



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



1095787

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	SCHWATKEN, WILBUR A 26-1
Doc ID	1095787

All Electric Logs Run

GRN
DIL
CDL
NDL
TEMP

**McPherson Drilling LLC Drillers Log**

**PO#** **AFE# D11094**

<b>Rig Number:</b> 1	<b>S. 28</b>	<b>T. 31</b>	<b>R.14 E</b>
<b>API No. -15-</b> 125-32123	<b>County: Montgomery</b>		
Elev. 856	<b>Location:</b>		

<b>Gas Tests:</b>	
552'	0
727'	0
777'	0
827'	0
902'	0
927'	0
1003'	0
1027'	0
1055'	0
1078'	0
1128'	31.9
1254'	12.5
1303'	4.76
1353'	4.76
1378'	4.12
1403'	4.12
1528'	4.12
<b>Comments:</b>	
Start injecting @	

<b>Operator:</b> POSTROCK
<b>Address:</b> 210 Park Ave Ste 2750 Oklahoma City, OK 73102-5641
<b>Well No:</b> 26-1 <b>Lease Name:</b> SCHWATKEN WILBUR
<b>Footage Location:</b> 820 ft. from the NORTH Line 1,650 ft. from the EAST Line
<b>Drilling Contractor:</b> McPherson Drilling LLC
<b>Spud date:</b> 11/3/2011 <b>Geologist:</b> Ken Recoy
<b>Date Completed:</b> 11/7/2011 <b>Total Depth:</b> 1528

<b>Casing Record</b>			<b>Rig Time:</b>	
	<b>Surface</b>	<b>Production</b>		
<b>Size Hole:</b>	11	7 7/8		odor 972'
<b>Size Casing:</b>	8 5/8			h2o 1178'
<b>Weight:</b>	20			
<b>Setting Depth:</b>	21	McP		
<b>Type Cement:</b>	Portland		<b>DRILLER:</b>	Andy Coats
<b>Sacks:</b>	4	McP		

<b>Well Log</b>										
<b>Formation</b>	<b>Top</b>	<b>Btm.</b>	<b>HRS.</b>	<b>Formation</b>	<b>Top</b>	<b>Btm.</b>		<b>Formation</b>	<b>Top</b>	<b>Btm.</b>
Soil	0	2		Shale	681	703		Shale	1119	1190
Lime	2	14		Lime	703	724		Sand	1190	1198
Shale	14	18		Shale	724	748		Sand Shale	1198	1280
Lime	18	84		Lime	748	759		Shale	1280	1328
Shale	84	190		Coal	759	760		Sand	1328	1337
Lime	190	211		Lime	760	769		Coal	1337	1340
Sand Shale	211	336		Shale	769	880		Shale	1340	1374
Black Shale	336	338		Coal	880	882		Coal	1374	1375
Shale	338	390		Shale	882	884		Shale	1375	1385
Lime	390	439		Lime	884	908		Miss	1385	1528
Shale	439	450		Coal	908	910				
Lime	450	490		Shale	910	970				
Black Shale	490	492		Oswego	970	993				
Lime	492	505		Summit	993	1001				
Shale	505	540		Lime	1001	1017				
Coal	540	541		Mulky	1017	1022				
Shale	541	586		Lime	1022	1026				
Lime	586	612		Shale	1026	1049				
Shale	612	639		Coal	1049	1050				
Lime	639	659		Shale	1050	1067				
Coal	659	660		Lime	1067	1068				
Black Shale	660	663		Coal	1068	1071				
Shale	663	679		Shale	1071	1117				
Black Shale	679	681		Coal	1117	1119				

# QUEST

Resource Corporation

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

AFF D11094

## TREATMENT REPORT & FIELD TICKET CEMENT

TICKET NUMBER

7161

FIELD TICKET REF #

FOREMAN Joe Blanchard

SSI 630660

API 15-125-32123

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-10-11	Schwatken Wilbur 26-1	26	31	14	M.G.

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	8:00	3:00		904850		7	Joe Blanchard
Dustin Porter		1:30		903103		5.5	Dustin Porter
Justin T. Jansen		3:00		903255		7	Justin T. Jansen
Robert F. ICE		3:00		931385	931590	7	Robert F. ICE
MATT Culbertson		3:00		931380		7	MATT Culbertson

JOB TYPE Longstring HOLE SIZE 77/8 HOLE DEPTH 1534 CASING SIZE & WEIGHT 5/2 14#  
 CASING DEPTH 1528.92 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 36.40 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4bpm

REMARKS:

washed 290 Ft 5/2 in hole swept 2 SKS gel To surface. Installed cement head Ran 28 bbl dye of 195 SKS of cement To get dye To surface. flush pump. Pump wiper plug to bottom of set float shoe

Cement to surface.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	7 hr	Foreman Pickup	
903255	7	Cement Pump Truck	
903103	5.5	Bulk Truck	
931585	7	Transport Truck	
931590	7	Transport Trailer	
904730	7 ↓	80 Vac	
	1528.92	Casing	
	7	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	1	Frac Baffles 4" Small hole	
	150 SK	Portland Cement	
	40 SK	Gilsonite	
	2 SK	Flo-Seal	
	17 SK	Premium Gel	
	6 SK	Cal Chloride	
	2	5/2 Cement Basket	
	7500 gal	City Water	
931380	7 hr	Casing tractor	
932900	7 hr	Casing trailer	