



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: _____



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) (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	MARPLE LIV TRUST 5-5
Doc ID	1124032

All Electric Logs Run

TEMP
DIL
CDL
NDL
CBL

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	12/6/2012
Date Completed	12/10/2012

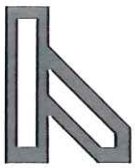
Operator	A.P.I #	County	State
Post Rock Energy	15-205-28066-00-00	Wilson	Kansas

Well No.	Lease	Sec.	Twp.	Rge.
5-5	Marple Living Trust	5	28	17

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
Oil	Brantley Thornton	5	20' 8 5/8	1132	7 7/8

Formation Record

0-8	MUD	740-746	SANDY SHALE		
8-15	LIME	746-782	SHALE		
15-109	SHALE	782-783	COAL		
109-120	LIME	783-811	SANDY SHALE		
120-125	SHALE	811-813	LIME		
125-180	SAND / DAMP	813-818	SANDY SHALE		
155	WENT TO WATER	818-819	COAL		
180-235	SHALE	819-825	SAND		
235-238	LIME	825-900	SAND / LT COLOR		
238-309	LMY SHALE	900-940	SANDY SHALE / LT		
309-315	SHALE	940-970	SHALE		
315-320	LIME	970-975	SAND / LT ODOR		
320-370	SHALE	975-987	SAND / ODOR		
370-380	SANDY LIME	987-1010	SAND / GOOD ODOR & SHOW		
380-409	LIME	1010-1035	SAND / LT ODOR		
409-413	SHALE	1035-1050	SAND / WATER, NO ODOR		
413-415	LIME	1050-1125	SANDY SHALE		
415-575	SHALE	1125-1132	BLACK SHALE		
575-615	SANDY SHALE	1132	TD		
615-620	BROWN LIME				
620-625	LMY SHALE				
625-645	LIME (PAWNEE)				
645-683	SHALE				
683-701	LIME (OSWEGO)				
701-707	BLK SHALE (SUMMIT)				
707-712	LIME				
712-718	BLK SHALE (MULKY)				
718-730	SHALE				
730-735	SAND / ODOR				
735-740	SAND / LITE ODOR				



PostRock
Energy Corporation

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

TICKET NUMBER **7396**
FIELD TICKET REF# _____
FORMAN Nathan Cahman
AFE D12017
SSI _____
API 15-205-28066-00-00

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-14-12	Marple Live Trust 5-5	5	28S	17E	Wilson

FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Cahman	8:30	12:30		905525		4	<i>Nathan Cahman</i>
Wes Cahman				903197		4	<i>Wes Cahman</i>
Larry Reddick				903103		4	<i>Larry Reddick</i>
Robert Rice				931400	932900	4	<i>Robert Rice</i>
John Walker				903401	932120	4	<i>John Walker</i>
Chris Mitchell				904735		4	<i>Chris Mitchell</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1132 CASING SIZE & WEIGHT 5 1/2 14#
 27.7 CASING DEPTH 1027.71' DRILL PIPE _____ TUBING _____ OTHER Bus Jones Rig crew
 SLURRY WEIGHT 13.5 SLURRY VOL 160 sks WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 27.5 bbl DISPLACEMENT PSI 600 MIX PSI 300 RATE 4.5

REMARKS:
 On location 8:30, Rig crew on location 8:45, started running casing at 9:30
 Washed in approx 60', Ready to cement 11:30. Pumped 60 bbl gel sweep.
 Pumped 18 bbl dye then 170 sks slurry to get dye to surface. Pumped plus
 down set float shoe. Held 1000 psi for 3 min. Fair oil show. Well will need
 top off

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	
1931505	2	Transport Truck	
20/931395	2	Transport Trailer	
904735	1	80 Vac	
931400	1	Casing Truck	
	1027.71'	Casing <u>1127.71'</u>	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
		Frac Baffles	
	125 sks	Portland Cement	
	5 sks	Gileonite sodium silicate	
	15 sks	Flo-Seal Cement fluid loss	
	8 sks	Premium Gel	
	5 sks	Cal Chloride	
	2.50 bbl	City Water	
	15 lbs	KOL Thixotropic additive	
	25 sks	KOL Seal	
	1 sk	Cotton Seed Hulls	
932900	1	Casing trailer	

Marple 5-5

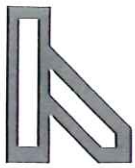
Pipe #	Length	Running Total	Baffle Location	PostRock Energy- Casing Tally Sheet
1	38.21	38.21		Date: 12/10/2012
2	38.72	76.93		Well Name & #: Marple Liv Trust 5-5
3	39.62	116.55		Township & Range: 28S-17E
4	40.07	156.62		County/State: Neosho/ Wilson
5	39.75	196.37		AFE#: D12017
6	40.05	236.42		API# 15-205-28066-00-00
7	39.85	276.27		Comments:
8	39.56	315.83		Projected TD- 1112'
9	39.17	355		Actual TD - 1132'
10	38.53	393.53		Joints are numbered in white
11	38.56	432.09		
12	39.26	471.35		Added 1 joint & 4 subs (29-33)
13	38.84	510.19		29) 39.93
14	38.37	548.56		30) 10.10
15	38.2	586.76		31) 10.09
16	39.73	626.49		32) 5.15
17	38.3	664.79		33) 5.28
18	38.69	703.48		Added these subs and joint for flexibility to adjust to actual TD
19	39.5	742.98		
20	39.37	782.35		
21	39.44	821.79		Trailer# 932900
22	39.88	861.67		
23	39.89	901.56		
24	39.05	940.61		Casing Tally - 10.20.71
25	39.28	979.89		
26	38.97	1018.86		
27	38.46	1057.32		Centralizers: 1 st joint, then every 5th joint to surface.
28	39.77	1097.09		
29	39.93	1137.02		
25	10.1	1147.12		1-24 ok
26	10.09	1157.21		
28	5.15	1162.36		
29	5.28	1167.64		
30	10.2			← From Marple 5-6
31				1127.71
32				

26
27
28

Joint 25 for #27

PostRock Energy Corp.

Troy



PostRock
Energy Corporation

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

TICKET NUMBER **7398**
FIELD TICKET REF# _____
FORMAN Nathan Gahrms
AFED 12017
SSI _____
API _____

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER			SECTION	TOWNSHIP	RANGE	COUNTY
12-18-12	Maple 5-5			5			Wilson
FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahrms	1:45	3:00		904805		1.25	<i>Nathan Gahrms</i>
Wes Gahrms				903197			<i>Wes Gahrms</i>
Chris Kincaid				903600			<i>Chris Kincaid</i>
Joe Rodgers				904730			<i>Joe Rodgers</i>

JOB TYPE Top off HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL 15 sks WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Mixed up 13.5 lb slurry then pumped down hole until we got cement to surface. Used 15 sks cement

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904805	1	Forman Pickup	
903197	1	Cement Pump Truck	
903600	1	Bulk Truck	
		Transport Truck	
		Transport Trailer	
904730	1	80 Vac	
		Casing Truck	
		Casing	
		Centralizers	
		Float Shoe	
		Wiper Plug	
		Frac Baffles	
	15 sks	Portland Cement	
		Gilsonite	
		Flo-Seal	
		Premium Gel	
		Cal Chloride	
	256 gal	City Water	
		KCL	
		KOL Seal	
		Cotton Seed Hulls	