



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: _____



1153148

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	GRADY, JAMES A 5-9
Doc ID	1153148

All Electric Logs Run

CDL
NDL
DIL
TEMP



PostRock
Energy Corporation

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

TICKET NUMBER **8003**
FIELD TICKET REF # _____
FOREMAN Nathan Gahman
AFE 013037
SSI _____
API 15-205-28105-00-00

TREATMENT REPORT
& FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER			SECTION	TOWNSHIP	RANGE	COUNTY
3-19-12	Grady, James A. 5-9			5	28S	17E	Wilson
FOREMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahman	11:30	2:00		905575		2.5	<i>Nathan Gahman</i>
Chris Kincaid				931400	932900	1	<i>Chris Kincaid</i>
Eric Baugher				Training			<i>Eric Baugher</i>
Craig Blackmore				903605	933235	1	<i>Craig Blackmore</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1085 CASING SIZE & WEIGHT 5 1/2, 14#
CASING DEPTH 1081.1 DRILL PIPE _____ TUBING _____ OTHER Cow Jones rig crew
SLURRY WEIGHT 13.8 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 8
DISPLACEMENT 26.4 DISPLACEMENT PSI 400 MIX PSI _____ RATE 4.0

REMARKS: on location at 11:30. Ready to run casing at 11:45.
Did not have to wash in any casing. Ready to cement
at 12:30. See COWS ticket for cement job details.
Trace oil show. May need top off.

Smoothed out deep ruts in pad with dozer after rigging
down off location.

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICE OR PRODUCT	TOTAL AMOUNT
905575	1	Foreman Pickup	
		Cement Pump Truck	
		Bulk Truck	
903605	1	Transport Truck Haul Truck	
933235	1	Transport Trailer Lowboy Trailer	
931150	1	80 Yd Dozer	
931400	1	Casing Truck	
932900	1	Casing Trailer	
	1081.1'	Casing	
	5	Centralizers	
	1	Floot Shoe	
	1	Wiper Plug	
	—	Frac Baffles	
		Portland Cement	
		CSA-122 Sodium Silicate	
		CGL-115 Cement Fluid Loss	
	6 sks	Premium Gel	
		Cal Chloride	
		City Water	
		Chemthix-P Thixotropic	
		KOL Seal	
	1 sk	Colton Seed Hulls	



CONSOLIDATED
Oil Well Services, LLC

111 E # D13037

TICKET NUMBER 41404

LOCATION Franklin, KS

FOREMAN Shannon Fock

FIELD TICKET & TREATMENT REPORT

CEMENT

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

AP # 15-205-28105

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-17-13		Grady, James 59				Wilson
CUSTOMER Post Rock Energy Corp			Gus Jones			
MAILING ADDRESS 4402 Johnson Rd			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Chanute			445	Dave G		
STATE KS			611	Jerry K		
ZIP CODE			452 & 103	Jim M		
			#93	Alan G	meay Trucking	

JOB TYPE <u>L/S</u>	HOLE SIZE <u>7 1/2"</u>	HOLE DEPTH <u>1085'</u>	CASING SIZE & WEIGHT <u>5 1/2" @ 1.1 #</u>
CASING DEPTH <u>1081'</u>	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT <u>13.7 #/gal</u>	SLURRY VOL <u>50 Bbl</u>	WATER gal/sk <u>6.02</u>	CEMENT LEFT in CASING <u>0</u>
DISPLACEMENT <u>26 3/4</u>	DISPLACEMENT PSI <u>400</u>	MIX PSI <u>600</u>	RATE <u>Displace @ 4 BPM</u>

REMARKS: Safety Meeting, Pig up to 5 1/2" casing, wash down 5' w/ 80 Bbl mixed 600# gal flush w/ huls, 10 Bbl H2O spacer, 17 Bbl dye water, mixed 190 sls 50/50 portmix cement w/ 2% gal, 2% calcium, 3# cal-seal/sk, 5# kut-seal/sk 1# phenoseal/sk & 1/4% CFL-115 @ 13.7 #/gal, shot down wash out pump & lines & displace w/ 20 Bbl H2O, final pumping pressure at 400 psi, bumped plug @ 900 psi, plug & float hold. Good circulation @ all times, 4-5 Bbl slurry to pit. Cement was falling back. 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
1124	190 sls	50/50 portmix cement	10.95	2080.50
1118 B	365 #	gal @ 2%	.21	76.65
1102	365 #	Calcium @ 2%	.74	270.10
1101	570 #	cal-seal @ 3 #/sk	.40	228.00
1110 A	950 #	kut-seal @ 5 #/sk	.46	437.00
1107 A	190 #	phenoseal @ 1 #/sk	1.29	191.29
1135 A	50 #	CFL-115 @ 1/4%	10.55	527.50
5407A	9.12 Tons	Ton mileage bulk Truck	1.34	611.04
5502 C	3 HRS	80 Bbl Vac Truck #93 meay Trucking	90.00	270.00
1123	8400 gal	city water	16.50/1000	138.60
5501 C	3 HRS	Water Transport	112.00	336.00
		Sub Total		6196.68
		6.3% SALES TAX		248.82
		ESTIMATED TOTAL		6445.50

Ravin 3737

AUTHORIZATION Nat. Co 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.

Grady, James A. 5-9

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	43.36	43.11		Date:3/18/13
2	43.39	86.25		Well Name & #:James Grady 5-9
3	43.36	129.36		Township & Range: 28S - 17E
4	43.46	172.57		County/State:Wilson/KS
5	43.39	215.71		AFE#:D13037
6	43.33	258.79		API# 15-205-28105-00-00
7	43.34	301.88		Comments: Projected TD- 1185'
8	43.36	344.99		
9	43.35	388.09		
10	43.33	431.17		Joins are numbered in White
11	43.31	474.23		
12	43.32	517.3		Subs are in orange
13	43.32	563.37		
14	43.34	603.46		
15	43.32	646.53		
16	43.29	689.57		
17	43.38	732.7		Added these subs for
18	43.37	775.82		flexibility to adjust to actual TD
19	43.33	818.9		
20	43.32	861.97		Trailer# 932900
21	43.35	905.07		
22	43.34	948.16		Actual TD - 1085
23	43.33	991.24		Log Bottom - 1089.80
24	43.31	1034.3		Casing Tally - 1081.1
25	43.38	1077.43		No Baffles
26	43.35	1120.53		Centralizers per SOP
27	43.38	1163.66		
28	14.9	1178.31		
29	10.21	1188.27		
30	4.92	1081.1		
31				
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PostRock Energy Corp.