

**Notice:** Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

the same are true and correct, so help me God.

## Kansas Corporation Commission Oil & Gas Conservation Division

## 1320554

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

## WELL PLUGGING RECORD K.A.R. 82-3-117

Name:	OPERATOR: License #:				API No. 15					
State:   Zip:   +					Spot Description:					
City:										
Contact Person:	Address 2:			_	Feet from North / South Line of Section					
Phone: (	City:	State:	Zip:+	_						
Type of Well: (Check one)	Contact Person:			F						
Water Supply Well   Other:	Phone: ( )					NE NW	SE SW			
Water Supply Well   Other:	Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathodi	ic c	ounty:					
ENIR Permit #:	Water Supply Well	Other:	SWD Permit #:		i i					
As ACC1 filed?	ENHR Permit #:	Gas Sto	orage Permit #:		Date Well Completed:					
Producting Formation(s): List All (If needed attach another sheet)    Depth to Top:	Is ACO-1 filed? Yes	No If not, is wel	Il log attached? Yes							
Depth to Top: Bottom:T.D	Producing Formation(s): List	— All (If needed attach anothe	r sheet)			•				
Depth to Top: Bottom:	Depth to	o Top: Botto	om: T.D							
Show depth and thickness of all water, oil and gas formations.  Oil, Gas or Water Records  Casing Record (Surface, Conductor & Production)  Formation  Content  Casing  Size  Setting Depth  Pulled Out  Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.  Plugging Contractor License #:	Depth to	o Top: Botto	om: T.D							
Oil, Gas or Weter Records  Casing Size Setting Depth Pulled Out  Content Casing Content Casing Size Setting Depth Pulled Out  Content Casing Content Casing Size Setting Depth Pulled Out  Content Casing Content Casing Content Casing Setting Depth Pulled Out  Content Content Casing Setting Depth Pulled Out  Content Content Content Content Content Casing Setting Depth Pulled Out  Content Content Content Content Content Content Content Casing Setting Depth Pulled Out  Content Content Content Content Content Casing Setting Depth Pulled Out  Content Content Content Content Content Casing Setting Depth Pulled Out  Content Content Content Content Casing Setting Depth Pulled Out  Content Content Content Content Content Casing Setting Depth Pulled Out  Content Con	Depth to	o Top: Botto	om:T.D		lugging C	Completed:				
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Formation Content Casing Size Setting Depth Pulled Out    Casing   Size   Setting Depth   Pulled Out	Show depth and thickness of	all water, oil and gas form	ations.							
Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If the character of same depth placed from (bottom), to (top) for each plug set.  Plugging Contractor License #:	Oil, Gas or Wate	r Records		Casing Rec	ord (Surfa	ace, Conductor & Produ	iction)			
Plugging Contractor License #: Name:	Formation	Content	Casing	Size		Setting Depth	Pulled Out			
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Address 1: Address 2:	cement or other plugs were u	sed, state the character of	same depth placed from (bot	itom), to (top)	for each	n plug set.				
City:	Plugging Contractor License #: Na				ə:					
Phone: ( )  Name of Party Responsible for Plugging Fees:	Address 1:			Address 2:						
Name of Party Responsible for Plugging Fees:	City:			S	ate:		Zip:	+		
State of, ss.	Phone: ( )									
	Name of Party Responsible for	or Plugging Fees:								
	State of	Countv			SS.					
				,						

**Submitted Electronically** 

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and



Remarks.

FIELD ORDER Nº C 44336

BOX 438 • HAYSVILLE, KANSAS 67060 316-524-1225

DATE 10 - 4 20 16

IS AUTHORIZ	ZED BY:	BEAR PETROleum LLC			
Address		City		_ State	
To Treat Well As Follows: I	Lease AL	TON UNRUL Well No. 2	Customer C	order No	
Sec. Twp. Range	26-30	05-18W County KilWI	9	_ State/	<u> </u>
not to be held li- implied, and no treatment is pay our invoicing de	able for any dai representations able. There will partment in acc	consideration hereof it is agreed that Copeland Acid Service is to service mage that may accrue in connection with said service or treatment. Cop have been relied on, as to what may be the results or effect of the service be no discount allowed subsequent to such date. 6% interest will be chordance with latest published price schedules.  Thimself to be duly authorized to sign this order for well owner or operate.	peland Acid Service has icing or treating said well arged after 60 days. Tot	made no repre I. The conside	sentation, expressed or ration of said service or
THIS ORDER MU BEFORE WORK		Well Owner or Operator	By	Agent	
CODE	QUANTITY	DESCRIPTION		UNIT	AMOUNT
2	50	Mileage Pickup		2,00	100,00
2	50	Mileage PumpTRuck		4.00	200.00
2	/	PUMP Cha [PTA]		650.00	650,00
2	5185x	60-40 POZ 490 GC1		10.75	5568,50
2	95x	ADD Gel		22.00	198.00
	-				
2	506	Bulk Charge		1,25	657.50
2	50	Bulk Truck Miles 23,423 x 50 = 1171.65 x 1.1.			1288.82
			llons		0
		Т	OTAL BILLING	9	8662.82
		e material has been accepted and used; that the above se ection, supervision and control of the owner, operator or h			
	Representati	To Tonack	e agent, miese eig.		
		Nd Ks. R.A	Schoon	1 1100	
Station	J. WE	$VU_{f}$ / $V$ .	Well Owner, Operator	or Agent	

**NET 30 DAYS** 



## TREATMENT REPORT

Acid (	& Cemen	t 🕮						Acid Stage No	). 	
					Type Treatment:	Amt.	Type Fluid	Sand Size	Pounc	ls of Sand
Date 10/6/2016 District GREAT BEND KS. F.O. No. 44336				100000						
-	BEAR PETROL									
Well Name	& No. ALTON	UNRUH #2								
Location	26-3	30S-18W	Field							1 -
County	KIOWA		ST KANSAS		Flush					
					Treated from		ft. to	ft.	No. ft.	0
Casing:	Size 5 1/2	Type & Wt.		Set at 5046' ft.					No. ft.	0
Formation	: CI	BP AT 4830'	Perf.	to	from		ft. to	ft.	No. ft	0
Formation			Perf.	to	Actual Volume of Oil					Bbl./Gal.
Formation	:		Perf.	to						
Liner: Si	ze Type &	Wt.	Top at ft.	Bottom atft.	Pump Trucks. No	o. Used: Std.	365 Sp		Twin	
				ft. toft.	Auxiliary Equipment		360-310T	165-308T		
			Swung at		Personnel DUANE	GREG MIKE JO	RDEN ARRON			_
	Perforated for	rom	ft. to	1150' ft.	#NAME?					
					Plugging or Sealing M	Materials: Type				
Open Hole	Size	T.D.	ft. P.	B. toft.				Gals.		lb.
			U U							
Company (	Representative		R. A. (DICK) SCH	IREMMER	Treater		DUANE			
TIME	PRES	SURES	Total Fluid Pumped			REMARKS				
a.m./p.m.	Tubing	Casing	Total Fidia Fulliped			MEINAMO				
1230PM				ON LOC						
				BREAK CIR						
			0	MIX CMT 60-40	POZ 4% GEL F	FROM 1150'	TO SURFAC	E		
			132 BBLS	CIR CMT TO SUR	FACE					
245PM				JOB COMPLETE						
				THANK YOU						
										100 Oc. 11 100 100 100 100 100 100 100 100 100
									100	
							· · · · · · · · · · · · · · · · · · ·			
				X X						