



KANSAS CORPORATION COMMISSION 1095796
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

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: _____



1095796

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	SCHWATKEN, WILBUR A 26-2
Doc ID	1095796

All Electric Logs Run

GRN
DIL
CDL
NDL
TEMP

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	

McPherson Drilling LLC Drillers Log

PO# **AFE# D11095**

Rig Number: 1	S. 28	T. 31	R.14 E
API No. -15- 125-32129	County: Montgomery		
Elev. 825	Location:		

Gas Tests:	
703'	0
903'	0
928'	0
1028'	0
1053'	0
1079'	0
1104'	0
1153'	0
1178'	0
1228'	0
1377'	0
1402'	0
1427'	0
1540'	0
Comments:	
Start injecting @	

Operator: POSTROCK
Address: 210 Park Ave Ste 2750 Oklahoma City, OK 73102-5641
Well No: 26-2 Lease Name: SCHWATKEN WILBUR
Footage Location: 1,980 ft. from the SOUTH Line 2,120 ft. from the EAST Line
Drilling Contractor: McPherson Drilling LLC
Spud date: 11/1/2011 Geologist: Ken Recoy
Date Completed: 11/3/2011 Total Depth: 1540

Casing Record			Rig Time:	
	Surface	Production		
Size Hole:	11	7 7/8		odor 908'
Size Casing:	8 5/8			h2o 1270'
Weight:	20			
Setting Depth:	22	McP		
Type Cement:	Portland		DRILLER:	Andy Coats
Sacks:	4	McP		

Well Log										
Formation	Top	Btm.	HRS.	Formation	Top	Btm.		Formation	Top	Btm.
Soil	0	3		Lime	717	720		Sand Shale	1184	1201
Lime	3	17		Sand Shale	720	762		Shale	1201	1212
Shale	17	21		Lime	762	775		Coal	1212	1214
Lime	21	37		Shale	775	900		Shale	1214	1360
Shale	37	52		Coal	900	902		Coal	1360	1361
Lime	52	80		Shale	902	903		Shale	1361	1398
Shale	80	352		Lime	903	922		Coal	1398	1400
Sand Shale	352	372		Shale	922	926		Miss	1400	1540
Black Shale	372	374		Coal	926	927				
Shale	374	410		Shale	927	991				
Lime	410	450		Oswego	991	1017				
Shale	450	462		Summit	1017	1025				
Lime	462	505		Lime	1025	1038				
Black Shale	505	508		Mulky	1038	1046				
Lime	508	519		Lime	1046	1052				
Sand Shale	519	601		Shale	1052	1069				
Lime	601	629		Coal	1069	1070				
Shale	629	651		Shale	1070	1091				
Lime	651	674		Coal	1091	1094				
Black Shale	674	681		Shale	1094	1132				
Coal	681	683		Coal	1132	1134				
Shale	683	690		Shale	1134	1173				
Coal	690	691		Coal	1173	1174				
Shale	691	717		Shale	1174	1184				