



KANSAS CORPORATION COMMISSION 1083389  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
June 2009

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

**CONFIDENTIAL**

**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 ) 4324200  
CONTRACTOR: License # 34453  
Name: PostRock Energy Services Corporation  
Wellsite Geologist: N/A  
Purchaser: \_\_\_\_\_

API No. 15 - 15-133-26386-00-01  
Spot Description: \_\_\_\_\_  
SW NE NE SE Sec. 13 Twp. 28 S. R. 18  East  West  
2142 Feet from  North /  South Line of Section  
493 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Neosho  
Lease Name: STICH WILLIAM A Well #: 13-1  
Field Name: \_\_\_\_\_  
Producing Formation: RIVERTON, ROWE, NEUTRAL, FLEMING, CROWBURG, BEVIER, MULKY, SUMMIT, CATTLEMA  
Elevation: Ground: 938 Kelly Bushing: 0  
Total Depth: 1065 Plug Back Total Depth: 1060  
Amount of Surface Pipe Set and Cemented at: 23 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.

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: POSTROCK  
Well Name: STICH, WILLIAM A 13-1  
Original Comp. Date: 2/20/2006 Original Total Depth: 1065  
 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>4/24/2012</u>	<u>4/24/2012</u>
Spud Date or Recompletion Date	Date Reached TD Completion Date or Recompletion Date

**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	
<input checked="" type="checkbox"/>	Letter of Confidentiality Received Date: <u>06/05/2012</u>
<input type="checkbox"/>	Confidential Release Date: _____
<input type="checkbox"/>	Wireline Log Received
<input type="checkbox"/>	Geologist Report Received
<input type="checkbox"/>	UIC Distribution
ALT <input type="checkbox"/> I <input checked="" type="checkbox"/> II <input type="checkbox"/> III	Approved by: <u>NAOMI JAMES</u> Date: <u>06/06/2012</u>