



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
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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 Bbbs.	Gas Mcf	Water Bbbs.	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	GROSDIDIER, FRANCIS E 14-4
Doc ID	1156885

All Electric Logs Run

CBL
DIL
CDL
NDL



PostRock
Energy Corporation

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

TICKET NUMBER

8049

FIELD TICKET REF #

FOREMAN Nathan Cabman

AFE D13091

SSI

API 15-133-27656-00-00

**TREATMENT REPORT
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
5-1-13	Grosdidier, Francis E 14-4		14	28S	20E	Neosho	
FOREMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Cabman	11:00	3:00		905575		4	<i>Nathan Cabman</i>
Chris Kincaid		2:30		903142	932900	3.5	<i>Chris Kincaid</i>
Greg Blackmore		2:00		903605	933235	3	<i>Greg Blackmore</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 631 CASING SIZE & WEIGHT 5 1/2, 14#
 CASING DEPTH 625.19 DRILL PIPE _____ TUBING _____ OTHER Gus Jones rig
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 0
 DISPLACEMENT 15.3 DISPLACEMENT PSI 300 MIX PSI _____ RATE 4.0

REMARKS: On location at 11:30. Ready to run casing at 11:45
Dug trench and pit out with dozer, Washed in final
10', Ready to cement at 12:45. See COWS ticket
for cement job details. Trace oil show. No top
off needed

Drained pit with 80-Vac, Smoothed out pad with dozer.

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 Equipment Trailer	
931610	1	80 Vac Dozer	
903142	1	Casing Truck	
933235	1	Casing Trailer	
	625.19'	Casing	
	3	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	—	Frac Baffles	
		Portland Cement	
		CSA-122 Sodium Silicate	
		CGL-115 Cement Fluid Loss	
	4 sks	Premium Gel	
		Cal Chloride	
		City Water	
		Chemthix-P Thixotropic	
		KOL Seal	
	1 sk	Colton Seed Hulls	



CONSOLIDATED
Oil Well Services, LLC

WELL # D13091
API # 15-133-27656

TICKET NUMBER 41558
LOCATION Europe KS
FOREMAN Shannon Leck

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
5-1-13	6628	Grosdidier, Francis 14-4				Neosho
CUSTOMER Post Rock Energy Corp			605 Jones			
MAILING ADDRESS 4402 Johnson Rd			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Chanute			570	John S		
STATE KS			667	Chris B		
ZIP CODE			4524713	Jim m		
			88	Rudy m	Wiley Trucking	

JOB TYPE 1/5 0 HOLE SIZE 7 7/8" HOLE DEPTH 631' CASING SIZE & WEIGHT 5 1/2" @ 7.4#/ft
 CASING DEPTH 625.19 61 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 #/gal SLURRY VOL 30 Bbl WATER gal/sk 9.0 CEMENT LEFT in CASING d
 DISPLACEMENT 15.5 Bbl DISPLACEMENT PSI 300 MIX PSI 800 RATE Displace @ 4 BPM

REMARKS: Safety Meeting, Rig up to 5 1/2" casing, Break circulation w/ 50 Bbl, mixed @ 400 # gel flush w/ hulls, 15 Bbl 1170 spacer, mixed 85 SKS Thickset cement w/ 5 # kol-seal, 1 # phenoseal & 1/4 % CFL-115 @ 12.5 #/gal, shut down wash out pump & lines, displace w/ 15.5 Bbl 1170, Plug & Flood hold good, final pressure 300 psi, bump plug @ 500 psi, Good circulation, 4 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	1085.00	1085.00
5406	20	MILEAGE	4.20	84.00
1126A	85 SKS	Thick set	20.16	1713.60
116A	425 #	Kol-seal @ 5 #/sk	.46	195.50
1107A	85 #	phenoseal @ 1 #/sk	1.35	114.75
1135A	24 #	CFL-115 @ 1/4 %	11.08	265.92
5407A	4.67 Tons	Ton mileage x 70 miles	1.41	460.92
5502C	3.5 Hrs	80 Bbl Vac Truck #88 Wiley Trucking	90.00	315.00
5501C	3.5 Hrs	Water Transport	120.00	420.00
			Sub Total	4654.69
			7.30% SALES TAX	167.15
			ESTIMATED TOTAL	4821.84

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

GUS JONES, LLC

Cable Tool Service
149 RD 25 • Elk City, KS 67344
(620) 642-6315

JOB SHEET

AFE #D130 q1

Date	Start Time	Finish Time	Total Time
5-1-13			6

Orderd by : New well wil.co,

Lease : Grosdidier

Company : Post Rock LLC

Well # : 14-4

Type of Job or Rig : Rig 3

Job Description : Rig up, Run in 5 1/2 casing Reccp. white cementing, Land clamp Rig down

Fishing Tool or Packer Rental Charges \$ _____

Power Tong Charge \$ 50 (Per Trip In or Out) Number of trips _____

Parts Used : Supplied By G.J. Economy Other _____

Valve Cups _____	Working Barrels _____
Ball & Seats _____	Swab Cups _____
Seating Cups _____	Other _____

Discription of Other : _____

Grosdidier, Francis E. 14-4

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	42.54	42.29		Date: 5/1/13
2	42.51	84.55		Well Name & #: Grosdidier 14-4
3	42.48	126.78		Township-Range/28S-20E
4	42.52	169.05		County/State: Neosho/KS
5	42.48	211.28		AFE#: D13091
6	42.45	253.48		API# 15-133-27656-00-00
7	42.5	295.73		Comments: Projected TD- 625'
8	42.51	337.99		
9	42.48	380.22		Joints are numbered in White
10	42.52	422.49		
11	42.53	464.77		Subs are in orange
12	42.48	507		
13	42.54	552.29		Added these subs for flexibility to adjust to actual TD
14	42.53	591.57		
15	14.95	606.27		
16	10.07	616.09		
17	9.35	625.19		
18	5.05	629.99		Trailer# 932900
19				
20				Actual TD - 631 Log Bottom - 621.50 Casing Tally - 625.19 No Baffles Centralizers per SOP
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PostRock Energy Corp.