



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: \_\_\_\_\_



1157021

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
---	---

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
-----------------------------------	-----------	---------	-------------	---------------	---------

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
--	---	---

Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	OLSON, RUBY A 2-15
Doc ID	1157021

All Electric Logs Run

CBL
DIL
CDL
NDL

AFE # D13084

McPherson Drilling LLC

Drillers Log

McPherson Drilling LLC

Rig Number: 2	S. 2 T. 28 R. 16 E
API No. 16-205-28144	County Wilcox
Elev. 1046'	Location SE-SE-SW-SW

Gas Tests:	
881'	Light Blow
981'	Same
1181'	Same

Operator: Post Rock midcontinent Production	
Address: Oklahoma Tower 210 Park Ave Ste 2750	
Well No. 2-15	Lease Name Olson Ruby A
Footage Location:	285 ft. from the (N) (S) Line
	1110 ft. from the (E) (W) Line
Drilling Contractor: McPherson Drilling LLC	
Spud date: 4/30/13	Geologist:
Date Completed: 5/2/13	Total Depth: 1220'

Casing Record			Rig Time:
	Surface	Production	
Size Hole:	11"	7 7/8"	
Size Casing:	8 7/8"		
Weight:	23#		
Setting Depth:	23'	Post Rock	
Type Cement:	port	" "	
Sacks:	5		

log 1120' at 300'			Well Log					
Formation	Top	Btm.	Formation	Top	Btm.	Formation	Top	Btm.
Top Soil	0	8	OSW	817	832	Coal	1199	1200
lime	8	14	limestone	837	842	shale	1200	1200
shale	14	129	lime	842	853			
lime	129	142	limestone	853	860			
shale	142	234	lime	860	862			
lime	234	251	shale	862	865			
sand	251	312	sand	865	878			
sand shale	312	375	sand shale	878	897			
lime	375	423	shale	897	941			
shale	423	432	coal	941	942			
lime	432	439	shale	942	967			
sand	439	469	coal	967	971			
lime	469	478	shale	971	1023			
shale	478	491	(C-A)	1023	1023			
lime	491	541	sand shale	1023	1027			
shale	541	566	sand	1027	1032			
sand	566	582	sand shale	1032	1049			
shale	582	704	Shale	1049	1063			
sand shale	704	735	sand	1063	1077			
sand	735	756	coal	1077	1079			
lime	756	758	shale	1079	1089			
coal	758	759	sand	1089	1100			
lime	759	790	lim band	1100	1122			
shale	790	817	water band	1122	1199			



**PostRock**  
Energy Corporation

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

TICKET NUMBER **8053**  
FIELD TICKET REF # \_\_\_\_\_  
FOREMAN Nathan Gahmsen  
AFE D13084  
SSI \_\_\_\_\_  
API 15-205-28144-00-00

**TREATMENT REPORT  
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
5-3-13	Olson, Ruby A. 2-15		2	285	16E	Wilson	
FOREMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Gahmsen	2:00	6:30		905575		4.5	<i>Nathan Gahmsen</i>
Chris Kinesid		6:00		931400	932895	4	<i>Chris Kinesid</i>
Greg Blackmore		6:00		903605	933235	4	<i>Greg Blackmore</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1220 CASING SIZE & WEIGHT 5 1/2, 14#  
 CASING DEPTH 1215.84 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER Bus Jones rig  
 SLURRY WEIGHT 13.9 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING 0  
 DISPLACEMENT 29.66 DISPLACEMENT PSI 500 MIX PSI \_\_\_\_\_ RATE 4.0

REMARKS: On location at 2:30 Ready to run casing at 3:00.  
Washed in final 30', Ready to cement at 4:00.  
See COWS ticket for cement job details. Fair  
oil show may need top off.

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 <u>Haul Truck</u>	
933235	1	Transport Trailer <u>Equipment Trailer</u>	
	1	80 Vac <u>Dozer</u>	
931400	1	Casing Truck	
932895	1	Casing Trailer	
	1215.84	Casing	
	5	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 # D13084

API # 15-205-28144

TICKET NUMBER 41574

LOCATION Eureka KS

FOREMAN Shannon Fack

James med

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	
5-3-13	6625	Olson, Ruby 2-15				Wilson	
CUSTOMER Post Rock Energy Corp			Gus				
MAILING ADDRESS 4402 Johnson Rd			Jones				
CITY Chanute		STATE KS	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
				520	John S		
				515	marle R		
				4521 7/13	Tim m		
				88	Rudy m	mccoy Trucking	

JOB TYPE L/S 0 HOLE SIZE 7 7/8" HOLE DEPTH 1220' CASING SIZE & WEIGHT 5 1/2" @ 17#  
 CASING DEPTH 1215.84 GL DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.7 # SLURRY VOL 55 WATER gal/sk 6.02 CEMENT LEFT in CASING 0  
 DISPLACEMENT 30 Bbl DISPLACEMENT PSI 500 MIX PSI 1000Bum plug RATE Displace @ 4 BPM

REMARKS: Safety meeting, rig up to 5 1/2" casing, wash down 15 w/ 70 Bbl H<sub>2</sub>O, mixed 600 # gel flush w/ hulls, 15 Bbl H<sub>2</sub>O spacer, mixed 200 SKS 50/50 portland cement w/ 2% gel 2% calcium, 3# cal-seal/sk, 5# kol-seal/sk, 1# phenoseal/sk & 1/4% CFL-115 @ 13.7 #/gal. Shut down wash out pump & lines. Displace w/ 30 Bbl H<sub>2</sub>O. Final pumping pressure of 500 psi, bumped plug to 1000psi. Plug & float held, 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	0	MILEAGE Mile on location	N/C	N/C
1124	200 SKS	50/50 portland cement	11.50	2300.00
1118 B	385 #	Gel @ 2%	.22	84.70
1102	385 #	Calcium @ 2%	.78	300.30
1101	600 #	Cal-seal @ 3#/sk	.42	252.00
1110A	1000 #	Kol-seal @ 5#/sk	.46	460.00
1107A	200 #	phenoseal @ 1#/sk	1.35	270.00
1135 A	50 #	CFL-115 @ 1/4%	11.08	554.00
5407A	9.6 Tons	Ton mileage bulk Truck (x 50 miles)	1.41	676.80
5501C	3.5 hrs	Water Transport	120.00	420.00
5502C	3.5 hrs	80 Bbl # 88 mccoey Trucking	90.00	315.00
			Subtotal	6717.80
			6.3% SALES TAX	265.92
			ESTIMATED TOTAL	6983.72

Ravin 3737

AUTHORIZATION Nate Ga 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

# Olson, Ruby A. 2-15

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	42.27	42.02		Date: 5/3/13
2	42.45	84.22		Well Name & #: Olson2-15
3	42.22	126.19		Township & Range: 28S-16E
4	42.54	168.48		County/State: Wilson/KS
5	42.54	210.77		AFE#: D13084
6	42.49	253.01		API# 15-205-28144-00-00
7	41.88	294.64		Comments: Projected TD- 1220'
8	41.71	336.1		
9	42.5	378.35		Joints are numbered in White
10	42.55	420.65		
11	42.48	462.88		Subs are in orange
12	42.5	505.13		
13	42.52	550.4		Added these subs for flexibility to adjust to actual TD
14	42.29	589.44		
15	41.95	631.14		Trailer# 932900
16	42.51	673.4		
17	42.49	715.64		Actual TD - 1220 Log Bottom - 1220.00 Casing Tally - 1215.84 No Baffles Centralizers per SOP
18	42.08	757.47		
19	42.16	799.38		
20	42.18	841.31		
21	41.84	882.9		
22	40.81	923.46		
23	42.09	965.3		
24	42.08	1007.13		
25	42.02	1048.9		
26	42.05	1090.7		
27	42	1132.45		
28	41.95	1174.15		
29	41.94	1215.84		
30	14.88	1230.47		
31	10.01	1240.23		
32	5.32	1245.3		
33				
34				
35				
36				
37				
38				
39				
40				

PostRock Energy Corp.