



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)</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	LIGHTWINE, HAROLD 14-5
Doc ID	1151406

All Electric Logs Run

DIL
CDL
NDL
TEMP
CBL

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	2/13/2013
Date Completed	2/18/2013

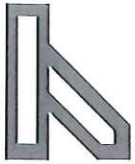
Operator	A.P.I #	County	State
Post Rock Energy	15-133-27627-00-00	Neosho	Kansas

Well No.	Lease	Sec.	Twp.	Rge.
14-5	Lightwine, Harold	14	28	18

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
Oil	Brantley Thornton	5	25' 8 5/8	956	7 7/8

Formation Record

0-8	MUD	691-719	SANDY SHALE		
8-28	SANDY SHALE	719-721	COAL		
28-110	LIME	721-765	SANDY SHALE		
110-120	SHALE	765-770	SAND		
120-160	SANDY SHALE / DAMP	770-776	SHALE		
160-175	LIME	776-777	COAL		
175-183	SHALE	777-783	SHALE		
183-200	SAND	783-784	LIME		
205	WENT TO WATER	784-805	SAND		
200-250	SANDY SHALE	785	CORE POINT		
250-295	LIME	805-815	SHALE / RED		
295-310	BLK SHALE / HARD	815-825	SHALE / GREEN		
310-330	SAND	825-956	SANDY SHALE		
330-350	SHALE	956	TD		
350-365	LIME				
365-380	SANDY SHALE				
380-395	LIME				
395-435	SHALE / GREEN				
435-465	SAND / HARD				
465-510	LIME (PAWNEE)				
510-554	SANDY SHALE				
554-574	LIME (OSWEGO)				
574-582	BLK SHALE (SUMMIT)				
582-586	LIME				
586-592	BLK SHALE (MULKY)				
592-594	LIME				
594-669	SHALE				
669-671	CCOAL				
671-690	SANDY SHALE				
690-691	COAL				



PostRock
Energy Corporation

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

TICKET NUMBER **7463**
FIELD TICKET REF# _____
FORMAN Nathan Bohms
AFE D1302G
SSI _____
API 15-133-27628-00-00

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER				SECTION	TOWNSHIP	RANGE	COUNTY
2-19-13	Lightwine, Harold 14-5				14	28S	18E	Neosho
FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE	
Nathan Bohms	3:30	6:00	7:00	905525		3.5	<i>Nathan Bohms</i>	
Chris Kincaid	3:30	6:30		931400	932900	3	<i>Chris Kincaid</i>	

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 956 CASING SIZE & WEIGHT 5 1/2, 14#
 45.97 CASING DEPTH 949.8 DRILL PIPE _____ TUBING _____ OTHER Gov Jones rig crew
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 3.1 DISPLACEMENT 23.2 DISPLACEMENT PSI 500 MIX PSI _____ RATE 4.0

REMARKS:
 Ready to run casing at 3:45, called in 80 Vac to drain pit
 Found bent joint on trailer replaced it with leftover
 joint from previous location. Washed in final 30' Ready
 to cement at 4:45. See COWS ticket for cement job details
 Slight oil show No top off needed.

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
905525	1	Forman Pickup	
		Cement Pump Truck	
		Bulk Truck	
		Transport Truck	
		Transport Trailer	
		80 Vac	
931400	1	Casing Truck	
	949.8'	Casing	
	5	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	—	Frac Baffles	
		Portland Cement	
		Gilsonite	
	0 - lbs	Flow Seal Thixotropic Additive	
	5 sks	Premium Gel	
		Cal Chloride	
		City Water	
		KCL	
		KOL Seal	
	1 sk	Cotton Seed Hulls	
932900	1	Casing trailer	



CONSOLIDATED
Oil Well Services, LLC

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

API # 15-133-27627
FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 41335

LOCATION Evrens

FOREMAN Rick J. Goffard

[Signature]
James M. Mudd

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-19-13		Harold Lightstone 14-5				Neosho
CUSTOMER Past Rock Energy Corp			603 3000			
MAILING ADDRESS 4462 Johnson Rd			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Chanute			445	Dave		
STATE KS			667	Joey		
ZIP CODE			452/7103	Jim		

JOB TYPE 1/15 0 HOLE SIZE 7 7/8" HOLE DEPTH 956' CASING SIZE & WEIGHT 5 1/2" 14#
 CASING DEPTH 945.7' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.8# SLURRY VOL. 39 Bbl WATER gal/sk 96 CEMENT LEFT in CASING 0'
 DISPLACEMENT 23' DISPLACEMENT PSI 500 MIX PSI 900 Bump plug RATE 4 BPM

REMARKS: Safety meeting - Rig up to 5 1/2" casing w/ washhead Washdown 30' to PBTD Pump
 500# gel flush w/ hulls, 16 Bbl water spacer, 13 Bbl dye water. Mixed 125 sacks thickset +
 cement w/ 5# Kel-seal/sk, 1# phenosan/sk + 1/4% CIL-115 @ 13.5#/gal. yield 185. Washhead pump +
 lines, release plug. Displace w/ 23' Bbl fresh water. Final pump pressure 500 PSI Bump plug to 900
 PSI release pressure, float + plug hold. Good cement returns to surface = 60 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	20	MILEAGE from last well	4.00	80.00
1126A	125 sacks	thickset cement	19.20	2400.00
1110A	6.25#	5# Kel-seal/sk	.46	287.50
1107A	125#	1# phenosan/sk	1.29	161.25
1135A	36#	1/4% CIL-115	10.55	316.56
5407A	6.88	for mileage bulk for 270 miles	1.34	645.34
5501C	4 hrs	water transport	112.00	448.00
1173	10,000 gals	city water	11.50/1000	115.00
			subtotal	5533.59
			7.3%	SALES TAX 243.11
			ESTIMATED TOTAL	5776.70

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

Bottom

Lightwine, Harold 14-5

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	39.64	39.39		Date: 2/15/2013
2	38.54	77.68		Well Name & #: Lightwine 14-5
3	43.29	120.72		Township & Range: 28S - 18E
4	43.34	163.81		County/State: Neosho/Kansas
5	43.38	206.94		AFE#: D13026
6	43.39	250.08		API# 15-133-27628-00-00
7	43.38	293.21		Comments: Projected TD- 940'
8	43.36	336.32		
9	43.33	379.4		
Bent - X X X 10	43.43	422.58		Joints are numbered in White
11	43.34	465.67		
12	43.38	508.8		Subs are in orange
13	43.35	554.9		
14	43.39	595.04		
15	43.33	638.12		
16	43.39	681.26		
17	43.38	724.39		Added these subs for flexibility to adjust to actual TD
18	43.38	767.52		
19	43.33	810.6		
20	43.37	853.72		Trailer# 931900
21	43.32	896.79		
22	43.37	939.91		Actual TD - 956
23	10.14	949.8		Log Bottom - 950.60
24	14.96	964.51		Casing Tally - 949.8 945.97
25	5.01	969.27		No Baffles
#30 from Wilsel 15-6	39.51	945.97		Centralizer 1st joint then every 5th joint to surface.