



KANSAS CORPORATION COMMISSION 1069415
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 # 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 #: _____

<u>7/14/2011</u>	<u>7/15/2011</u>	<u>8/8/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-133-27572-00-00
Spot Description: _____
SW NE NE SW Sec. 15 Twp. 28 S. R. 18 East West
2250 Feet from North / South Line of Section
2280 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Neosho
Lease Name: TENNIS REV TRUST Well #: 15-1
Field Name: _____
Producing Formation: CHEROKEE COALS
Elevation: Ground: 970 Kelly Bushing: 0
Total Depth: 1150 Plug Back Total Depth: 1140
Amount of Surface Pipe Set and Cemented at: 22 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1140
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 Garrison Date: 12/05/2011



1069415

Operator Name: PostRock Midcontinent Production LLC Lease Name: TENNIS REV TRUST Well #: 15-1
 Sec. 15 Twp. 28 S. R. 18 East West County: Neosho

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
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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	22	A	4	
PRODUCTION	7.875	5.5	14.5	1139.54	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
4	998-1002	400GAL 15% HCL W/ 65BLS 2% KCL WATER, 220BLS W/ 2% KCL, BIOCID, MAXFLOW, 1360# 20/40	998-1002
4	947-949/941-943	400GAL 15% HCL W/ 62BLS 2% KCL WATER, 620BLS W/ 2% KCL, BIOCID, MAXFLOW, 6200# 20/40	947-949/941-943
4	853-855/797-800/762-765/743-746/704-707	400GAL 15% HCL W/ 70BLS 2% KCL WATER, 820BLS W/ 2% KCL, BIOCID, MAXFLOW, 12400# 20/40	853-855/797-800/762-765
4	596-600/585-589	500GAL 15% HCL W/ 57BLS 2% KCL WATER, 817BLS W/ 2% KCL, BIOCID, MAXFLOW, 20100# 20/40	596-600/585-589


TUBING RECORD:	Size: <u>1.5</u>	Set At: <u>1030</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. 8/18/2011		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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		18	22		

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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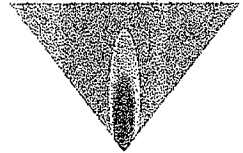
Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	TENNIS REV TRUST 15-1
Doc ID	1069415

All Electric Logs Run


DIL
CDL
NDL
TEMP
GRN

QUEST

Resource Corporation



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

This well has no Baffles

TICKET NUMBER

7117 ✓

FIELD TICKET REF #

FOREMAN Joe Blanchard

SSI 628900

API 15-133-27572

AFF D11070

TREATMENT REPORT
& FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
7-18-11	Tennis Rev trust 15:1		15	28	18	no

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	10:45	2:30		904850		3.75	Joe Blanchard
MATT ALBERTS		2:30		903149	932900	3.75	Matt Alberts
ROSEAN RAYTEL		2:00		903600		3.25	Rosean Raytel
Wes Gorman		2:00		907400	932705	3.25	Wes Gorman
Matt Alberts		2:30		903255		3.75	Matt Alberts

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 1148 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 1139.54 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.6 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 27.13 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS:

washed 80 Ft 5 1/2 Sump 2 sks gel. Installed cement head RAV 18
IBI dye of 170 sks of cement to get dye to surface. Flush pump. Pump
Wiper plug to bottom & set float shoe.

Started Pipe 11:15 Started Cement 1:00

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	3.75 hr	Foreman Pickup	
903255	3.75 hr	Cement Pump Truck	
903600	3.25 hr	Bulk Truck	
903400	3.25 hr	Transport Truck	
932705	3.25 hr	Transport Trailer	
904730	3.25 hr	80 Vac	
	1139.54 Ft	Casing 5 1/2	
	7	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	0	Frac Baffles NO Baffles!!!	
	135 SK	Portland Cement	
	35 SK	Gilsonite	
	2 SK	Flo-Seal	
	14 SK	Premium Gel	
	5 SK	Cal Chloride	
	1	5 1/2" Basket	
	7000 gal	City Water	
903149	3.75 hr	Casing tractor	
932900	3.75 hr	Casing trailer	

DD'd. McPherson Drilling 07-15-11 Friday @ 9 AM.

Pipe#	Length	Running Total	Baffle Location	POSTROCK ENERGY CORP - CASING TALLY SHEET
1	39.56	39.56		Date: 07/15/2011 Friday
2	39.63	79.19	Cement Basket	Well Name & #: Tennis Rev Trust 15-1
3	38.45	117.64	@ 117ft.	Township & Range: 28S-18E
4	39.76	157.40		County/State: Neosho / Kansas
5	39.23	196.63		SSI #: 628900
6	38.38	235.01		AFE#: D11070
7	39.58	274.59		Road Location: 160th & Ford, E&N info
8	38.14	312.73		API# 15-133-27572
9	38.17	350.90		
10	38.60	389.50	No	
11	39.55	429.05		
12	39.58	468.63		
13	39.63	508.26		
14	39.76	548.02		
15	39.79	587.81		
16	39.27	627.08		
17	38.94	666.02		
18	37.95	703.97		
19	37.89	741.86		
20	38.15	780.01		
21	38.93	818.94		
22	38.36	857.30		
23	39.82	897.12		
24	38.23	935.35		
25	39.51	974.86		
26	38.38	1013.24		
27	38.69	1051.93		
28	38.34	1090.27		
29	38.84	1128.61		
Sub	10.93	1139.54	Tally Bottom.	

Baffles to Set in this Well.

Use all 29 joints + the 10 ft. Sub.

Be Safe! Drink liquids!
Take Breaks!!

Miss Top 1010 ft.

Tally Bottom 1139.54 ft.

Log Bottom 1148.20 ft.

Driller TD 1150 ft.

Put Safety 1st! Teamwork works!!

DD's Ke Leary
Sr. Geologist.
620 3059900 Cell
07-15-2011

