COAL (RIVERTON)
103-175	SHALE	853-874	LIME (OSWEGO)	1243-1295	GREY LIME (MISS.)
175-219	LIME	874-878	BLK SHALE (SUMMIT)	1255	GAS TEST - SAME
219-276	SHALE	878-885	LIME	1295-1305	CHAT / CHERT
276-330	LIME	880	GAS TEST - SAME	1305	GAS TEST - SAME
330-362	SANDY SHALE	885-887	COAL (MULKY)	1305	TD
362-363	COAL	887-955	SANDY SHALE		
363-375	SHALE	930	GAS TEST - SAME		
375-378	LIME	955-956	BLK SHALE (BEVEIR)		
379	GAS TEST - NO GAS	956-970	SHALE		
378-400	SHALE	970-972	LIME (V-LIME)		
400-484	LIME	972-973	COAL/BLK SHALE (CROWBERG)		
455	GAS TEST - NO GAS	973-997	LMY SHALE		
484-487	BLACK SHALE	980	GAS TEST - SAME		
487-491	LIME	997-999	LIME		
491-505	SHALE	999-1032	SHALE		
504	G.T.- 15", 1/2"= 24.5 MCF	1032-1034	BLACK SHALE		
505-538	LIME	1034-1038	SHALE		
538-541	BLACK SHALE	1038-1041	BLACK SHALE		