



New Well

FIELD ORDER N° C 46710

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

DATE 1/4/19 20

IS AUTHORIZED BY: Bear Petroleum (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Bryant Bryant Well No. 2 Customer Order No. _____

Sec. Twp. Range _____ County Prince 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 _____ Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
		1/4/19		
2	45	nibose pump truck	4. ^{00/}	180.00
2	45	nibose pickup	2. ^{00/}	90.00
2	1	stad-by charge		550.00
		1/5/19		
2	45	nibose pickup	2. ^{00/}	90.00
2	1	Pump Charge - Sur-face		1,100.00
2	600	60% 40 perc. 2% gel.	10. ^{75/}	6,450.00
2	32	Calcium Chloride	30. ^{00/}	960.00
2	1	8 5/8" Nozzle		105.00
2	1	8 5/8" float shoe w/ auto-fill		600.00
2	632	Bulk Charge	1. ^{27/}	790.00
2		Bulk Truck Miles 27.2 T x 45m = 1,224 Tm x 1. ^{10/}	1. ^{10/}	1,346.40
		Process License Fee on _____ Gallons		12,261.40
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 Nathan W.

Station G.O.

Dick S.
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS



TREATMENT REPORT

Acid Stage No. _____

Date 1/4/2019 District GB F.O. No. C46710
 Company Bear Petroleum
 Well Name & No. Bryant #2
 Location _____ Field _____
 County Pawnee State KS

Type Treatment: Amt. Type Fluid Sand Size Pounds of Sand
 Bkdown _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 Flush _____ Bbl./Gal. _____

Logging: Size 8 5/8" Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____

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

Wellbore: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Perforated from _____ ft. to _____ ft.
 Logging: Size & Wt. _____ Swung at _____ ft.
 Perforated from _____ ft. to _____ ft.

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

Open Hole Size _____ T.D. _____ ft. P.B. to _____ ft.

Pump Trucks. No. Used: Std. 365 Sp. _____ Twin _____
 Auxiliary Equipment 360/310
 Personnel Nathan-Tim-Greg
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type _____ Gals. _____ lb.

Company Representative Dick S. Treater Nathan W.

TIME	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
12:30		8 5/8"		On Location. Rig pulling drill pipe. Start surface in hole. Would not go Past 50' +/- Run drill pipe in to condition and ream hole. Pull back out. Run surface back in to 50'+/- Would not go
12:45				Shut down till morning to relevel derrick.
1:30		8 5/8"		On Location. 1/5/19 Rig pulling drill pipe. 8 5/8" at 1276' Baffle at 1233.73'
				Break circulation with mud pump.
1:55				Mix 600sks 60/40poz 2%gel 3% Calcium Chloride.
				Displace with 78.4bbls at 7bpm-650# Plug landed at 850#
2:03:35				Release pressure. Float held.
				Thank You!
				Nathan W.