

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION CONFIDENTIAL

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 | API No. 15 | |
|---|---|--|
| Name: PostRock Midcontinent Production LLC | Spot Description: | |
| Address 1: Oklahoma Tower | SW_NE_NE_NE_Sec. 29 Twp. 27 S. R. 19 Fast West | |
| Address 2: 210 Park Ave, Ste 2750 | 500 Feet from ✓ North / ☐ South Line of Section | |
| City: OKLAHOMA CITY State: OK Zip: 73102 + | Feet from 📝 East / 🗌 West Line of Section | |
| Contact Person:CLARK EDWARDS | Footages Calculated from Nearest Outside Section Corner: | |
| CONTRACTOR: License #_ 34453 | County: Neosho | |
| Name: PostRock Energy Services Corporation | Lease Name: GREVE, RICHARD N. Well #: 29-1 | |
| Wellsite Geologist: N/A | Field Name: | |
| Purchaser: | Producing Formation: FLEMING, CROWBURG, BEVIER, MULKY, SUMMIT, BARTLESVILLE | |
| Designate Type of Completion: | Elevation: Ground: 930 Kelly Bushing: 0 | |
| New Well Re-Entry ✓ Workover | Total Depth: 995 Plug Back Total Depth: 985 | |
| Oil wsw swd slow | Amount of Surface Pipe Set and Cemented at: 21 Feet | |
| Gas D&A ENHR SIGW | Multiple Stage Cementing Collar Used? Yes V No | |
| ✓ OG GSW Temp. Abd. | If yes, show depth set: Feet | |
| CM (Coal Bed Methane) | If Alternate II completion, cement circulated from: | |
| Cathodic Other (Core, Expl., etc.): | feet depth to:w/sx cmt | |
| If Workover/Re-entry: Old Well Info as follows: | | |
| Operator: POSTROCK | Drilling Fluid Management Plan | |
| Well Name: _GREVE, RICHARD N 29-1 | (Data must be collected from the Reserve Pit) | |
| Original Comp. Date: 10/1/2007 Original Total Depth: 995 | Chloride content: ppm Fluid volume: bbls | |
| ☐ Deepening | Dewatering method used: | |
| Plug Back: Plug Back Total Depth | Location of fluid disposal if hauled offsite: | |
| ✓ Commingled Permit #: | Operator Name: | |
| Dual Completion Permit #: | 1 | |
| SWD Permit #: | Lease Name: License #: | |
| ENHR Permit #: | QuarterSecTwpS. R East West | |
| GSW Permit #: | County: Permit #: | |
| 3/21/2012 3/21/2012 | | |
| Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date | | |

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

| NCC Office Use ONLY | |
|---|-----------------|
| Letter of Confidentiality Received Date: _06/05/2012 | |
| Confidential Release Date: | |
| Wireline Log Received | |
| Geologist Report Received | • |
| UIC Distribution | |
| ALT I I II Approved by: NAOMI JAMES D | ate: 06/06/2012 |