



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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	CAMPBELL, LOIS D 3-5
Doc ID	1154962

All Electric Logs Run

CBL
CDL
NDL
TEMP
DIL



PostRock
Energy Corp. Services

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

TICKET NUMBER **8023**
FIELD TICKET REF # _____
FOREMAN Nathan Bahman
AFE D13071
SSI _____
API 15-205-28134-00-00

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
4-8-13	Campbell, Lois D. 3-5		3	285	16E	Wilson	
FOREMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Bahman	6:00	1:00		905575		7	<i>Nathan Bahman</i>
Chris Kinesid	6:30	12:30		931400	932900	6	<i>Chris Kinesid</i>
Greg Blackman							

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1225 CASING SIZE & WEIGHT 5 1/2, 14#
 CASING DEPTH 1221.37 DRILL PIPE _____ TUBING _____ OTHER Bob Jones rig crew
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 0
 DISPLACEMENT 29.8 DISPLACEMENT PSI 500 MIX PSI _____ RATE 4.0 bpm

REMARKS: On location at 7:30 Rig crew on location at 7:45. Ready to run casing at 8:00. Washed in final 20' Ready to cement at 9:30. Had to wait on water trucks to reload before ~~starting~~ starting cement job. Due to the amount of water used to wash in joints started cement job at 10:15. See GOWS ticket for cement job details. Good oil show.

ACCOUNT CODE	QUANTITY OR UNITS	DESCRIPTION OF SERVICE OR PRODUCT	TOTAL AMOUNT
905575	1	Foreman Pickup	
		Cement Pump Truck	
		Bulk Truck	
		Transport Truck	
		Transport Trailer	
		80 Vac	
931400	1	Casing Truck	
932900	1	Casing Trailer	
	1221.37	Casing	
	6	Centralizers	
	1	Float 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	Cotton Seed Hulls	



CONSOLIDATED
Oil Well Services, LLC

AFE# 013071

API# 15-265-28134

TICKET NUMBER 41459

LOCATION Enurex

FOREMAN Ron Ledford

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-8-13		Campbell, Lois O. 3-5				Wilson
CUSTOMER Post Rock Energy Corp			TRUCK #			
MAILING ADDRESS 4467 Johnson Rd			DRIVER			
CITY Chanute			TRUCK #			
STATE KS			DRIVER			
ZIP CODE						

JOB TYPE <u>1/3 0</u>	HOLE SIZE <u>7 7/8"</u>	HOLE DEPTH <u>1225'</u>	CASING SIZE & WEIGHT <u>5 1/2" 14"</u>
CASING DEPTH <u>1221.37</u>	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT <u>13.9#</u>	SLURRY VOL <u>54 Bbl</u>	WATER gal/sk <u>6</u>	CEMENT LEFT in CASING <u>0'</u>
DISPLACEMENT <u>29.8 Bbl</u>	DISPLACEMENT PSI <u>500</u>	MIX PSI <u>950 Pump plus</u>	RATE <u>4 Bbl</u>

REMARKS: Safety meeting. Rig up to 5 1/2" casing w/ washhead washdown 70' to PB 70. Pump down w/ gel-flush w/ bulls, 20 Bbl water spacer. Mixed 200 sks 50/50 Premix cement w/ 2% gel, 2% cacl2, 3" cat-sol /sk, 5" Rat-sol /sk, 1" phos-sol /sk + 1/4" cacl-115 @ 13.9#/gal washout pump + lines, release plug. Displace w/ 29.8 Bbl fresh water. Final pump pressure 500 PSI. Pump plug to 950 PSI, release pressure, fluid + plug held. Grad cement returns to surface = 6 Bbl slurry to pit. Job complete. Rig down.

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5461	1	PUMP CHARGE	1030.00	1030.00
5406	50	MILEAGE	4.00	200.00
1124	200 sks	50/50 Premix cement	10.95	2190.00
1118B	385#	2% gel	.21	80.85
1169	385#	2% cacl2	.74	284.90
1101	600#	3" cat-sol /sk	.40	240.00
116A	1000#	5" Rat-sol /sk	.46	460.00
1107A	205#	1" phos-sol /sk	1.29	258.00
1135A	56#	1/4" cacl-115	10.55	527.50
5467A	9.6	don mileage bulk tank	1.34	643.20
5502C	4 hrs	20 Bbl vac tank	90.00	360.00
1123	3000 gals	city water	16.50/1000	49.50
			Subtotal	6323.95
			SALES TAX (6.3%)	257.72
			ESTIMATED TOTAL	6581.67

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

Campbell, Lois D. 3-5

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	42.45	42.2		Date: 4/8/13
2	42.48	84.43		Well Name & #: Campbell, Lois 3-5
3	42.41	126.59		Township & Range: 28S-16E
4	42.51	168.85		County/State: Wilson/KS
5	42.44	211.04		AFE#: D13071
6	42.43	253.22		API# 15-205-28134-00-00
7	42.5	295.47		Comments: Projected TD- 1225'
8	42.47	337.69		
9	42.53	379.97		
10	42.48	422.2		Joints are numbered in Yellow
11	42.45	464.4		Subs are in orange
12	42.49	506.64		
13	42.43	551.82		
14	42.47	591.04		
15	42.49	633.28		
16	42.47	675.5		
17	42.53	717.78		
18	42.43	759.96		
19	42.48	802.19		
20	42.53	844.47		
21	42.52	886.74		Added these subs for flexibility to adjust to actual TD
22	42.45	928.94		Trailer# 932900
23	42.5	971.19		Actual TD - 1225
24	42.52	1013.46		Log Bottom - 1222.00
25	42.52	1055.73		Casing Tally - 1221.37
26	42.47	1097.95		No Baffles
27	42.48	1140.18		Centralizers per SOP
28	42.53	1182.46		
29	42.51	1224.72		
30	15.01	1196.97		
31	10.25	1206.97		
32	10	1216.72		
33	4.9	1221.37		
34				
35				
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37				
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PostRock Energy Corp.

