



KANSAS CORPORATION COMMISSION 1065578
OIL & GAS CONSERVATION DIVISION

Form AGO-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 # 33343
Name: PostRock Midcontinent Production LLC
Address 1: Oklahoma Tower
Address 2: 210 Park Ave, Ste 2750
City: OKLAHOMA CITY State: OK Zip: 73102 +
Contact Person: CLARK EDWARDS
Phone: (620) 4319500
CONTRACTOR: License # 5675
Name: McPherson, Ron dba McPherson Drilling
Wellsite Geologist: KEN RECOY
Purchaser:

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- 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 #:

| | | |
|-----------------------------------|-----------------|---|
| 5/24/2011 | 5/25/2011 | 5/25/2011 |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-099-24644-00-00

Spot Description:

NE SE Sec. 12 Twp. 33 S. R. 17 East West
1980 Feet from North / South Line of Section
660 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Labette

Lease Name: WINTER, DAVID Well #: 12-3

Field Name:

Producing Formation: WOPL

Elevation: Ground: 811 Kelly Bushing: 0

Total Depth: 1058 Plug Back Total Depth: 1050

Amount of Surface Pipe Set and Cemented at: 21 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 1050

feet depth to: 0 w/ 170 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bbls

Dewatering method used: Evaporated

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: Deanna Garrisor Date: 10/19/2011



1065578

Operator Name: PostRock Midcontinent Production LLC Lease Name: WINTER, DAVID Well #: 12-3
 Sec. 12 Twp. 33 S. R. 17 East West County: Labette

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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Attached | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum SEE ATTACHED |
|---|--|

| CASING RECORD <input checked="" 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 |
| SURFACE | 12.25 | 8.625 | 22 | 21 | A | 4 | |
| PRODUCTION | 7.875 | 5.5 | 14.5 | 1049.53 | A | 170 | |
| | | | | | | | |

| 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 (Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| | WAITING ON PIPELINE | | |
| | | | |
| | | | |
| | | | |

| | | | |
|---|-----------|---|-----------------------------------|
| TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ | | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Date of First, Resumed Production, SWD or ENHR. _____ | | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____ | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. Gas-Oil Ratio Gravity |

| | | |
|---|--|--|
| 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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: _____ _____ |
|---|--|--|

| | |
|-----------|--------------------------------------|
| Form | ACO1 - Well Completion |
| Operator | PostRock Midcontinent Production LLC |
| Well Name | WINTER, DAVID 12-3 |
| Doc ID | 1065578 |

All Electric Logs Run

| |
|------|
| |
| DIL |
| CDL |
| NDL |
| TEMP |

QUEST

Resource Corporation



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

Called KCC (2) 11:45 AM

AF#
D11032

TICKET NUMBER

7063

FIELD TICKET REF #

FOREMAN Joe Blanchard

SSI 631450

API 15-099-24644

TREATMENT REPORT & FIELD TICKET CEMENT

| DATE | WELL NAME & NUMBER | | | SECTION | TOWNSHIP | RANGE | COUNTY |
|--------------------|--------------------|----------|------------|---------|-----------|-------------|-------------------------|
| 5-26-11 | Winter | DAVID | 12-3 | 12 | 33 | 17 | LB |
| FOREMAN / OPERATOR | TIME IN | TIME OUT | LESS LUNCH | TRUCK # | TRAILER # | TRUCK HOURS | EMPLOYEE SIGNATURE |
| Joe Blanchard | 8:30 | 3:00 | | 904850 | | 6.5 | <i>Joe Blanchard</i> |
| DUSTIN PORTER | 8:30 | 2:00 | | 903600 | | 5.5 | <i>Dustin Porter</i> |
| Justin T. Jensen | 8:30 | 3:00 | | 903255 | | 6.5 | <i>Justin T. Jensen</i> |
| Walter Gehring | 1:00 | 3:00 | | trainer | | 2 | <i>Walter Gehring</i> |
| Wes Gardner | 2:30 | 2:30 | | 931595 | 931395 | | <i>Wes Gardner</i> |

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 1057 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 1049.53 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 24.98 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4bpm

REMARKS:

washed 10 Ft 5 1/2 in hole swept 1 SK gel. Installed cement head RAN 1/6 BBL due to 170 SKS of cement to get due to surface. Flush pump. Pumped wiper plug to bottom of set float shoe.

Started casing 11:00 Started cement 1:00 Left location 2:30
 Got late start due to having to get dozer moved around of safety meeting at 14th street.

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION OF SERVICES OR PRODUCT | TOTAL AMOUNT |
|--------------|-------------------|------------------------------------|--------------|
| 904850 | 6.5 hr | Foreman Pickup | |
| 903255 | 6.5 | Cement Pump Truck | |
| 903600 | 5.5 | Bulk Truck | |
| 931595 | 6 | Transport Truck | |
| 931395 | 6 | Transport Trailer | |
| 904730 | 3 | 80 Vac | |
| | 1049.53 | Casing 5 1/2 | |
| | 6 | Centralizers | |
| | 1 | Float Shoe | |
| | 1 | Wiper Plug | |
| | 1 | Frac Baffles | |
| | 140 SK | Portland Cement | |
| | 36 SK | Gilsonite | |
| | 2 SK | Flo-Seal | |
| | 10 SK | Premium Gel | |
| | 5 SK | Cal Chloride | |
| | 1 | 5 1/2 Basket | |
| | 7000 gal | City Water | |
| 903139 | 3 hr | Casing tractor | |
| 932895 | 3 hr | Casing trailer | |

4" Small hole

