



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1157080  
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed  
Form must be Signed  
All blanks must be Filled

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
- Plug Back       Conv. to GSW       Conv. to Producer
- 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

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx)      (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_



1157080

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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  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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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**PostRock**  
Energy Corporation

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

TICKET NUMBER **8059**  
FIELD TICKET REF # \_\_\_\_\_  
FOREMAN Nathan Graham  
AFE D 13106  
SSI \_\_\_\_\_  
API 15-205-28120-00-00

**TREATMENT REPORT  
& FIELD TICKET CEMENT**

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
5-24-13	Follmer W. C. 9-1		9	27S	15E	Wilson	
FOREMAN/ OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Nathan Graham	6:00	12:00		905575		6	<i>Nat C</i>
Darrell Chancy	6:30			Training		5.5	<i>Darrell</i>
Chris Kincaid	6:30			931400	932895	1	<i>Chris</i>
Greg Blackmore	6:30			904815		1	<i>Greg</i>

JOB TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1300 CASING SIZE & WEIGHT 5 1/2, 14#  
 CASING DEPTH 1293.87 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER Cus Jones  
 SLURRY WEIGHT 13.9 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING 0  
 DISPLACEMENT 31.6 DISPLACEMENT PSI 600 MIX PSI \_\_\_\_\_ RATE 4.0

REMARKS: On location at 7:45. Pulled water out of pit with 80-Vac  
Started running casing at 8:30. Spotted trucks with track  
hoe. Worked in final 10'. Ready to cement at 10:00.  
See COWS ticket for cement job details. No top off  
needed. Very 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	
	1	80-Vac Track Hoe	
931400	<del>1</del> 1	Casing Truck	
932895	<del>1</del> 1	Casing Trailer	
	1293.87	Casing	
	6	Centralizers	
	1	Float Shoe	
	-	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

WTS # 013106  
APP # 15-205-28170

TICKET NUMBER 41591  
LOCATION Lureka KS  
FOREMAN Shannon Ford

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
5-24-13	6628	Follmer W.G. 9-1				Wilson
CUSTOMER Post Rock Energy Corp			Cus			
MAILING ADDRESS 4402 Johnson Rd			Jones			
CITY Chanute		STATE KS	ZIP CODE			

TRUCK #	DRIVER	TRUCK #	DRIVER
520	John S		
515	marle R		
611	Joey K	Extra Hand	
98	Rudy W	Mcco Trucking	80 Bbl

JOB TYPE L/S .0 HOLE SIZE 7 3/4" HOLE DEPTH 1300' CASING SIZE & WEIGHT 5 1/2" @ 14#  
 CASING DEPTH 1293.876L DRILL PIPE --- TUBING --- OTHER ---  
 SLURRY WEIGHT 13.9 # SLURRY VOL 55 Bbl WATER gal/sk 602 CEMENT LEFT in CASING 0  
 DISPLACEMENT 32 Bbl DISPLACEMENT PSI 600 MIX PSI 1000 RATE Displace @ 4 RPM

REMARKS: Safety meeting, rig up to 5 1/2" casing, wash down 20' w/ 70 Bbl H2O, mixed broad gel plug w/ balls, 15 Bbl H2O spacer, mixed 210 SKS 50/50 portmix cement with 2% gel, 2% calcium, 3# cal seal/sk, 5# kol seal/sk, 1# phenoseal/sk & 1/4% CCL-115 @ 129# gal. Shut down wash out pump & lines displace w/ 32 Bbl H2O, final pumping pressure at 600 psi, bumped plug @ 1000 psi, plug & float held, Good circulation @ all times, 1-5 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	50	MILEAGE #1 of 2 wells	4.20	210.00
1124	210 SKS	50/50 portmix cement	11.50	2415.00
1118B	353 #	gel @ 2%	.22	77.66
1102	353 #	calcium @ 2%	.78	275.34
1101	630 #	cal-seal @ 3#/sk	.42	264.60
1110A	1050 #	kol-seal @ 5#/sk	.46	483.00
1107A	210 #	phenoseal @ 1#/sk	1.35	283.50
1135A	50 #	CCL-115 @ 1/4%	11.08	554.00
5407A	10.58 Tons	Ton mileage bulk truck	1.41	710.64
5502C	3.5 hrs	80 Bbl Vac Truck #88 mcco Trucking	90.00	315.00
1123	3300 gal	city water	17.30/1000	57.09
			Sub Total	6730.83
		6.3%	SALES TAX	277.84
			ESTIMATED TOTAL	7008.67

Ravin 3737

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE 5/24/13

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 # 113106

Date <u>5-24-13</u>	Start Time	Finish Time	Total Time <u>6 Hrs</u>
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Orderd by : New well w/ l.c.c Lease : Fallme

Company : Post Rock Well # : 9-1

Type of Job or Rig : Ry 3

Job Description : Drill # TO Loc. Ry w/ P Run in 5 1/2" casing Recip while cementing lead clean Rig down

*W. Jones*

Fishing Tool or Packer Rental Charges \$ \_\_\_\_\_

Power Tong Charge \$ 50 (Per Trip In or Out) Number of trips 1

Parts Used : Supplied By G.J.  Economy  Other \_\_\_\_\_

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

Discription of Other : \_\_\_\_\_

# Follmer W. C. 9-1

Pipe #	Joint Length	Running Total - NO threads	Baffle Location	PostRock Energy- Casing Tally Sheet
1	42.42	42.17		Date: 5/24/13
2	42.42	84.34		Well Name & #: Follmer, WC 9-1
3	42.41	126.5		Township & Range: 27S-15E
4	42.43	168.68		County/State: Wilson/KS
5	42.42	210.85		AFE#: D13106
6	42.42	253.02		API# 15-205-28170-00-00
7	42.45	295.22		Comments: Projected TD- 1300'
8	42.43	337.4		
9	42.44	379.59		
10	42.12	421.46		Joints are numbered in Yellow
11	42.47	463.68		
12	42.41	505.84		Subs are in orange
13	42.42	551.01		No collars: 1067-1076, 1094-1106
14	42.44	590.2		1112-1120, 1123-1130
15	42.4	632.35		
16	42.45	674.55		
17	42.42	716.72		Added these subs for
18	42.42	758.89		flexibility to adjust to actual TD
19	42.44	801.08		
20	42.42	843.25		Trailer# 932895
21	42.41	885.41		
22	42.41	927.57		Actual TD - 1300
23	42.42	969.74		Log Bottom - 1301.40
24	42.42	1011.91		Casing Tally - 1293.87
25	42.42	1054.08		No Baffles
34	10.3	1064.13		Centralizers per SOP
27	42.4	1106.28		Run joints in shown order to avoid
28	42.43	1148.46		collars in perf zones.
29	42.43	1190.64		
30	42.42	1232.81		
31	42.42	1274.98		
32	24.51	1299.24		
33	14.88	1246.94		
26	42.43	1289.12		
35	5	1293.87		
36	4.99	1298.61		
37				
38				
39				
40				

PostRock Energy Corp.

Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 2078  
Wichita, KS 67202-3802



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Mark Sievers, Chairman  
Thomas E. Wright, Commissioner  
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

September 03, 2013

CLARK EDWARDS  
PostRock Midcontinent Production LLC  
Oklahoma Tower  
210 Park Ave, Ste 2750  
OKLAHOMA CITY, OK 73102

Re: ACO1  
API 15-205-28170-00-00  
FOLLMER, W C 9-1  
NE/4 Sec.09-27S-15E  
Wilson County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,  
CLARK EDWARDS