



**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: \_\_\_\_\_



1153043

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) \_\_\_\_\_

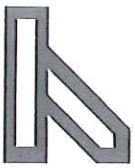
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD 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	GROSDIDIER, FRANCIS E 15-7
Doc ID	1153043

All Electric Logs Run

CBL
CDL
DIL
NDL
TEMP



**PostRock**  
Energy Corporation

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

TICKET NUMBER **7468**  
FIELD TICKET REF# \_\_\_\_\_  
FORMAN Nathan Bohmer  
AFE D13032  
SSI \_\_\_\_\_  
API 15-133-27634-00-00

**TREATMENT REPORT  
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
3-6-13	Grasdidier, Francis 15-7		15	28S	20E	Neosho	
FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Bohmer	7:00	11:00		905575		4	<i>Nathan Bohmer</i>
Chris Kincaid	6:15			931400	932900	4.75	<i>Chris Kincaid</i>
Greg Blackman	6:30			904815	933235	4.5	<i>Greg Blackman</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 631 CASING SIZE & WEIGHT 5 1/2, 14#  
 CASING DEPTH 626.81 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER Gov Jones rig crew  
 SLURRY WEIGHT 13.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 15.3 DISPLACEMENT PSI 400 MIX PSI \_\_\_\_\_ RATE 4.0 bpm

REMARKS:  
On location at 8:00, spotted trucks with dozer, Rig crew on location at 8:30. Ready to run casing at 9:00, Washed in first 25'. Ready to cement at 10:30. 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
905575	1	Forman Pickup	
		Cement Pump Truck	
		Bulk Truck	
904815	1	Transport Truck. Haul Truck	
933235	1	Transport Trailer Low boy trailer	
		80 Vac	
931400	1	Casing Truck	
	626.81'	Casing	
	3	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	—	Frac Baffles	
		Portland Cement	
		Gilsonite	
		Flo-Seal	
	4 sks	Premium Gel	
		Cal Chloride	
		City Water	
		KCL	
		KOL Seal	
	1 sk	Cotton Seed Hulls	
932900	1	Casing trailer	
931610	1	Dozer	





**CONSOLIDATED**  
Oil Well Services, LLC

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

AFE # D13032  
10# Jm030513-1

TICKET NUMBER 41364

LOCATION Lurpe KS

FOREMAN Shannon Feck

**FIELD TICKET & TREATMENT REPORT** Jerry Mead  
**CEMENT** #15-133-2763

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-6-13		Groschedler Francis 15-7				
CUSTOMER Post Rock Energy Corp 605 Jones			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 4402 Johnson Rd			445	Dave G	Extra Help	Joey K
CITY Chanute			515	merle R		
STATE KS			4524 T103	Jim W		
ZIP CODE			83	Alan G (mccoy Trk)		20 Bbl

JOB TYPE L/S HOLE SIZE 7 7/8" HOLE DEPTH 631' CASING SIZE & WEIGHT 5 1/2" @ 1-1#  
 CASING DEPTH 626.8' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.5 # SLURRY VOL 32 Bbl WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 15.5 Bbl DISPLACEMENT PSI 400 MIX PSI 900 Bump Plug RATE 4 BPM

REMARKS: Safety Meeting, Rig up to 5 1/2" casing, wash down 15-20' with 45 Bbl water, mixed 400# gal flush w/ balls, 15 Bbl water spacer, 6 Bbl dye water. mixed 85 sks Thickset cement with 5# kol-seal/sk, 1# pheno-seal/sk & 1/4% CFL-115 @ 13.5 #/gal. Shut down wash out pump & lines & displace w/ 15.5 Bbl water. Final pumping pressure of 400psi, bump plug to 900psi. Plug & flood hold. Good circulation @ all times. 6 Bbl slurry to pit. Job complete.

"Thanks Shannon & crew"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	70	MILEAGE #1 of 3 wells	4.00	280.00
1126A	85 sks	Thickset Cement	19.20	1632.00
1110 A	425 #	Kol-seal @ 5 #/sk	.46	195.50
1107 A	85 #	Pheno-seal @ 1 #/sk	1.29	109.65
1135 A	24 #	CFL-115 @ 1/4%	10.55	253.20
5407A	4.675 tons	Ton mileage bulk Truck	1.34	438.51
5501C	3 Hours	water Transport	112.00	336.00
5502C	3 Hours	80 Bbl Van Truck #83 McCoy Trucking	90.00	270.00
1173	1000 gal	City Water	99.00	99.00
		Sub Total		4643.86
		SALES TAX		167.12
		ESTIMATED TOTAL		4810.98

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.

# Grosdidier, Francis 15-7

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	40.85	40.6		Date:3/4/13
2	43.33	83.68		Well Name & #:Francis Grosdidier 15-7
3	43.37	126.8		Township & Range: 28S - 20E
4	37.25	163.8		County/State: Neosho/Kansas
5	43.28	206.83		AFE#: <b>D13032</b>
6	41.04	247.62		API# <b>15-133-27634-00-00</b>
7	37.85	285.22		<b>Comments:</b> Projected TD-625'
8	43.35	328.32		
9	43.41	371.48		Joints are numbered in White
10	43.37	414.6		
11	43.33	457.68		Subs are in orange
12	43.35	500.78		
13	43.34	546.87		Added these subs for flexibility to adjust to actual TD
14	43.37	586.99		
15	<b>43.32</b>	<b>630.06</b>		
16	<b>15.06</b>	<b>644.87</b>		
17	<b>15.55</b>	<b>616.85</b>		
18	<b>10.21</b>	<b>626.81</b>		Trailer# 932900
19	<b>5.03</b>	<b>631.59</b>		
20				<b>Actual TD - 631</b> <b>Log Bottom - 621.60</b> <b>Casing Tally - 626.81</b> <b>No Baffles</b> <b>Centralizers per SOP</b>
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
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40				

PostRock Energy Corp.



Air Drilling Specialist  
Oil & Gas Wells

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

PO Box 449  
Caney, KS 67333

Date Started	<b>3/1/2013</b>
Date Completed	<b>3/4/2013</b>

Operator	A.P.I #	County	State
<b>Post Rock Energy</b>	<b>15-133-27634-00-00</b>	<b>Neosho</b>	<b>Kansas</b>

Well No.	Lease	Sec.	Twp.	Rge.
<b>15-7</b>	<b>Grosdidier, Francis E</b>	<b>15</b>	<b>28</b>	<b>20</b>

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
<b>Oil</b>	<b>Brantley Thornton</b>	<b>5</b>	<b>21' 8 5/8</b>	<b>631</b>	<b>7 7/8</b>

**Formation Record**

Depth	Formation	TD		
0-6	MUD	631	TD	
6-10	LIME			
10-14	SANDY SHALE			
14-18	LIME			
18-20	COAL			
20-60	SHALE			
60-100	LIME			
100-188	SANDY SHALE			
188-232	LIME (PAWNEE)			
232-283	SHALE			
283-305	LIME (OSWEGO)			
305-309	BLK SHALE (SUMMIT)			
309-316	LIME			
316-323	BLK SHALE (MULKY)			
323-325	LIME			
325-328	SANDY SHALE			
328-335	SAND / LT ODOR			
335-400	SANDY SHALE			
405	WENT TO WATER			
400-402	COAL			
402-426	SANDY SHALE			
426-428	LIME			
428-482	SANDY SHALE			
482-483	COAL			
483-490	SAND			
490-510	SAND / GOOD ODOR & SHOW			
510-520	SAND / ODOR & SHOW			
520-535	SAND / NO SHOW			
535-537	COAL			
537-631	SANDY SHALE			