

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

KANSAS CORPORATION COMMISSION 1359764
 OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

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

OPERATOR: License #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
 Is ACO-1 filed? Yes No If not, is well log attached? Yes No
 Producing Formation(s): List All (If needed attach another sheet)
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

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
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 Plugging Completed: _____

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 cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugging Contractor License #: _____ Name: _____
 Address 1: _____ Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Phone: (_____) _____
 Name of Party Responsible for Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

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

Submitted Electronically



FIELD ORDER N° C 44947

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

DATE May 30 & 31 20 19

IS AUTHORIZED BY: Victory Mountain LLC BEAR PETROLEUM
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Hauschild Well No. 1 Customer Order No. _____

Sec. Twp. Range _____ County Rice 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

Well Owner or Operator

By _____

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
		5-30-17		
	1	Pump chg for Ply Job		650 ⁰⁰
	150 sack	Class A Con. @ 12 ⁷⁵ /sack		1912 ⁵⁰
	75 sack	80-20-2% Poz @ 10 ⁷⁵ /sack		806 ²⁵
	400 ⁰⁰	Cotton seed Hulls @ 40¢/lb.		160 ⁰⁰
	11 Bags	30lb Bags Calcium Chloride @ 30 ⁰⁰ /bag		330 ⁰⁰
	87 miles	1 way pump truck mileage @ 7 ⁰⁰ /mile		148 ⁰⁰
	4 Hrs	Overage of 4 Hrs @ 100 ⁰⁰ /hr		400 ⁰⁰
		5-31-17		
	1	Pump chg for ply Job.		650 ⁰⁰
	35 sack	Class A Con @ 12 ⁷⁵ /sack		446 ²⁵
	100 sack	60-40-2% @ 10 ⁷⁵ /sack		1075 ⁰⁰
	100 ⁰⁰	Hulls @ 40¢/lb.		40 ⁰⁰
	5 bags	Calcium Chloride @ 30 ⁰⁰ /bag		150 ⁰⁰
	960 sack	Bulk Charge @ 12 ⁷⁵ /sack		450 ⁰⁰
	57 ⁷⁵	Bulk Truck Miles @ 1 ¹⁰ /100 mile		645 ⁰⁰
		Process License Fee on _____ Gallons		
			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 [Signature]

Station Burrton

Well Owner, Operator or Agent

Remarks Ply over second day 11:00
NET 30 DAYS



TREATMENT REPORT

Acid Stage No. 05

Date: 5/30/17 District: Bureau F. O. No. _____
 Company: Victory Mineral LLC / BEAR PETROLEUM
 Well Name & No.: Hawthorn 1
 Location: _____ Field: _____
 County: Rice State: TX
 Casing: Size 7 1/2 Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Liner: Size 4 1/2 Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No _____ Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. 2 3/8 Hwung at 1061 ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size _____ T.D. _____ ft. P.D. 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. _____
 from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: _____ Bbl./Gal. _____
 Pump Trucks, No. Used: Std. 323 Sp. _____ Twin _____
 Auxiliary Equipment Bulk tank 322
 Packer: _____ Set at _____ ft.
 Auxiliary Tools TT 133
 Plugging or Sealing Materials: Type 185 sack Cem 175 sack Poz
500# Hulls 480# CC (Gal. _____ lb. _____)

Company Representative _____ Treater Myr KJ

TIME a.m./p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casings		
9:00				5/30/ On loc ISA Rig up to plug. Run work string in to 1060' tie or called for pit haul line pit
9:30				Mix w/ 35 sack Cem w/ 4 3/8 CC + 100# Hulls pump in hole
10:00				Chase w/ 2 BBLs water pull tube to 500' & let set 1/2 Hr.
10:30				Run tube back in did not touch cement
11:00				Mix another 40 sack Cem. 4 3/8 CC no hulls. flush 2 BBLs.
11:30				pull tube back up & let set 1 Hr.
12:00				Check sample / haul Run tube back in no cement in hole.
12:30				Mix 75 sack Cem. w/ 150# Hulls pump D.H. & clean w/ 2 BBLs
1:00				pull tube back up to 600'
1:30				Rig up small line & run one bottom of tube to cement
2:00				1450' Run tube back into 1060' tie on hole 9 BBLs to Break Circ.
2:30				Mix 75 sack RC-20-2 3/8 Poz w/ 4 3/8 CC + 300# Hull
3:00				Pump down hole flush 1 BBL water pulled tubing all way out shut down. Left 323 on loc
5:00				5/31
9:00				On Loc Rig up 323 top cement 740' down w/ small line
9:30				run 19 joints tubing 600' mix CC to 3 3/8 mix 35 sack
10:00				60-40-2 3/8 Poz & pump down hole took 2 BBLs to Break Circ
10:30				pull tube to 250' wait 1 Hr & run small line only had 15 Fill
11:00				Run tube to 500' mix 35 sack Cem 4 3/8 + 100# Hulls
11:30				pump down hole flush 1 BBL pull tube to 250'
12:00			0	Start mixing gey down hole 60-40-2 3/8 Poz
12:30			18 BBLs	70 sacks gey & good cement to surface shut down
1:00				Poz string full pull tube out wash up
1:30				Wash up rods & run down left loc.