



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: _____



1124031

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	BAILEY, MARION L 14-4
Doc ID	1124031

All Electric Logs Run

DIL
CDL
NDL
CBL



Thornton Air Rotary, LLC

PO Box 449
Caney, KS 67333

Date	Invoice #
12/7/2012	285-1

Phone # 620-879-2073 E-Mail
Fax # 620-879-2073 thorntonairrotary@hotmail.com

Bill To
Post Rock Energy Corporation 210 Park Avenue, Suite 2750 Oklahoma City, OK 73102

Terms
Due on receipt

Description	Footage/Quantity	Rate	Amount
Bailey, Marion Well # 14-4	1,082	8.50	9,197.00

We appreciate the opportunity to work for you!	Total	\$9,197.00
	Payments/Credits	\$0.00
	Balance Due	\$9,197.00

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	12/4/2012
Date Completed	12/6/2012

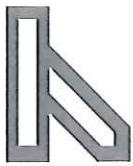
Operator	A.P.I #	County	State
Post Rock Energy	15-133-27609-00-00	Neosho	Kansas

Well No.	Lease	Sec.	Twp.	Rge.
14-4	Bailey, Marion	14	28	18

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
Oil	Brantley Thornton	5	22' 8 5/8	1082	7 7/8

Formation Record

0-10	MUD	462-500	LIME (PAWNEE)		
10-15	SAND	500-505	BLK SHALE (LEXINGTON)		
15-19	LIME	505-542	SHALE		
19-22	SANDY SHALE	542-564	LIME (OSWEGO)		
22-27	SAND	564-568	BLK SHALE (SUMMIT)		
27-37	SANDY SHALE	568-576	LIME		
37-38	LIME	576-580	BLK SHALE (MULKY)		
38-40	SHALE	580-584	LIME		
40-41	LIME	584-675	SANDY SHALE		
41-58	SANDY SHALE	675-677	COAL		
58-65	LIME	677-715	SAND		
65-70	SAND	715-730	SAND/ FAINT ODOR		
70-100	LMY SAND	730-755	SAND		
100-125	LMY SAND /DAMP	755-775	SHALE		
125-128	BLK SHALE / COAL	775-795	SAND		
128-134	SAND	795-810	SAND/ GOOD ODOR		
134-160	SHALE	810-820	SAND/GOOD ODOR & BLEED		
160-161	COAL	820-825	SAND /LT ODOR		
161-170	SHALE	825-908	SHALE		
170-190	LIME	908-915	BLACK SHALE		
190-210	SHALE	915-925	SANDY SHALE		
210-211	LIME	925-928	BLK SHALE / COAL		
211-216	BLACK SHALE	928-990	DARK SHALE		
216-222	SANDY SHALE /DAMP	990-991	COAL (RIVERTON)		
222-283	LMY SAND	991-1004	SHALE		
283-330	SHALE	1004-1041	CHAT /CHERT (MISS.)		
330-336	LIME	1041-1070	LIME		
336-454	SANDY SHALE	1070-1082	CHAT		
454-455	COAL (MULBERRY)	1082	TD		
455-462	SHALE				



PostRock
Energy Corporation

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

TICKET NUMBER **7394**
FIELD TICKET REF# _____
FORMAN Nathan Gahman
AFE D12022
SSI _____
API 15-133-27609-00-00

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-7-12	Bailey, Marion 14-4	14	28S	18E	Neosho

FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahman	6:15	11:30		905525		5.25	<i>Nathan Gahman</i>
Wes Gahman	6:15			903197		5.25	<i>Wes Gahman</i>
Larry Reddick	6:15			903103		5.25	<i>Larry Reddick</i>
Robert Rice	6:30			931400	932900	5	<i>Robert Rice</i>
Coy Chisum	6:30			931385	931590	5	<i>Coy Chisum</i>
John Walker	6:30			903401	932170	5	<i>John Walker</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1082 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 1077.66 DRILL PIPE _____ TUBING _____ OTHER Gas Jones Rig Crew
 SLURRY WEIGHT 13.5 SLURRY VOL 180 sks WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 26.3 bbl DISPLACEMENT PSI 850 MIX PSI 500 RATE 4.5 bpm

REMARKS:
 On location at 7:30, Rig crew P:15, Started running casing @ 8:45. Washed in approx 10'. Ready to cement at 10:30. Ran 60 bbl gel sweep. Pumped 12.5 bbl dye then 180 sks slurry to get dye to surface. Pumped plug down, set floats, held 1100 psi for 5 min. cleaned up equipment, left location. Slight oil sho.

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	
703 401 / 931385	2	Transport Truck	
32170 / 931590	2	Transport Trailer	
		80 Vac	
931400	1	Casing Truck	
	1077.66'	Casing	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	-	Frac Baffles	
	140 0 sks	Portland Cement	
	5 sks	Gilsonite sodium silicate	
	1.5 sk	Flo-Seal Cement Fluid loss	
	6 sks	Premium Gel	
	5 sks	Cal Chloride	
	200 bbl	City Water	
	10 lbs	KEE Thixotropic additive	
	5 sks	KOL Seal	
	1 sk	Cotton Seed Hulls	
932900	1	Casing trailer	

Pipe #	Length	Running Total	Baffle Location	PostRock Energy- Casing Tally Sheet
1	38.96	38.96		Date: 11/29/2012
2	39.78	78.74		Well Name & #: Marion Bailey 14-4
3	39.45	118.19		Township & Range: 28S-18E
4	39.65	157.84		County/State: Neosho/ Kansas
5	39.19	197.03		AFE#: D12022
6	38.4	235.43		API# 15-135-27007-00-00
7	38.26	273.69		Comments: Projected TD- 1090'
8	38.76	312.45		
9	38.48	350.93		Joints are numbered in white
10	38.28	389.21		
11	39.5	428.71		Added 1 joint & 4 subs (28-32)
12	38.88	467.59		
13	38.2	505.79		28) 38.68
14	39.7	545.49		29) 10.69
15	38.46	583.95		30) 10
16	38.88	622.83		31) 5.35
17	38.95	661.78		32) 5.27
18	38	699.78		Added these subs and joint for flexibility to adjust to actual TD
19	38.79	738.57		
20	38.35	776.92		<p>Actual TD: 1082</p> <p>Casing Tally: 1071.66</p> <p>Critical areas: 1st Joint, float every 5th joint to surface</p> <p>No baffles in this well</p>
21	39.46	816.38		
22	39.84	856.22		
23	39.52	895.74		
24	39.18	934.92		
25	38.77	973.69		
26	38.91	1012.6		
27	39.1	1051.7		
28	38.68	1090.38		
29	10.69	1101.07		
30	10	1111.07		
31	5.35	1116.42		
32	5.27	1121.69		

PostRock Energy Corp.