



KANSAS CORPORATION COMMISSION 1153077
OIL & GAS CONSERVATION DIVISION

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 # _____

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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	GROSDIDIER, FRANCIS E 14-3
Doc ID	1153077

All Electric Logs Run

CDL
NDL
DIL
TEMP

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	3/12/2013
Date Completed	3/13/2013

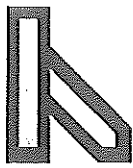
Operator	A.P.I #	County	State
Post Rock Energy	15-133-27642-00-00	Neosho	Kansas

Well No.	Lease	Sec.	Twp.	Rge.
14-3	Grosdidier, Francis E	14	28	20

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
Oil	Brantley Thornton	5	22' 8 5/8	631	7 7/8

Formation Record

0-8	MUD	520-522	COAL		
8-12	COAL	522-540	SHALE		
12-60	SHALE	540-542	COAL		
60-80	LIME	542-631	SANDY SHALE		
80-175	SHALE	631	TD		
175-180	LIME				
180-185	SHALE				
185-205	LIME				
205-207	SHALE				
207-225	LIME (PAWNEE)				
225-267	SHALE				
267-287	LIME (OSWEGO)				
287-293	BLK SHALE (SUMMIT)				
293-299	LIME				
299-306	BLK SHALE (MULKY)				
306-308	LIME				
308-402	SANDY SHALE				
402-404	COAL				
404-430	SANDY SHALE				
430-432	COAL				
432-443	SANDY SHALE				
443-444	COAL				
444-462	SANDY SHALE				
462-476	SAND/ GOOD ODOR & SHOW				
476-480	SANDY SHALE				
480-490	SHALE				
490-492	COAL				
492-500	SHALE				
500-502	COAL				
502-520	SHALE				



PostRock
Energy Corporation

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

TICKET NUMBER 7475
FIELD TICKET REF# _____
FORMAN Nathan Gahms
AFE D13049
SSI _____
API 15-133-27642-00-00

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
3-18-13	Corodidier, Francis E. 14-3		14	28S	20E	Neosho	
FORMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILR #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahms	11:00	1:30		405525		2.5	Nat G
Chris Kincaid				931400	932900	1	Chris
Greg Blackmore				904815			Greg

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 631 CASING SIZE & WEIGHT 5 1/2, 14[#]
 CASING DEPTH 627.77 DRILL PIPE _____ TUBING _____ OTHER COWS Jones rig crew
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 15.5 DISPLACEMENT PSI 300 MIX PSI _____ RATE 4.0

REMARKS:
On location at 11:00. Ready to run casing at 11:15. Washed in final 30'. Ready to cement at 12:15. See COWS ticket for cement job details. Removed trucks from location with dozer. Fair 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	
	627.77'	Casing	
	4	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	
931150	1	Dozer	



CONSOLIDATED
Oil Well Services, LLC

APL # D13041

TICKET NUMBER 41401

LOCATION Eucla KS

FOREMAN Shannon Feck

FIELD TICKET & TREATMENT REPORT

CEMENT APZ # 15-133-27642

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
3-18-13		Grosdidier, Lewis 14-3																				
CUSTOMER <u>Post Rock Energy Corp</u>			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>445</td> <td>Dave G</td> <td></td> <td></td> </tr> <tr> <td>667</td> <td>Chris B</td> <td></td> <td></td> </tr> <tr> <td>93</td> <td>Alan G</td> <td>Mccoey Trucking</td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	445	Dave G			667	Chris B			93	Alan G	Mccoey Trucking	
TRUCK #	DRIVER	TRUCK #					DRIVER															
445	Dave G																					
667	Chris B																					
93	Alan G	Mccoey Trucking																				
MAILING ADDRESS <u>4402 Johnson Rd</u>																						
CITY <u>Chanute</u>	STATE <u>KS</u>	ZIP CODE																				

JOB TYPE <u>L/S</u>	HOLE SIZE <u>7 7/8"</u>	HOLE DEPTH <u>631'</u>	CASING SIZE & WEIGHT <u>5 1/2" @ 14#</u>
CASING DEPTH <u>627.77</u>	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT <u>13.5 #/gal</u>	SLURRY VOL <u>34 Bbl</u>	WATER gal/sk <u>90</u>	CEMENT LEFT in CASING <u>0</u>
DISPLACEMENT <u>155 Bbl</u>	DISPLACEMENT PSI <u>300</u>	MIX PSI <u>Pump Plug @ 800</u>	RATE <u>Displace @ 4 BPM</u>

REMARKS: Safety meeting, Rig up to 5 1/2" casing work down 25' w/ 50 Bbl H2O, mix 1100# gal fresh w/ hulls, 15 Bbl H2O spacer, 5 Bbl dye water mixed 85 sec Thicket cement w/ 5# kot-seal/sk, 1# phenoseal/sk & 1/4% CFL-115 @ 13.5 #/gal. Shut down wash out pump & lines of displacer w/ 155 Bbl H2O. Final pumping pressure of 300 psi, bump Plug to 800 psi. Plug & Flood held. Good circulation @ all times. 5 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	0	MILEAGE #2 of 3 wells n/c on location	N/C	N/C
1126A	85 sks	Thicket Cement	19.20	1632.00
1110A	425 #	kot-seal @ 5 #/sk	.46	195.50
1107A	85 #	phenoseal @ 1 #/sk	1.29	109.65
1135A	24 #	CFL-115 @ 1/4%	10.55	253.20
5407A	4.67 Tons	Tom mileage bulk Truck (x 70 miles)	1.34	438.51
5502C	3 hours	80 Bbl Vac Truck #93 McCoy Trucking	90.00	270.00
1123	3300 gal	city water	16.8/1000	54.45
			Sub Total	3983.31
			SALES TAX	163.87
			ESTIMATED TOTAL	4147.18

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

Grosdidier, Francis E. 14-3

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	43.36	43.11		Date:3/14/13
2	43.37	86.23		Well Name & #:Francis Grosdidier 14-3
3	43.36	129.34		Township & Range: 28S - 20E
4	43.4	172.49		County/State: Neosho/Kansas
5	43.34	215.58		AFE#:D13049
6	43.37	258.7		API# 15-133-27642-00-00
7	43.37	301.82		Comments:
8	43.42	344.99		Projected TD-631'
9	43.34	388.08		
10	43.32	431.15		Joints are numbered in White
11	43.33	474.23		
12	43.36	517.34		Subs are in orange
13	39.23	559.32		
14	43.36	599.43		
15	14.92	614.1		
16	9.94	623.79		
17	10.21	633.75		Added these subs for flexibility to adjust to actual TD
18	4.48	627.77		
19				
20				Trailer# 932900
21				
22				Actual TD - 631
23				Log Bottom - 627.80
24				Casing Tally - 627.77
25				No Baffles
26				Centralizers perSOP
27				
28				
29				
30				
31				
32				
33				
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PostRock Energy Corp.