

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1154951

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:	Sec TwpS. R East West
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	
Phone: ()	
CONTRACTOR: License #	
Name:	
Wellsite Geologist:	
C C	
Purchaser:	
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used?
□ OG □ GSW □ Temp. A	bd. If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator:	
Well Name:	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	Chloride content: ppm Fluid volume: bbls
	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	
Dual Completion Permit #:	Operator Name:
SWD Permit #:	License #:
ENHR Permit #:	Quarter Sec Two S R East West
GSW Permit #:	County: Permit #:
Spud Date or Recompletion Date 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 III Approved by: Date:						

	Side Two	1154951
Operator Name:	Lease Name:	Well #:
Sec TwpS. 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 (Attach Additional She	eets)	Yes No)	☐ Log Name	Formatior	n (Top), Depth an		Sample
Samples Sent to Geolog	gical Survey	Yes No)	Name			Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted B (If no, Submit Copy)	Electronically	Yes No Yes No Yes No	>					
List All E. Logs Run:								
		CAS	ING RECORD	New	Used			
		Report all strings	set-conductor, surfa	ace, interm	nediate, productio	on, etc.		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / F		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated					e	,	Depth		
TUBING RECORD:	Siz	ze:	Set At:		Packer	At:	Liner R	un:	No	
Date of First, Resumed Production, SWD or ENH			ર .	Producing N		oing	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
									1	
DISPOSITION OF GAS:					METHOD (OF COMPLE	TION:		PRODUCTION INTE	RVAL:
Vented Sold		Jsed on Lease		Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)		
(If vented, Subm	it ACC	-18.)		Other (Specify)						

Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	WING LIVING TRUST 10-5
Doc ID	1154951

All Electric Logs Run

DIL	
CDL	
NDL	
TEMP	

				AFE #	D1307	3			
McPhers	on Drilling	ПС		bri	illers Log	1	McPherso	n Drilling	ILC
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Date Completed	114	£ 		Total Depth: [2	-2P				
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	Surface	Productio					R. L. all as		anianani-
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Postf

TICKET NUMBER	8020
FIELD TICKET REF #	
FOREMAN. Alathan	Gahman
AFE D 13073	

API15-205-28132-00-00

SSI____

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

	TREATMENT	REPORT
_		

& FIELD TICKET CEMENT

DATE		R	SECT	ION	TOWNSHIP	RANGE	COUNTY		
4-4-13	Wing	Living	Trust	t 10-5	. 1	0	285	16 t	Wilson
FOREMAN/ OPERATOR	TIME	TIME	LESS LUNCH	TRUCK #	TRAILE #	ER	TRUCI HOUR		EMPLOYEE ŞIGNATURE
Nathan bahman	8:00	12:00		905575			4	N	at Ge
Chris Kinepid				903142	9328				
Greg Blackman	2	1		903605	9332	35			
			19 -						
JOB TYPE Long St	ring HOLE	E SIZE Z	18	HOLE DEPTH_12	35	CAS	SING SIZE & W	/EIGHT 5	12, 14 #
CASING DEPTH	9.42 DRILL	PIPE		TUBING					rig creu
SLURRY WEIGHT 13	. 9 SLUR	RY VOL		WATER gal/sk		CEA	AENT LEFT IN C	CASING	Ø
DISPLACEMENT 30	DISPL	ACEMENT PSI	500	MIX PSI		RAT	е <u> </u>	0	
REMARKS: Op 10	cation	at Di	45, 0	lozed in	and	5	potted	+ 10	cks
Ready to	run	Casing		9:30.	Wash			final	40'
Ready to		ont at		5 Sec					cement
Job detail	s. F	air o	1 5 how	1. No	+0p0	44	nee	ded	

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICE OR PRODUCT	TOTAL AMOUNT
105575	1	Foreman Pickup	
		Cement Pump Truck	
	6	Bulk Truck	
103605	- /	Transport Truck Haul Truck	
103605 133235	1	Transport Truck Haul Truck Transport Trailer Lowhoy Trailer	
131150	1	BOtter Dozer	
903142	1	Casing Truck	
932895	1	Casing Trailer	
	1229.42	Casing	
÷	6	Centrolizers	
	1	Float Shoe	
	1	Wiper Plug	
		Frac Baffles	
		Portland Cement	
		CSA–122 Sodium Silicate	
		CGL-115 Cement Fluid Loss	
	6 5 ks	Premium Gel	
		Cal Chloride	
		City Water	
		Chemthix-P Thixotropic	
		KOL Seal	
	1 sk	Cotton Seed Hulls	

			2 - 4 N 13	1			A1.	442
G	ONSOLID/	ATED	FF # LJIS	1415				
	Dil Well Service	s, LLC	21 1/ 15-	205-13/				and h
CES I						FOREMAN_5/	nomani r	PCK
	FIELD TICKET & TREATMENT REPORT Jamus much							Olife
DATE	CUSTOMER #	WEL	L NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
4-4-13		Wing, Lu	Una Trys	1 10-5				wilson
CUSTOMER	0.1	1-	0'0	Gus .	distant white the	dilities billio bare,	children Hicks	Added to Short
	St Rich	Evergy	Corp	CAGA	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE		- I		Jung	445	Dave 6		
.44	02 John	son Rd			515	male R +	cully n.	
CITY		STATE	ZIP CODE		-1524 7103	Jim na		
Chanv	10.	K 5 +			93	Alen 6	Meny Tru	ching
JOB TYPE 1/5	Ð	HOLE SIZE 7	2-11	HOLE DEPTH	1235'	CASING SIZE & W	EIGHT 54"	E 14 M
CASING DEPTH	1227.42	DRILL PIPE					OTHER	
SLURRY WEIGH	IT 1.3.7 1/9al	SLURRY VOL_	53 Bbl	WATER gal/s	K. 6.02	CEMENT LEFT in		
DISPLACEMENT 30, 5 Bhi DISPLACEMENT PSI 500 MIX PSI BUMP Plus O 1000 RATE DISPLACE O 4. BPM						PM		
REMARKS: Solary Maching, rig up to 51/2" cosing, Wash down 20" of 80 Bbt, mixed								
600+1 get Thish w/ 111/15, 15 Bbl Han Spare, mixed 20052 Selse pormit cana								
w/ 20/0 gel, 7% callow, 3# calseal/sh, 5# het seal/sh, 1# phonoseo / sk of 1/4 %								
CFL-115 @ 13.7 #/gal. Shit down wash out pump & lines. Displace w/ 30 5 BH 1.								
Final Amping pressure of 500 psi, bumped plug @ 1000 psi, plug + float held.								
Good in	Good invation@ all times, 5-6 BU Slury to Did. Job complete. Thomas						hanks	
Trannon	+ Crew"		1					

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	* /	PUMP CHARGE	1030 00 -	1030.00
5406	50	MILEAGE	-4.00	200 00
1124	200 SKS	50/50 pozmit coment	10.95	2190:00
1118 B	385 #	601 @ 290	. 21	80.85
1102	385 11	Calium @ 2%	374	284.90
1101	600 -11	Coloscal @ 3#/sk	. 40	240.00
1110A	1000 11	Kol-Seal (5 4/5K :	, 46	460.00
NUTA	2001	Phonoseal (2 1 #/st	1.29 -	258.00
1135 A	50#	CFL-115 @ 1/4%	10.55	527 50
5407 A	96 7045	Ton mileage bulk Truck	1.34	1043 20
7501 C	35 Iles	whiter Transport	112.00	392.00
5502 C	25 Hrs	50 Bbl Vac Trier #193 Marking Tracking	90.00	31510
1123	FCWgal	city water	16.50/1000	140.25
			Sub Tutal	6761.70
		7.30/0	SALES TAX	305 24
vin 3737	. /	a	ESTIMATED TOTAL	7066,94

AUTHORIZTION / al G

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.

Wing Living Trust 10-5

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	42.53	42.28		Date: 4/4/13
2	42.53	84.56		Well Name & #: Wing Living Trust 10-
3	42.55	126.87		Township & Range: 28S - 16E
4	42.54	169.16		County/State: Wilson/KS
5	42.52	211.43		AFE#: D13073
6	42.48	253.66		API# 15-205-28132-00-00
7	42.48	295.89		Comments:
8	42.52	338.16		Projected TD- 1235'
9	42.52	380.43		
10	42.49	422.67		Joints are numbered in Yellow
11	42.49	464.91		-
12	42.49	507.15		Subs are in orange
13	42.5	552.4		
14	42.49	591.64		
15	42.51	633.9		
16	42.49	676.14		
17	42.5	718.39		Added these subs for
18	42.52	760.66		flexibility to adjust to actual TD
19	42.53	802.94		······································
20	42.52	845.21		Trailer# 932895
21	42.5	887.46		
22	42.5	929.71		Actual TD - 1235
23	42.26	971.72		Log Bo <u>tto</u> m - 1215.80
24	42.53	1014		Casing Trailer - 1229.42
25	42.5	1056.25		No Baffles
26	42.52	1098.52		Centralizers per SOP
27	42.48	1140.75		
28	42.5	1183		
29	42.52	1225.27		
30	14.94	1239.96		
31	9.39	1249.1		
32	4.9	1229.42		
33				8 5
34			9	
35		8		
36				
37	×.			
38				(A)
39				
40				

PostRock Energy Corp.

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