



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
_____ 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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	MCMILLEN, BETTY J 9-4
Doc ID	1151245

All Electric Logs Run

CBL
DIL
NDL
TEMP



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 41312
LOCATION Euers
FOREMAN Rice Ladford

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-8-13		McMillan, Betty 9-4				Wilson
CUSTOMER Post Rock Energy Corp						
MAILING ADDRESS 4402 Johnson Rd						
CITY Chanute		STATE KS	ZIP CODE			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			520	John		
			667	Chris B.		
			452/1103	Jim		

JOB TYPE surface 0 HOLE SIZE 11" HOLE DEPTH 200' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 198' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14# SLURRY VOL 12 bbl WATER gal/sk 82 CEMENT LEFT in CASING 20'
 DISPLACEMENT 11 1/2 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

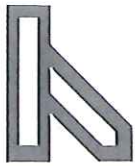
REMARKS: Safety meeting. Rig up to 8 5/8" casing. Break circulation w/ 13 bbl fresh water. Mixed 40 sacks class A cement w/ 22% rock, 22% metasilicate, 12% CST-115, 11% 2# cement. P + 10" Kalsolite @ 14#/gal. Displace w/ 11 1/2 bbl fresh water. Shut casing in w/ seal cement returns to surface. 5 bbl slurry to put. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	225.00	225.00
5406	1	MILEAGE in area	n/c	n/c
11015	40 sacks	class A cement	14.95	598.00
1102	25#	22% rock	.74	55.50
1111A	25#	22% metasilicate	2.00	150.00
1135A	19#	12% CST-115	10.55	200.45
	4#	11% 2# cement	n/c	n/c
1100A	400#	10" Kalsolite/sv	.46	184.00
5407	2.07	for mileage built truck	n/c	350.00
5561C	2 hrs	water transport	112.00	224.00
1123	3000 gals	city water	16.50/1000	49.50
			Subtotal	2636.45
			SALES TAX (6.3%)	77.96
			ESTIMATED TOTAL	2714.41

AUTHORIZATION [Signature] TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



PostRock
Energy Corporation

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

TICKET NUMBER **7454**
FIELD TICKET REF# _____
FORMAN Nathan Gahman
AFE D13017
SSI _____
API 15-205-28094-00-00

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-12-13	McMillen, Betty 9-4	9	28S	17E	Wilson

FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahman	11:00	4:00		905575		5	Nat G
Chris Kincard		2:30		931400	932900	3.5	My Bw
Greg Blackmon		3:00		904815		4	Greg

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1125 CASING SIZE & WEIGHT 5 1/2, 14#
 CASING DEPTH 1118.49 DRILL PIPE _____ TUBING _____ OTHER Cous Jones rig crew
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 9
 DISPLACEMENT 27.3 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS:
On location at 11:00. Ready to run casing at 11:15. Spotted casing truck with dozer. Washed in final 8' of casing. Ready to cement at 12:30. See COWS ticket for cement job details. Trace oil show May need toff.

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
905575	1	Forman Pickup	
		Cement Pump Truck	
		Bulk Truck	
		Transport Truck	
		Transport Trailer	
		80 Vac	
931400	1	Casing Truck	
	1118.49'	Casing	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	—	Frac Baffles	
		Portland Cement	
		Gilsonite	
	15 lbs	Fl-Seal Thixotropic Additive	
	7 sks	Premium Gel	
		Cal Chloride	
		City Water	
		KCL	
		KOL Seal	
	1 sk	Cotton Seed Hulls	
932900	1	Casing trailer	
931150	1	Dozer	



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 41317

LOCATION Futura

FOREMAN Rick Leford/Shannon Feek

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

API # 15-205-28094

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-12-13		McMillan 9-4				Wilson
CUSTOMER <u>Post Rock Energy Corp</u>			G-3 Jones			
MAILING ADDRESS <u>41402 Johnson Rd</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY <u>Chanute</u>			STATE <u>KS</u>	ZIP CODE		
			<u>520</u>	<u>John</u>		
			<u>515</u>	<u>Merle</u>		
			<u>169/T91</u>	<u>George Tyler (Thayer)</u>		

JOB TYPE LIS 0 HOLE SIZE 7 7/8" HOLE DEPTH 1125' CASING SIZE & WEIGHT 5 1/2" 14#
 CASING DEPTH 1112.49' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 135# SLURRY VOL 53 Bbl WATER gal/sk 87 CEMENT LEFT in CASING 0'
 DISPLACEMENT 27.3 Bbl DISPLACEMENT PSI 500 MIX PSI 900 Pump plug RATE _____

REMARKS: Safety meeting: Rig up to 5 1/2" casing w/ washhead. Washdown 10' to PBTD. Pump 700# gel-flush w/ balls, 15 Bbl water spacer, 15 Bbl dye water. Mixed 165 sacks class A cement w/ 2% caciz, 2% metasilicate, 1/2% csl-115, 1/16% cenithix-P, 10" Kal-wal/1sk & 1" phosswal/sk @ 13.5#/gal yield 122. Washhead pump & lines, release plug. Displace w/ 27.3 Bbl fresh water. Final pump pressure 900 PSI. Pump plug to 900 PSI release pressure, float & plug held. Good cement returns to surface = 2 Bbl slurry to pit. Job complete. Rig down.

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	0	MILEAGE <u>200 well of 2</u>	n/c	n/c
11043	165 sacks	class A cement	14.95	2446.75
1102	310#	2% caciz	.74	229.40
1111A	310#	2% metasilicate	2.00	620.00
1135A	80#	1/2% csl-115	10.55	844.00
	15#	1/16% cenithix-P	n/c	n/c
1110A	1650#	10" Kal-wal/1sk	.46	759.00
1107A	165#	1" phosswal/sk	1.29	212.85
5407A	8.58	ton mileage bulk tire	1.34	574.86
5501C	3 hrs	water transport	112.00	336.00
1123	16.50 gal	city water	16.50/gal	165.00
			subtotal	7237.86
			SALES TAX <u>6.3%</u>	333.71
			ESTIMATED TOTAL	7571.57

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

McMillen, Betty 9-4

Pipe #	Length	Running Total	Baffle Location	PostRock Energy- Casing Tally Sheet
1	39.64	39.64		Date: 2/11/2013
2	39.4	79.04		Well Name & #: Betty McMillen 9-4
3	39.76	118.8		Township & Range: 28S-17E
4	38.92	157.72		County/State: Neosho/ Kansas
5	38.25	195.97		AFE#: D13017
6	39.24	235.21		API# 15-205-28094-00-00
7	39.59	274.8		Comments:
8	39.26	314.06		Projected TD- 1125'
9	38.15	352.21		
10	39.65	391.86		Joints are numbered in white
11	39.27	431.13		
12	38.54	469.67		Added 3 subs (29-31)
13	38.73	508.4		29) 10.10
14	38.4	546.8		30) 10.06
15	38.9	585.7		31) 14.80
16	39.74	625.44		Added these subs for
17	39.3	664.74		flexibility to adjust to actual TD
18	39.7	704.44		
19	38.52	742.96		
20	38.9	781.86		
21	38.24	820.1		
22	39.93	860.03		Trailer# 932900
23	40.09	900.12		
24	39.05	939.17		Actual TD - 1125
25	38.66	977.83		Log Bottom -
26	38.58	1016.41		Casing Tally - 1118.49
27	38.82	1055.23		No Baffles
				Centralizers 1st joint then every 5th joint to surface.
28	38.36	1093.59		
29	10.1	1103.69		
30	10.06	1113.75		
31	14.8	1118.49		

PostRock Energy Corp.



PostRock
Energy Corp. 3011927

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

TICKET NUMBER **8027**
FIELD TICKET REF # _____
FOREMAN Nathan Gahman
AFE D13017
SSI _____
API _____

TREATMENT REPORT
& FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER			SECTION	TOWNSHIP	RANGE	COUNTY
4-12-13	McMiller 9-4			9			Wilson
FOREMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahman	3:00	4:00		905525		1	<i>Nathan Gahman</i>
Chris Kincaid				903255	903197	1	<i>Chris Kincaid</i>
Eric Brugher				903600		1	<i>Eric Brugher</i>
Michael Thomas				904730		1	<i>Michael Thomas</i>

JOB TYPE Top off HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14 lbs SLURRY VOL 10 sks WATER gal/sk _____ CEMENT LEFT IN CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Topped well off with 10 sks cement

703197

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICE OR PRODUCT	TOTAL AMOUNT
905525	1	Foreman Pickup	
903255	1	Cement Pump Truck	
903600	1	Bulk Truck	
		Transport Truck	
		Transport Trailer	
904730	1	80 Vac	
		Casing Truck	
		Casing Trailer	
		Casing	
		Centralizers	
		Float Shoe	
		Wiper Plug	
		Frac Baffles	
	<u>10 sks</u>	Portland Cement	
		CSA-122 Sodium Silicate	
		CGL-115 Cement Fluid Loss	
		Premium Gel	
		Cal Chloride	
	<u>10 bbl</u>	City Water	
		Chemthix-P Thixotropic	
		KOL Seal	
		Cotton Seed Hulls	

