



KANSAS CORPORATION COMMISSION 1065841
OIL & GAS CONSERVATION DIVISION

Form ACO-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 # 33606
Name: Thornton Air Rotary, LLC
Wellsite Geologist: KEN RECOY
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 #: _____
6/16/2011 6/17/2011 7/14/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-099-24650-00-00
Spot Description: _____
_____ NE_NW Sec. 32 Twp. 33 S. R. 18 East West
660 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Labette
Lease Name: ORTH, JILL A Well #: 32-1
Field Name: _____
Producing Formation: CHEROKEE COALS
Elevation: Ground: 777 Kelly Bushing: 0
Total Depth: 983 Plug Back Total Depth: 974
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: 974
feet depth to: 0 w/ 153 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 Garrison Date: 10/24/2011



1065841

Operator Name: PostRock Midcontinent Production LLC Lease Name: ORTH, JILL A Well #: 32-1
 Sec. 32 Twp. 33 S. R. 18 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 type="checkbox"/> Yes <input checked="" 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 SEE ATTACHED
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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	21.6	A	4	
PRODUCTION	7.875	5.5	14.5	974.02	A	153	

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				

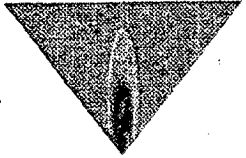
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	824-827	400GAL 15% HCL W/ 56BLS 2% KCL WATER, 400BLS W/ 2% KCL, BIOCID, MAXFLOW, 1550# 20/40	824-827
4	578-580/455-458/474-476/416-418	400GAL 15% HCL W/ 56BLS 2% KCL WATER, 854BLS W/ 2% KCL, BIOCID, MAXFLOW, 8970# 20/40	578-580/455-458/474-476
4	369-374	400GAL 15% HCL W/ 44BLS 2% KCL WATER, 725BLS W/ 2% KCL, BIOCID, MAXFLOW, 12120# 20/40	369-374
4	335-339	400GAL 15% HCL W/ 32BLS 2% KCL WATER, 686BLS W/ 2% KCL, BIOCID, MAXFLOW, 6760# 20/40	335-339

TUBING RECORD: Size: <u>1.5</u> Set At: <u>875</u> Packer At: <u>0</u>		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>7/30/2011</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>0</u>	Gas Mcf <u>61</u>	Water Bbls. <u>30</u> Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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QUEST

Resource Corporation



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

AFE D11043

TREATMENT REPORT & FIELD TICKET CEMENT

TICKET NUMBER

✓ 7093

FIELD TICKET REF # _____

FOREMAN Joe Blanchard

SSI 630430

API 15-099-24650

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-20-11	ORTH J:11 32-1	32	33	18	LB

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	6:00	10:45		904850		4.75	Joe Blanchard
Justin T. James	6:00	↓		903197		↓	Justin T. James
Wes Gardner	6:00	↓		931505	931295	↓	Wes Gardner
DUSTY PORTER	6:06	↓		903600		↓	Dusty Porter

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 983 CASING SIZE & WEIGHT 5 1/2 14 1/2
 CASING DEPTH 974.02 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 23.19 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS:

washed 10 Ft swept 1SK gel. Installed Cement head RAN 14 BBI dye & 153 SKS of Cement to get dye TO surface. Flush pump. Pumped Wiper plug to bottom & set float shoe.

started casing 8:30 started Cement 9:45

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	4.75 hr	Foreman Pickup	
903197	↓ hr	Cement Pump Truck	
903600	↓ hr	Bulk Truck	
901505	↓ hr	Transport Truck	
931395	↓ hr	Transport Trailer	
		80 Vac	
	974.02	Casing 5 1/2	
	6	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	2	Frac Baffles 4" + 4 1/2"	
	120 SK	Portland Cement	
	30 SK	Gilsonite	
	1 SK	Flo-Seal	
	9 SK	Premium Gel	
	5 SK	Cal Chloride	
	1	5 1/2 Basket	
	7000 gal	City Water	
903139	4.5 hr	Casing tractor	
932895	4.5 hr	Casing trailer	

DD's Thornton Drilling Friday 06-17-11 @ 1PM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	39.24	39.24		Date: 6/17/11
2	38.98	78.22	Cement Basket	Well Name & #: Orth, Jill A. 32-1
3	38.48	116.70		Township & Range: 33S-18E
4	38.60	155.30	@ 155 ft.	County/State: Labette / Kansas
5	39.89	195.19		SSI #: 630430
6	38.43	233.62		AFE#: D11043
7	39.66	273.28		Road Location: 1000 & Douglas, E & S into
8	39.95	313.23		API# 15-099-24650
9	38.32	351.55		
10	38.59	390.14	← Set upper baffle @ 390.14 ft. Big Hole.	
11	38.30	428.44		
12	39.23	467.67		
13	38.89	506.56		
14	38.65	545.21		
15	39.17	584.38		
16	38.14	622.52		
17	39.43	661.95		
18	39.56	701.51		
19	38.56	740.07	← Set lower baffle @ 740.07 ft. Small Hole.	
20	38.45	778.52		
21	39.28	817.80		
22	38.54	856.34		
23	38.34	894.68		
24	38.75	933.43		
25	40.59	974.02	Tally Bottom	
<p>Use all 25 joints & No Sub.</p> <p>Be Safe !!</p> <p>Pick up any tools at the Well site.</p> <p>Top Load</p>				

Miss Top 837 ft.
Tally Bottom 974.02 ft.
Driller TD 981 ft.
Log Bottom 982.80 ft.

Teamwork works! Put Safety 1st!

DDS, Ke Reedy
 Sr. Geologist
 620 305 9900
 06-17-2011

Air Drilling Specialist
Oil & Gas Wells

THORNTON AIR ROTARY, LLC
Office Phone: 620-879-2073

PO Box 449
Caney, KS 67333

Date Started	6/16/2011
Date Completed	6/17/2011

Well No.	Operator	Lease	A.P.I.#	County	State
32-1	Post Rock Energy	Orth, Jill A.	15-099-24650-00-00	Labette	Kansas

1/4	1/4	1/4	Sec.	Twp.	Rge.
			32	33	18 E

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
Sean	Gas	4	22' 8 5/8"	981	7 7/8"

Formation Record

0-3	DIRT	448-450	LIME		
3-7	CLAY	450-454	BLACK SHALE		
7-15	LIME	454-456	COAL		
15-35	SHALE	456-467	SHALE		
35-36	COAL	467-469	BLACK SHALE		
36-40	SHALE	469-473	SHALE		
40-52	LIME	473-475	COAL		
52-54	BLACK SHALE	475-578	SHALE		
54-66	LIME	480	GAS TEST-10 1/2 OZ., 1/2=20 MCF		
66-100	SHALE	578-579	COAL		
100-115	SAND	579-610	SHALE		
115-197	SHALE	610-618	SAND		
197-218	LIME (PAWNEE)	618-625	SANDY SHALE		
218-224	BLK SHALE (LEXINGTON)	625-626	COAL		
224-300	SHALE	626-691	SANDY SHALE		
230	GAS TEST - NO GAS	680	GAS TEST - SAME		
300-334	LIME (OSWEGO)	691-692	COAL ?		
330	GAS TEST - NO GAS	692-823	SHALE		
334-340	BLK SHALE (SUMMIT)	806	GAS TEST - SAME		
355	GAS TEST - NO GAS	823-826	COAL		
340-368	LIME	826-835	SHALE		
368-372	BLK SHALE (MULKY)	831	GAS TEST-3#, 1/2", MCF-59.2		
372-373	COAL	835-845	CHAT/CHIRT (MISS.)		
373-384	LIME	845-900	LIME		
380	GAS TEST-4 1/2OZ, 1/2=13.3 MCF	856	GAS TEST - SAME		
384-415	SHALE	900-932	CHAT/CHIRT		
415-417	COAL	932-981	LMY CHIRT		
417-433	SHALE	981	GAS TEST-1#, 1", MCF-25.8		
433-434	COAL	981	TD		
434-448	SHALE				