

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1347607
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

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

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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.

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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

1347607

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Bear Petroleum, LLC
Well Name	HOLOPIREK 28-2
Doc ID	1347607

Tops

Name	Top	Datum
Anhydrite	1088	892
Base Anhydrite	1121	854
Heebner	3313	-1333
Toronto	3333	-1353
Lansing	3370	-1390
Base Kansas City	3628	-1648
Conglomerate	3697	-1717
Arbuckle	3714	-1734
RTD	3780	-1800



FIELD ORDER N^o C 44498

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

DATE 12-2-16 20

IS AUTHORIZED BY: Beer Petroleum (NAME OF CUSTOMER)
 Address _____ City _____ State _____
 To Treat Well _____
 As Follows: Lease Holopirck Well No. 28-2 Customer Order No. _____
 Sec. Twp. _____
 Range _____ County Rush State Mo

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED _____ By _____
 Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	25	mileage pump truck	4. ^{00/}	100.00
	25	mileage pickup	2. ^{00/}	50.00
	1	Pump Charge - Surface		1,100.00
	700	Concre-	12. ^{75/}	\$,925.00
	300	65/35 poz. 2% sol	10. ^{75/}	3,225.00
	11	40% add. sol	22. ⁰⁰	242.00
	56	Calcium Chloride	30. ^{00/}	1,680.00
	110 110 sol.	Sodium Silicate	7. ^{50/}	825.00
	8	Pump Charge - misc.	650. ^{00/}	1950.00
	1	Baffle Plate		110.00
	1,067	Bulk Charge	1. ^{25/}	1,333.75
		Bulk Truck Miles 48.05 T x 1201.25 T x 1. ^{19/}	1. ^{10/}	1,321.38
		Process License Fee on _____ Gallons		20,862.13
		TOTAL BILLING		

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Netra W.

Station G.S.

Dieb S.
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS



TREATMENT REPORT

Acid Stage No. _____

Date 12/6/2016 District G.B. F.O. No. C44498
 Company Bear Petroleum
 Well Name & No. Holopirek 28-2
 Location _____ Field _____
 County Rush State KS
 Casing: Size 8 5/8" Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Liner: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes No Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. _____ Swung at _____ ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size _____ T.D. _____ ft. P.B. to _____ ft.

Type Treatment: Amt. Type Fluid Sand Size Pounds of Sand
 Bkdown _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 Flush _____ Bbl./Gal. _____
 Treated from _____ ft. to _____ ft. No. ft. 0
 from _____ ft. to _____ ft. No. ft. 0
 from _____ ft. to _____ ft. No. ft. 0
 Actual Volume of Oil / Water to Load Hole: _____ Bbl./Gal.
 Pump Trucks. No. Used: Std. 318 Sp. _____ Twin _____
 Auxiliary Equipment 365-367/308
 Personnel Nathan-Jordan-Mike-Tim
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type _____ Gals. _____ lb.

Company Representative Dick S. Treater Nathan W.

TIME a.m./p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
12:15				On Location.
				Surface-920'
				Break circulation with pump truck. Mix 300sk 65/35poz 6%gel 3% C.C. at 19#/gal Mix 150sk Common 3% C.C. at 18#/gal.
				Displace with 56bbls at 6bpm-300#
4:30				Shut in with water still flowing out annulus.
				Run 1" pipe to 450' Run 1" pipe to 400' Mix 125sk Common 3% C.C. Start pump Flow Check down the other string of 1" Mix another 25sk. Still had water flow out annulus.
				Perf holes at 450'
				Tie on surface pipe and take inj rate at 6bpm-200# Mix 150sk Common 3% C.C. Mix 250sk Common 3% C.C with 2#/sk Salt.
3:00				Displace with 26bbls at 7.25bpm-1400# Shut in. Stopped water flow out annulus. Wait 30 minutes. No water flow out annulus.
				Thank You! Nathan W.



FIELD ORDER N^o C 44507

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

DATE 12/14/16 20

IS AUTHORIZED BY: Beac Petroleum (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Holopiret Well No. 28-2 Customer Order No. _____

Sec. Twp. Range _____ County Rush State ks

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED _____ By _____
Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
2	30	mileage pump truck	4. ^{00/}	120.00
2	30	mileage pickup	2. ^{00/}	60.00
2	2	Pump Charge - Cons strings	1600. ^{00/}	3,200.00
2	150	60/40 ppc. 2% sol.	10. ^{75/}	1,612.50
2	100 ^{lb}	C-37	4. ^{00/}	400.00
2	100 ^{lb}	C-41p	3. ^{75/}	375.00
2	50 ^{lb}	C-12	6. ^{00/}	300.00
2	950 ^{lb}	scit	.25	237.50
	730 ^{lb}	Gisacite	.75	562.50
2	450	05/35 ppc. 2% sol.	10. ^{75/}	4,837.50
2	16	40% add. sol.	22. ^{00/}	352.00
2	1	5 1/2" Flood shoe w/ auto-fil		355.00
2	1	DW Tool w/ Plug		2,450.00
2	7	Centrifuges	85. ^{00/}	595.00
2	3	Baskets	155. ^{00/}	465.00
2	600	Bulk Charge med-flush.	.75	450.00
	655		1.25	818.75
2		Bulk Truck Miles $28.18 T \times 30m = 845.47m \times 1.14$	1. ^{10/}	929.94
		Process License Fee on _____ Gallons		18,120.69
		TOTAL BILLING	10 ^{00/}	1812.06

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Nathan W.

116,308.63

Station G.A.

Dick S.
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

TREATMENT REPORT

Acid Stage No. _____

Date 12/14/2016 District G.B. F.O. No. C44507

Company Bear Petroleum

Well Name & No. Holopirek 28-2

Location _____ Field _____

County Rush State KS

Casing: Size 5.5" Type & Wt. 15.5# New Set at _____ ft.

Formation: Arbuckle Perf. _____ to _____

Formation: _____ Perf. _____ to _____

Formation: _____ Perf. _____ to _____

Liner: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.

Cemented: Perforated from _____ ft. to _____ ft.

Tubing: Size & Wt. _____ Swung at _____ ft.

Perforated from _____ ft. to _____ ft.

Open Hole Size 7 7/8" T.D. 3781' ft. P.B. to _____ ft.

Type Treatment: _____ Amt. _____ Type Fluid _____ Sand Size _____ Pounds of Sand _____

Bkdown _____ Bbl./Gal. _____

_____ Bbl./Gal. _____

_____ Bbl./Gal. _____

_____ Bbl./Gal. _____

Flush _____ Bbl./Gal. _____

Treated from _____ ft. to _____ ft. No. ft. 0

_____ from _____ ft. to _____ ft. No. ft. 0

_____ from _____ ft. to _____ ft. No. ft. 0

Actual Volume of Oil / Water to Load Hole: _____ Bbl./Gal.

Pump Trucks. No. Used: Std. 365 Sp. _____ Twin _____

Auxiliary Equipment 327 360/310

Personnel Nathan-Jordan-Mike-Aaron

Auxiliary Tools DV Tool-1410'

Plugging or Sealing Materials: Type _____ Gals. _____ lb.

Company Representative _____ Treater Nathan W.

TIME	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
6:30		5.5"		On Location. Rig laying down drill pipe. Rig up to run casing.
				Pipe-3780' 5.5" 15.5# New.
				Baffle-3767'
				DV Tool-1410'
				Centralizer-1-2-4-7-11-58-59
				Baskets-3-6-56
				Tag bottom and pick up 1'
				Break circulation with mud pump. Circulate for 30 minutes.
				Pump 600gal of Mud Flush.
				Mix 150sk 60/40poz 2%gel .75% C-37 .5% C-12 .75% C-41p 12% Salt 5#/sk Gilsonite.
				Wash out pump and lines.
1:45				Displace with 89.6bbls at 7.5bpm-900# Plug landed at 1200# Pressure up to 1500# Release pressure. Float held.
				Drop opening tool for DV Tool. Pressure up to 800# Tool opened.
				Circulate for 2 hours with mud pump.
3:45				Plug rat hole with 30sk and mouse hole with 20sk.
				Mix 450sk 65/35poz 6%gel Displace with 33bbls. Circulated cement to surface. Pressure up to 1500# to close DV tool.
				Thank You! Nathan W.



DRILL STEM TEST REPORT

Prepared For: **Bear Petroleum LLC**

PO Box 438
Haysville KS 67060-0438

ATTN: R.A.Schremmer, Jim Mu

Holopirek #28-2

28-18s-17w Rush,KS

Start Date: 2016.12.12 @ 23:20:50

End Date: 2016.12.13 @ 07:17:59

Job Ticket #: 64078 DST #: 1

Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Printed: 2016.12.14 @ 09:43:37



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Bear Petroleum LLC
 PO Box 438
 Haysville KS 67060-0438
 ATTN: R.A.Schremmer, Jim Mu

28-18s-17w Rush, KS
Holopirek #28-2
 Job Ticket: 64078 **DST#: 1**
 Test Start: 2016.12.12 @ 23:20:50

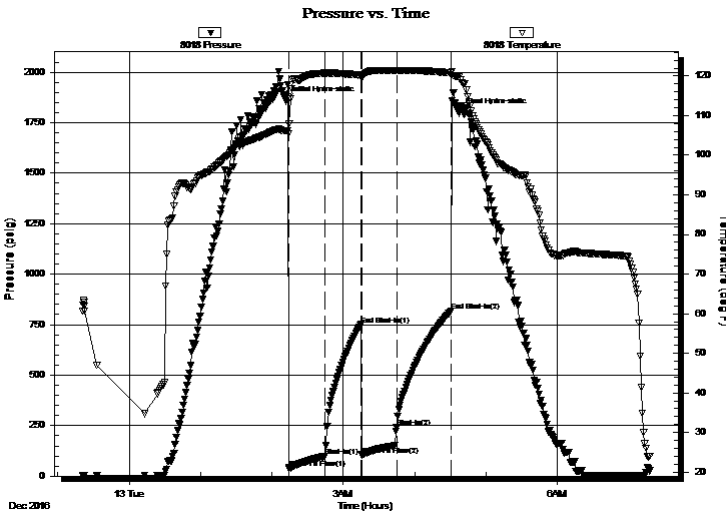
GENERAL INFORMATION:

Formation: **Arbuckle**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 02:14:00
 Time Test Ended: 07:17:59
 Interval: **3720.00 ft (KB) To 3728.00 ft (KB) (TVD)**
 Total Depth: 3728.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Ray Schwager
 Unit No: 77
 Reference Elevations: 1980.00 ft (KB)
 1970.00 ft (CF)
 KB to GR/CF: 10.00 ft

Serial #: 8018 Inside
 Press@RunDepth: 243.40 psig @ 3721.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2016.12.12 End Date: 2016.12.13 Last Calib.: 2016.12.13
 Start Time: 23:20:50 End Time: 07:17:59 Time On Btm: 2016.12.13 @ 02:11:45
 Time Off Btm: 2016.12.13 @ 04:37:14

TEST COMMENT: 30-IFP-strg bl in 3 min
 30-ISIP-1/2" bl bk
 30-FFP-strg bl in 9 min
 45-FSIP-surface bl bk

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1857.25	106.16	Initial Hydro-static
3	39.27	105.38	Open To Flow (1)
33	99.41	120.72	Shut-In(1)
63	750.13	120.24	End Shut-In(1)
64	104.94	119.90	Open To Flow (2)
93	243.40	121.38	Shut-In(2)
139	819.02	120.76	End Shut-In(2)
146	1797.29	119.75	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
124.00	Water	1.74
80.00	MGWCO 10%G20%W30%M40%O	1.12
145.00	CO	2.03
0.00	340' GIP	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Bear Petroleum LLC
PO Box 438
Haysville KS 67060-0438
ATTN: R.A.Schremmer, Jim Mu

28-18s-17w Rush, KS
Holopirek #28-2
Job Ticket: 64078 **DST#: 1**
Test Start: 2016.12.12 @ 23:20:50

Tool Information

Drill Pipe:	Length: 3729.00 ft	Diameter: 3.80 inches	Volume: 52.31 bbl	Tool Weight:	2200.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer:	25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose:	70000.00 lb
			<u>Total Volume: 52.31 bbl</u>	Tool Chased	0.00 ft
Drill Pipe Above KB:	30.00 ft			String Weight: Initial	58000.00 lb
Depth to Top Packer:	3720.00 ft			Final	60000.00 lb
Depth to Bottom Packer:	ft				
Interval between Packers:	8.00 ft				
Tool Length:	29.00 ft				
Number of Packers:	2	Diameter: 6.75 inches			

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
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Change Over Sub	1.00			3700.00	
Shut In Tool	5.00			3705.00	
Hydraulic tool	5.00			3710.00	
Packer	5.00			3715.00	21.00 Bottom Of Top Packer
Packer	5.00			3720.00	
Stubb	1.00			3721.00	
Recorder	0.00	8018	Inside	3721.00	
Recorder	0.00	8700	Outside	3721.00	
Perforations	4.00			3725.00	
Bullnose	3.00			3728.00	8.00 Bottom Packers & Anchor
Total Tool Length:	29.00				



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Bear Petroleum LLC
 PO Box 438
 Haysville KS 67060-0438
 ATTN: R.A.Schremmer, Jim Mu

28-18s-17w Rush, KS
Holopirek #28-2
 Job Ticket: 64078 **DST#: 1**
 Test Start: 2016.12.12 @ 23:20:50

Mud and Cushion Information

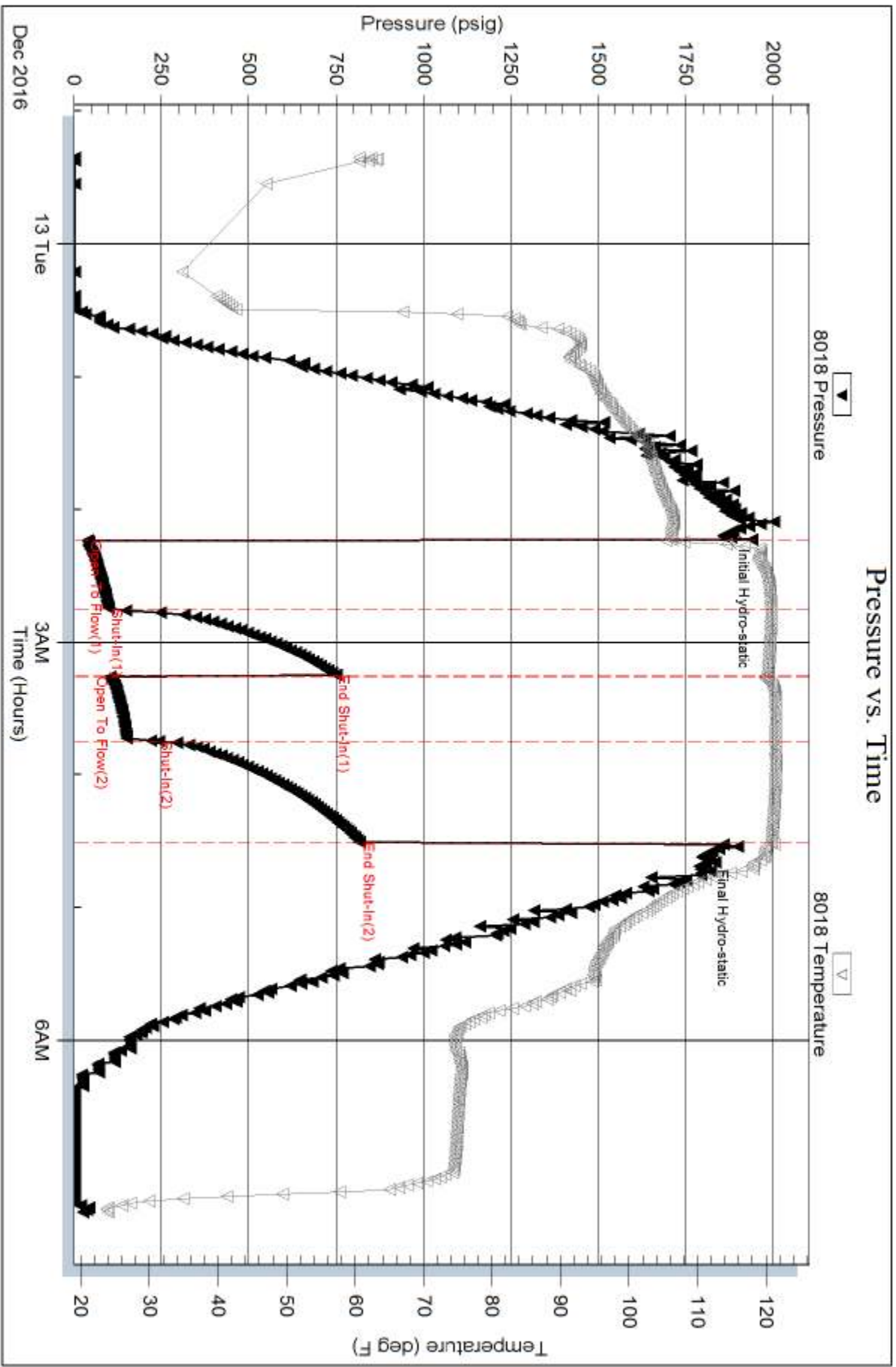
Mud Type: Gel Chem	Cushion Type:	Oil API: 39 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: 28000 ppm
Viscosity: 63.00 sec/qt	Cushion Volume: bbl	
Water Loss: 10.34 in ³	Gas Cushion Type:	
Resistivity: ohm.m	Gas Cushion Pressure: psig	
Salinity: 5000.00 ppm		
Filter Cake: 1.00 inches		

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
124.00	Water	1.739
80.00	MGWCO 10%G20%W30%M40%O	1.122
145.00	CO	2.034
0.00	340' GIP	0.000

Total Length: 349.00 ft Total Volume: 4.895 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments: RW .28@60F

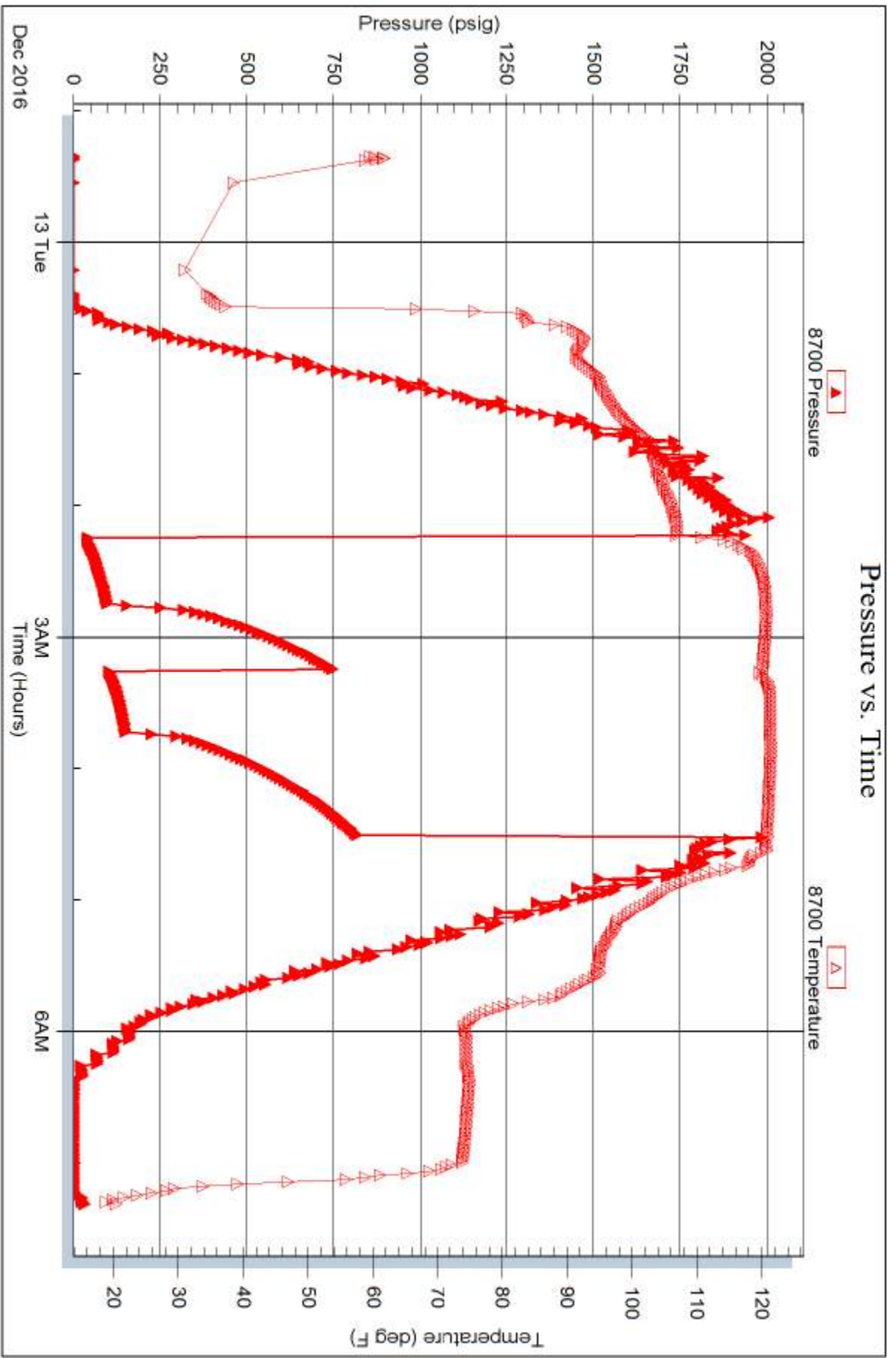


Serial #: 8700

Outside Bear Petroleum LLC

Holopiek #28-2

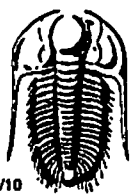
DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 64078

Printed: 2016.12.14 @ 09:43:38



TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 64078

Well Name & No. Holopirek 28-2 Test No. 1 Date 12-12-16
 Company Bear Petroleum LLC Elevation 1980 KB 1970 cr. GL
 Address PO Box 438 Haysville, Ks 67060-0438
 Co. Rep / Geo. Jim Musgrove Rig E.C. Services rig
 Location: Sec. 28 Twp. 18^s Rge. 17^w Co. Rush State Ks

Interval Tested 3720-3728 Zone Tested Arbuckle
 Anchor Length 8 Drill Pipe Run 3729 Mud Wt. 9.4
 Top Packer Depth 3715 Drill Collars Run - Vis 6.3
 Bottom Packer Depth 3720 Wt. Pipe Run - WL 10.4
 Total Depth 3728 Chlorides 5000 ppm System LCM 1 1/2 #

Blow Description IFP - STRONG BLOW IN 3 MIN
ISIP - 1/2" Blow Back
FFP - STRONG BLOW IN 9 MIN
FSIP - surface Blow Back

Rec	Feet of	%gas	%oil	%water	%mud
<u>340</u>	<u>GIP</u>				
<u>145</u>	<u>CO</u>				
<u>80</u>	<u>M6WCO</u>	<u>10</u>	<u>40</u>	<u>20</u>	<u>30</u>
<u>124</u>	<u>WATER</u>				
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 369 BHT 120 Gravity 39 API RW .28 @ 60 °F Chlorides 28000 ppm

(A) Initial Hydrostatic 1857
 (B) First Initial Flow 39
 (C) First Final Flow 99
 (D) Initial Shut-In 750
 (E) Second Initial Flow 104
 (F) Second Final Flow 243
 (G) Final Shut-In 819
 (H) Final Hydrostatic 1797

Test 1050
 Jars _____
 Safety Joint _____
 Circ Sub _____
 Hourly Standby _____
 Mileage 75 RT 56.25
 Sampler _____
 Straddle _____
 Shale Packer _____
 Extra Packer _____
 Extra Recorder _____
 Day Standby _____
 Accessibility _____
 Sub Total 1106.25

T-On Location 2220
 T-Started 2320
 T-Open 0210
 T-Pulled 0425
 T-Out 0717

Comments _____
 Ruined Shale Packer _____
 Ruined Packer _____
 Extra Copies _____
 Sub Total 0
 Total 1106.25
 MP/DST Disc't _____

Initial Open 30
 Initial Shut-In 30
 Final Flow 30
 Final Shut-In 45

Approved By _____ Our Representative Ray Schwager Thank you

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