

Kansas Corporation Commission Oil & Gas Conservation Division

1153069

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R 🗌 East 🗌 West
Address 2:	Feet from North / South Line of Section
City:	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	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: sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	

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 Approved by: Date:

Side Two



Operator Name:				Lease l	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: She time tool open and clo recovery, and flow rate line Logs surveyed. A	sed, flowing and shues if gas to surface to	t-in pressures st, along with	s, whether s final chart(s	hut-in press	sure read	ched static level,	hydrostatic press	sures, bottom h	nole temp	erature, fluid
Drill Stem Tests Taken (Attach Additional S		Yes	No			og Formatio	n (Top), Depth ar	nd Datum	;	Sample
Samples Sent to Geol	ogical Survey	Yes	No		Nam	е		Тор	[Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy		Yes Yes Yes	No No No							
List All E. Logs Run:										
		Report a		RECORD	Ne	w Used	on, etc.			
Purpose of String	Size Hole Drilled	Size C Set (In		Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used		and Percent dditives
		Δ	ADDITIONAL	CEMENTIN	NG / SQL	 EEZE RECORD				
Purpose:	Depth	Type of (# Sacks Used Type and Percent Additives					
Perforate Protect Casing	Top Bottom									
Plug Back TD Plug Off Zone										
r lug on zone										
Shota Par Foot	PERFORATI	ON RECORD -	- Bridge Plug	s Set/Type		Acid, Fra	cture, Shot, Cemen	t Squeeze Recor	d	
Shots Per Foot	Specify	Footage of Each	h Interval Perf	orated		(Ai	mount and Kind of Ma	aterial Used)		Depth
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or EN	_	roducing Meth	nod:	g 🗌	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:	'	ħ.	METHOD OF	COMPLE	TION:		PRODUCTION	ON INTER	VAI ·
Vented Sold		Oper	n Hole	Perf.	Dually	Comp. Cor	nmingled			
(If vented, Sub		O+b-	or (Specify)		(Submit)	ACO-5) (Sub	mit ACO-4)			

Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	MIH, MARIAM L 10-4
Doc ID	1153069

All Electric Logs Run

CDL	
CDL NDL DIL	
DIL	
TEMP	
CBL	

AFE# D13043

McPherson Drilling LLC

Drillers Log

McPherson Drilling LLC

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Well No: 10-4	Lease Name milt mariom (
Footage Location	13/0 It from the (ND) (S) Line
	1980 If from the (E) (W) Line
Drilling Contractor	McPherson Drilling LLC
Spud date	Geologist
Date Completed: 3//2//	3 Total Depth: PSD'

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	Surface	Preduction	
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DATE

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

TICKET NUMBER	8000
FIELD TICKET REF #	и
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AFE D13 043	The control of the co
SSI	
API 15-133	27643-00-0

RANGE

COUNTY

TREATMENT REPORT & FIELD TICKET CEMENT

SECTION

TOWNSHIP

WELL NAME & NUMBER

3-14-13	Mib,	Marian	10-	4	10	285	19 E Newso
FOREMAN/ OPERATOR	TIME	TIME	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
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Mark Snave				931585	931507		ment this
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Cotton Seed Hulls

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PostRock Energy Corp.