



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
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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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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 <i>(Specify)</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	CARLSON, BARRY L 5-3
Doc ID	1124051

All Electric Logs Run

CBL
DIL
CDL
NDL
TEMP



Thornton Air Rotary, LLC

PO Box 449
Caney, KS 67333

Date	Invoice #
1/22/2013	296-2

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
Carlson, Barry L Well # 5-3	1,107	8.50	9,409.50

We appreciate the opportunity to work for you!		Total	\$9,409.50
		Payments/Credits	\$0.00
		Balance Due	\$9,409.50

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	1/11/2013
Date Completed	1/18/2013

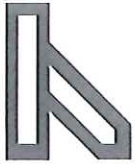
Operator	A.P.I #	County	State
Post Rock Energy	15-205-28068-00-00	Wilson	Kansas

Well No.	Lease	Sec.	Twp.	Rge.
5-3	Carlson, Barry L	5	28	17

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
Oil	Brantley Thornton	5	22' 8 5/8	1107	7 7/8

Formation Record

0-4	MUD	793-804	SANDY SHALE		
4-10	SHALE	804-805	COAL		
10-12	LIME	805-837	SANDY SHALE		
12-100	SHALE	837-838	COAL		
100-120	LIME	838-867	SAND		
120-208	SANDY SHALE	867-868	COAL		
208-209	COAL	868-880	SANDY SHALE		
209-220	SANDY SHALE	880-890	SAND / LIGHT ODOR		
220-235	LIME	890-936	SANDY SHALE		
235-252	SANDY LIME	936-973	SAND		
252-256	SAND	973-974	COAL		
256-390	SANDY LIME	974-990	SAND		
390-486	SANDY SHALE	990-1035	SAND / GOOD ODOR & SHOW		
486-530	LIME	1035-1050	SAND / LT ODOR		
530-605	SANDY SHALE	1050-1107	SHALE		
605-636	LIME (PAWNEE)	1107	TD		
636-645	SHALE				
645-670	LIME (OSWEGO)				
670-678	BLK SHALE (SUMMIT)				
678-686	LIME				
686-694	BLK SHALE (MULKY)				
694-698	LIME				
698-710	SHALE				
710-728	SAND				
728-740	SHALE				
740-742	LIME				
742-768	SANDY SHALE				
768-769	COAL				
769-792	SAND				
792-793	COAL				



PostRock
Energy Corporation

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

TICKET NUMBER **7415**
FIELD TICKET REF# _____
FORMAN Nathan Gahman
AFE D12019
SSI 28068
API 15-205-2000-00-00

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-22-13	Carlson, Barry L. 5-3	5			Wilson

FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahman	6:15	12:30		905525		6.25	Nathan G
Chris Kincaid	6:30	12:30		903197		6	Chris K
Michael Thomas	6:30	12:30		903600		6	Michael T
Colby Dean	7:00	1:00		931400	932900	6	Colby D
Darrell Chmuy	6:15	12:30		903414	93470	6.25	Darrell C
Larry Reddick	6:30	12:30		904745		6	Larry R

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1107 CASING SIZE & WEIGHT 8 1/2 14#
 CASING DEPTH 1103.25 DRILL PIPE _____ TUBING _____ OTHER Gov Jones Rig Crew
 SLURRY WEIGHT 13.5 SLURRY VOL 160 sks WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 26.9 bbl DISPLACEMENT PSI 750 MIX PSI 350 RATE 4.5

REMARKS:

On location at 8:00. Rig crew on location 8:30. Started running casing 9:15. Hit bridge at approx. 820' had to wash down, one joint. Ran remaining joints then washed in final 60' of casing. Ready to cement at 11:30. Pump 60 bbl gel sweep. Pumped 18 bbl dye then 160 sks slurry to get dye to surface. Launched plug, set float shoe at 1100psi for 5min. Will need to off

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
905525	1	Forman Pickup	
903197	1	Cement Pump Truck	
903600	1	Bulk Truck	
903414/931505	2	Transport Truck	
931120/931395	2	Transport Trailer	
904745	1	80 Vac	
931400	1	Casing Truck	
	1103.25	Casing	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	1	Frac Baffles	4.75
	125 sks	Portland Cement	
	6 sks	Gilsonite Sodium silicate	
	1.5 sks	Ho-Seal Cement Fluid loss	
	7 sks	Premium Gel	
	6 sks	Cal Chloride	
	250 bbl	City Water	
	14 lbs	KOL Thixotropic additive	
	25 sks	KOL Seal	
	2 sk	Cotton Seed Hulls	
	932900	Casing trailer	

MOHS 110 P00G

Carlson, Barry 5-3

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	39.45	39.2		Date:1/14/13
2	39.45	78.4		Well Name & #:Barry Carlson 5-3
3	39.46	117.61		Township & Range:
4	39.48	156.84		County/State: Kansas
5	39.53	196.12		AFE#:D12019
6	39.49	235.36		API# 15-205-28077-00-00
7	39.51	274.62		Comments: 28068
8	39.49	313.86		Projected TD- 1,100' 28068
9	39.46	353.07		
10	39.46	392.28		Joints are numbered in White
11	39.42	431.45		
12	39.47	470.67		Subs are in orange
13	39.45	512.87		432
14	39.5	549.12		4282
15	39.49	588.36		
16	39.5	627.61		
17	39.5	666.86		Added these subs for
18	39.47	706.08		flexibility to adjust to actual TD
19	39.48	745.31		
20	39.48	784.54		Actual TD- 1,107'
21	39.51	823.8		Log Bottom- 1,088'
22	39.5	863.05	Baffle	Casing Tally- 1,103.25'
23	39.5	902.3		Baffle- Between Joints 22 & 23 (863.05)
24	39.49	941.54		Centralizers- 1st joint, then every 5th
25	39.5	980.79		Joint to surface.
26	39.51	1020.05		
27	39.47	1059.27		
28	39.48	1098.5		
29	5	1103.25		
30	10.02	1113.02		
31	15.05	1127.82		

PostRock Energy Corp.