



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



1154449

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)* \_\_\_\_\_

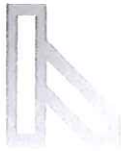
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD 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	BAILEY, MARION L 14-13
Doc ID	1154449

All Electric Logs Run

CDL
NDL
DIL
CBL
TEMP



PostRock  
Energy Corp. 0199

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

TICKET NUMBER **8014**  
FIELD TICKET REF # \_\_\_\_\_  
FOREMAN Nathan Gahman  
AFE D13059  
SSI \_\_\_\_\_  
API 15-133-27646-00-00

**TREATMENT REPORT  
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
3-28-13	Bailey, Marion L. 14-13		14	28S	18E	Neosho	
FOREMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahman	7:30	11:30		905525		4	<i>Nathan Gahman</i>
Chris Kincaid	8:30	1		903142	932895	3	<i>Chris Kincaid</i>
Greg Blackman	8:00	1		403605	933235	3.5	<i>Greg Blackman</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 967 CASING SIZE & WEIGHT 5 1/2, 14#  
 CASING DEPTH 954.17 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER Gus Jones rig crew  
 SLURRY WEIGHT 13.5 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING 0  
 DISPLACEMENT 23.3 DISPLACEMENT PSI 400 MIX PSI \_\_\_\_\_ RATE 4.0

REMARKS: On location at 8:30. Spotted trucks with dozer. Ready to run casing at 9:15. Washed in final 30'. See OOWS ticket for cement job details. Ready to cement at 10:30

~~Well~~ Well had alot of gas before cement job  
Fair oil show No tapoff needed

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICE OR PRODUCT	TOTAL AMOUNT
905525	1	Foreman Pickup	
		Cement Pump Truck	
		Bulk Truck	
903605	1	<del>Transport Truck</del> <u>Haul Truck</u>	
933235	1	<del>Transport Trailer</del> <u>Lowboy Trailer</u>	
931150	1	<del>900 Vac</del> <u>Dozer</u>	
903142	1	Casing Truck	
932895	1	Casing Trailer	
	<u>954.17'</u>	Casing	
	<u>5</u>	Centralizers	
	<u>1</u>	Float Shoe	
	<u>1</u>	Wiper Plug	
	<u>—</u>	Frac Baffles	
		Portland Cement	
		CSA-122 Sodium Silicate	
		CGL-115 Cement Fluid Loss	
	<u>5 sks</u>	Premium Gel	
		Cal Chloride	
		City Water	
		Chemthix-P Thixotropic	
		KOL Seal	
	<u>1 sk</u>	Colton Seed Hulls	



**CONSOLIDATED**  
Oil Well Services, LLC

AFE # D13059

TICKET NUMBER 41453

LOCATION Europe

FOREMAN Russ Ledger

James Mead  
GTAY/OT

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

**FIELD TICKET & TREATMENT REPORT**

API# 15-133-27646

**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-28-13		Bailey, Maroon 14-13	14	28S	18E	Neosho
CUSTOMER <u>Post Rock Energy Corp</u>			Gus Sims			
MAILING ADDRESS <u>4402 Johnson Rd</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY <u>Chanute</u>			<u>520</u>	<u>John</u>		
STATE <u>Ks</u>			<u>515</u>	<u>Merle</u>		
ZIP CODE			<u>637</u>	<u>Jim</u>		
			<u>679/TM2</u>	<u>George Taylor (George)</u>		

JOB TYPE LK 0 HOLE SIZE 7 7/8" HOLE DEPTH 967' CASING SIZE & WEIGHT 5 1/2" 14"  
 CASING DEPTH 954.17' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.5" SLURRY VOL 41 Bbl WATER gal/sk 9.0 CEMENT LEFT in CASING 0'  
 DISPLACEMENT 23 1/4 BW DISPLACEMENT PSI 400 MIX PSI 900 Bbl plus RATE 4 BPM

REMARKS: Safety meeting - Rig up to 5 1/2" casing w/ washhead. Washdown 30' to PBTD.  
Ramp 500# gel-flush w/ bulls, 10 BW water spacer, 13 Bbl dye water. Mixed 125 sacks thru set cement  
w/ 5" Kol-seal /sr, 1# phenoseal /sr + 1/4" cfl-115 @ 13.5" /gal yield 1.85. Washout pump + lines, release plus  
Displace w/ 23 1/4 BW fresh water. Final pump pressure 400 PSI. Pump plus to 900 PSI. 1000 psi pressure  
float + plug held. Grad cement returns to surface = 5 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	70	MILEAGE 1 <sup>st</sup> well of 3	4.00	280.00
1126A	125 sacks	Thru set cement	19.20	2400.00
1116A	625"	5" Kol-seal /sr	.46	287.50
1102A	125"	1# phenoseal /sr	1.29	161.25
1135A	36"	1/4" cfl-115	10.55	316.50
5407A	6 <sup>88</sup>	ten mileage bulk toll	1.34	645.34
5501C	3 hrs	water transport	112.00	336.00
5502C	3 hrs	80 Bbl UAC tax	90.00	270.00
1123	9000 gals	city water	16.59/1000	148.50
			sub total	5875.09
			SALES TAX 7.3%	241.90
			ESTIMATED TOTAL	6116.99

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

# Bailey, Marion L. 14-13

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	42.31	42.06		Date: 3/27/13
2	42.33	84.14		Well Name & #:Bailey, Marion 14-13
3	42.33	126.22		Township & Range: 28S - 18E
4	42.08	168.05		County/State: Neosho/KS
5	42.31	210.11		AFE#: D13059
6	42.32	252.18		API# 15-133-27646-00-00
7	42.3	294.23		Comments:
8	42.4	336.38		Projected TD- 940'
9	42.33	378.46		
10	42.35	420.56		Joins are numbered in Yellow
11	42.33	462.64		
12	42.36	504.75		Subs are in orange
13	42.39	549.89		
14	42.42	589.06		
15	41.41	630.22		
16	42.34	672.31		
17	42.34	714.4		Added these subs for
18	42.37	756.52		flexibility to adjust to actual TD
19	42.41	798.68		
20	42.35	840.78		Trailer# 932895
21	42.38	882.91		
22	41.93	924.59		Actual TD - 967
23	15.04	939.38		Log Bottom - 958.90
24	10.19	949.32		Casing Tally - 954.17
25	5.1	954.17		No Baffles
26				Centralizers per SOP
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
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>3/25/2013</b>
Date Completed	<b>3/26/2013</b>

Operator	A.P.I #	County	State
<b>Post Rock Energy</b>	<b>15-133-27646-00-00</b>	<b>Neosho</b>	<b>Kansas</b>

Well No.	Lease	Sec.	Twp.	Rge.
<b>14-13</b>	<b>Bailey, Marion L</b>	<b>14</b>	<b>28</b>	<b>18</b>

Type	Driller	Cement Used	Casing Used	Depth	Size of Hole
<b>Oil</b>	<b>Brantley Thornton</b>	<b>5</b>	<b>20' 8 5/8</b>	<b>957</b>	<b>7 7/8</b>

**Formation Record**

0-3	MUD	902-912	SANDY SHALE		
3-55	SAND	912-913	COAL		
55-198	LMY SAND	913-957	SANDY SHALE		
198-203	SHALE	957	TD		
203-285	LIME				
285-303	SANDY SHALE				
303-306	COAL				
306-455	SANDY SHALE				
455-462	LIME				
462-463	COAL				
463-532	LIME (PAWNEE)				
532-545	SHALE				
545-546	COAL				
546-564	LIME (OSWEGO)				
564-571	BLK SHALE (SUMMIT)				
571-575	LIME				
575-581	BLK SHALE (MULKY)				
581-679	SAND				
679-681	COAL				
681-728	SAND				
728-730	COAL				
730-745	SAND/ GOOD ODOR, LT SHOW				
745-760	SAND / NO ODOR				
760-788	SHALE				
788-789	COAL				
789-798	SANDY SHALE				
798-835	SAND/ LT ODOR				
835-856	SAND / GOOD ODOR				
856-900	SANDY SHALE				
900-902	COAL				