



KANSAS CORPORATION COMMISSION 1095766
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) 432-4200
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 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 #: _____

<u>11/14/2011</u>	<u>11/15/2011</u>	<u>12/12/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-125-32121-00-00

Spot Description: _____

E2 W2 SW SE Sec. 7 Twp. 31 S. R. 15 East West
660 Feet from North / South Line of Section
2100 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Montgomery

Lease Name: SCHWATKEN, WILBUR A Well #: 7-1

Field Name: _____

Producing Formation: CHEROKEE COALS

Elevation: Ground: 952 Kelly Bushing: 0

Total Depth: 1530 Plug Back Total Depth: _____

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: 1522

feet depth to: 0 w/ 140 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: 10/11/2012



1095766

Operator Name: PostRock Midcontinent Production LLC Lease Name: SCHWATKEN, WILBUR A Well #: 7-1
 Sec. 7 Twp. 31 S. R. 15 East West County: Montgomery

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 LOGS
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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	11	8.625	20	22	PORTLAND	4	
PRODUCTION	7.875	5.5	14.5	1522.18	A	140	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing	-			
<input type="checkbox"/> Plug Back TD	-			
<input type="checkbox"/> 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
3	1334-1337	550 GALS 15% ACID/ 508 BBLS SLICK WATER/ 4900# 20/40 SAND	1334-1337
3	1195-1199/1124-1127	300 GALS 15% ACID/ 1324 BBLS SLICK WATER/ 10800# 20/40 SAND	1195-1199/1124-1127
3	1081-1085/1061-1065	400 GALS 15% ACID/ 1064 BBLS SLICK WATER	1081-1085/1061-1065
3	1023-1029/1004-1008	400 GALS 15% ACID/ 1055 BBLS SLICK WATER/ 15500# 20/40 SAND	1023-1029/1004-1008

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. 12/19/2011		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.
		19	0
		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> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	PostRock Midcontinent Production LLC
Well Name	SCHWATKEN, WILBUR A 7-1
Doc ID	1095766

All Electric Logs Run

GRN
DIL
CDL
NDL
TEMP

McPherson Drilling LLC Drillers Log

PO#	AFE# D11089		
Rig Number:	1	S. 28	T. 31 R.15 E
API No. -15-	125-32121	County:	Montgomery
Elev.	952	Location:	

Gas Tests:	
578'	0
678'	0
705'	0
779'	0
904'	0
929'	0
1004'	0
1029'	0
1079'	0
1139'	0
1179'	0
1220'	0
1380'	0
1404'	0
1530'	0
Comments:	
Start injecting @	

Operator:	POSTROCK		
Address:	210 Park Ave Ste 2750 Oklahoma City, OK 73102-5641		
Well No:	7-1	Lease Name:	SCHWATKEN WILBUR
Footage Location:	660	ft. from the	SOUTH Line
	2,100	ft. from the	WEST Line
Drilling Contractor:	McPherson Drilling LLC		
Spud date:	11/14/2011	Geologist:	Ken Recoy
Date Completed:	11/15/2011	Total Depth:	1530

Casing Record			Rig Time:	
	Surface	Production		
Size Hole:	11	7 7/8		
Size Casing:	8 5/8			h2o 350'
Weight:	20			
Setting Depth:	22	McP		
Type Cement:	Portland		DRILLER:	Andy Coats
Sacks:	4	McP		

Well Log										
Formation	Top	Btm.	HRS.	Formation	Top	Btm.		Formation	Top	Btm.
Soil	0	3		Lime	758	762		Coal	1365	1368
Lime	3	18		Shale	762	890		Shale	1368	1384
Shale	18	24		Coal	890	891		Miss	1384	1530
Lime	24	66		Lime	891	907				
Shale	66	182		Coal	907	909				
Lime	182	184		Sand Shale	909	914				
Shale	184	276		Shale	914	970				
Sand Shale	276	310		Oswego	970	993				
Shale	310	405		Summit	993	1001				
Lime	405	490		Lime	1001	1016				
Black Shale	490	492		Mulky	1016	1025				
Lime	492	511		Lime	1025	1030				
Shale	511	575		Shale	1030	1056				
Coal	575	576		Coal	1056	1058				
Lime	576	610		Shale	1058	1115				
Shale	610	659		Coal	1115	1116				
Lime	659	667		Shale	1116	1169				
Coal	667	668		Coal	1169	1170				
Shale	668	703		Shale	1170	1205				
Coal	703	704		Coal	1205	1207				
Lime	704	725		Shale	1207	1220				
Sand Shale	725	752		Sand Shale	1220	1251				
Lime	752	757		Black Shale	1251	1252				
Coal	757	758		Shale	1252	1365				

QUEST

Resource Corporation



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

AFE
D11089

TREATMENT REPORT & FIELD TICKET CEMENT

TICKET NUMBER 7181

FIELD TICKET REF # _____

FOREMAN Joe Blanchard

SSI 631700

API 15-125-32121

DATE	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-22-11	Schwatken Wilbur 7-1	7	31	15	MG

FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe Blanchard	7:00	3:00		904850		8	<i>Joe Blanchard</i>
Justin J. Jacob	7:00	3:00		903255		8	<i>Justin J. Jacob</i>
Chris Mitchell	7:00	3:00		903142		8	<i>Chris Mitchell</i>
DUSTIN PORTER	7:00	3:00		903600		8	<i>Dustin Porter</i>
Bobby Rice	7:00	2:00				7	
Wes Graham	10:00	3:00		903400	931405	5	<i>Wes Graham</i>

JOB TYPE Longstring HOLE SIZE 7 7/8 HOLE DEPTH 1532 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 1522.18 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 36.24 DISPLACEMENT PSI _____ MIX PSI _____ RATE 46pm

REMARKS:
wash 12 Joints 450 Ft 5 1/2 in hole swept 2 SKS gal to surface
Installed Cement head RAN 28 bbl dye & 180 SKS of cement to get dye
TO surface. Flush pump & pumped wiper plug to bottom & set float shoe.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
904850	8 hr	Foreman Pickup	
903197	8 hr	Cement Pump Truck	
903600	8 hr	Bulk Truck	
903401	8 hr	Transport Truck	
931405	8 hr	Transport Trailer	
904735	8 hr	80 Vac	
	1522.18 Ft	Casing	
	7	Centralizers	
	1	Float Shoe	
	1	Wiper Plug	
	1	Frac Baffles 4" SMALL Hole	
	140 SK	Portland Cement	
	135 SK	Gilsonite	
	2 SK	Flo-Seal	
	15 SK	Premium Gel	
	6 SK	Cal Chloride	
	2	5 1/2 Basket	
	10000 gal	City Water	
	7 hr	Casing tractor	
	7 hr	Casing+trailer	