KOLAR Document ID: 1806336

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1
January 2018
Form must be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No.:
Name:	Spot Description:
Address 1:	SecTwpS. R East _ West
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	Datum: NAD27 NAD83 WGS84
Wellsite Geologist:	County:
Purchaser:	·
Designate Type of Completion:	Lease Name: Well #:
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:
☐ Oil ☐ WSW ☐ SWD ☐ Gas ☐ DH ☐ EOR	Producing Formation: Kelly Bushing: Elevation: Ground: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used? Yes No
Cathodic Other (Core, Expl., etc.):	If yes, show depth set: Feet
If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from:
Operator:	•
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to EOR Conv. to SWD Plug Back Liner Conv. to GSW Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
	Quarter Sec TwpS. R East West
Spud Date or Date Reached TD Completion Date or Recompletion Date	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 ☐ Drill Stem Tests Received
Geologist Report / Mud Logs Received
UIC Distribution
ALT I II Approved by: Date:

KOLAR Document ID: 1806336

Page Two

Operator Name: _				Lease Name:			Well #:	
Sec Twp.	S. R.	E	ast West	County:				
	flowing and shu	ut-in pressures, v	vhether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample
Samples Sent to 0	Geological Surv	/ey	Yes No	Na	me		Тор	Datum
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No					
		B	CASING eport all strings set-c		New Used	ion, etc.		
Purpose of Strir		Hole illed	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTING / SO	UEEZE RECORD			
Purpose:		epth T Bottom	ype of Cement	# Sacks Used		Type and F	Percent Additives	
Perforate Protect Casi Plug Back T								
Plug Off Zor								
Did you perform a Does the volume Was the hydraulic	of the total base f	fluid of the hydrauli		_	=	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,
Date of first Product Injection:	tion/Injection or R	esumed Production	Producing Meth	nod:	Gas Lift 0	Other (Explain)		
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			DN INTERVAL: Bottom
	Sold Used	I on Lease	Open Hole			mmingled mit ACO-4)	Тор	BOROTT
,	,			B.11 B1				
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer (Amount and Kind	menting Squeeze I of Material Used)	Record
TUBING RECORD:	: Size:	Set	Δ+-	Packer At:				
TODING RECORD:	. 3126.	Set	n.	i donei Al.				

Form	ACO1 - Well Completion
Operator	Bear Petroleum, LLC
Well Name	HENDERSON 5
Doc ID	1806336

All Electric Logs Run

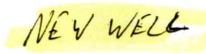
Compensated Density Neutron
Dual Induction
Micro
Sonic Cement Bond

Form	ACO1 - Well Completion
Operator	Bear Petroleum, LLC
Well Name	HENDERSON 5
Doc ID	1806336

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.625	24	322	common	250	4% cc
Production	7.875	5.5	15.5	4452	common	250	100# C14, 100#C12, 100#c37, 1200# salt, 1000# gilsonite, mud flask





ORDER Nº C 61119

C 41/51/05/55				DATE	3-Sep 20 2
is AUTHORIZE	D BY: BE	EAR PETROLEUM	/MARKE AND TOWN		
Address			(NAME OF CUSTOMER		
TO TREAT WEL			City	State	KS
AS FOLLOWS		ENDERSON	Wall No. 5		
Sec. Twp.			Well No 5	Customer Order No.	-
Range			County DRATT		
CONDITIONS As a part of	of the considerat	on hereof it is anneed that Constant And in to	County PRATT	State	KS
mplied, and no represent reatment is payable. The our involcing department is	ations have been re will be no disc in accordance wo ed represents ! BE SIGNED	n relied on, as to what may be the results or effect of the topunt allowed subsequent to such date, 6% interest will be the latest published price schedules trained to be duly authorized to sign this order for the subset of the duly authorized to sign this order for the subset of the duly authorized to sign this order for the subset of the duly authorized to sign this order for the subset of the duly authorized to sign this order for the subset of the duly authorized to sign this order for the subset of the subset	are value of the service of the servicing or treating said well. The consider e charged after 60 days. Total charges are well owner or operator.	on expressed or	
CODE (DUANTITA	Well Owner or (Operator	Ac	gent
	YTITMAUC	DESC	RIPTION	UNIT COST	AMOUNT
20.0002	30	Mileage P.T.		\$6.00	\$180.00
20.0005	11	Pump Charge Surface		\$1,150.00	\$1,150.00
20.1001	250	Common Cement Sack		\$17.50	\$4,375.00
20.1012	15	Calcium Chloride per 50 lb		\$42.00	\$630.00
					4000.00
20.0011	265	Bulk Charge		\$1.25	
20.0012	181.875	Bulk Truck Miles		\$1.10	\$331.25
	Control of the	Process License Fee on	Gallons		\$200.06
	- 19.7		TOTAL P		
I certify that the	above mat	erial has been accepted and used; that	at the above service was no	formed in a second	\$6,866.31 kmanlike
mariner direct b	ne on ection	, supervision and control of the owner	operator or his agent, whos	e signature appears belov	w.
Copeland Repri	esentative	GREG C.	-		
Station GB		5	DICK S		
Remarks				Well Owner Operator or Agent	
		NET	30 DAYS		



TREATMENT REPORT

								Acid Stage	No.	
_					Type Treatment Amt		Type Fluid	Sand Size		Pounds of Sand
_	9/3/2024		f.G	No. <u>C-61119</u>	Bkdown			22.10 9/20		700103 OI 32NO
	BEAR PETRL		<u> </u>							
	ne & No. HENDE	KSUN #5				Bbi./Gal				
Location	PRATT		Fiela		<u> </u>	Bol./Gal.				·
County	FIMILI		State KS		Flush	8bl./Gal.				
		_			Treated from	ft.	to	ft.	No. ft.	0
Casing				Set at322ft	from	<u> </u>	te	—	No. ft.	
Formatio			Perf	to	from	ft	to	ft.	-	 -
Formation	` 		Perf	to	Actual Volume of Oil / Water					Bbl./Gal.
Formation			Perf	to						001.7381.
Liner 5	-itType I	. wt	ft	Bottom at	Pump Trucks. No. Usea:	5td. 3	65 sp		Tain	
				_" 10	Auxiliary Equipment			327	- ' - ' -	
fubing	Size & Wi.		Swung at	n	Personnel GREG ROSS					
	Perforated f	men	ft to	ft	Aumhary Tools			-		_
					Plugging or Sealing Materials	Type		COMMON	3% CC	
Open Hole	- Stree	T.D	ft F	P.B toft				Gals.		lb.
							<u> </u>			
	Napresentative		DiCk :	5.	Treater		GRE	G C.		
TIME		SURES	Total Fluid Pumped							
2.m./p.m.	Tubing	Casing				REMARKS				
8:00	_			ON LOCATION						
			ļ <u> </u>	RUN 322' OF SUF	RFACE PIPE					
			<u> </u>							
			ļ	MIX 250 SKS COM	MMON 3% CC					
				DISPLACE WITH 1	18.5 BBLS H2O					
								·		
				CEMENT CIRCUL	ATED TO SURFACE					
		_								
10:15				JOB COMPLETE				<u> </u>		
				THANK YOU!!!						
						-		 -		
										
]									
								 _		
						<u></u>				
										
										
	<u> </u>						 -			
T										



FIELD ORDER Nº C 50773

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

		310	-324-1223			
			1	DATE	9-Sep	20 24
IS AUTHORIZI	ED BY: Bea	ar Petroleum	OF CUSTOMER)		-	
Address				State	KC	
TO TREAT WE	=11			Otate	110	
AS FOLLOWS		nderson Well No.	5 Custo	mer Order No.		
Sec. Twp.						· · · · · · · · · · · · · · · · · · ·
Range		County	Pratt	State	KS	
mplied and no repres	samage that may acc entations have been	on hereof it is agreed that Copeland Acid is to service or treat at owners in true in connection with said service or treatment. Copeland Acid Service hi relied on las to what may be the results or effect of the servicing or lieatin unit allowed subsequent to such date. 6% interest will be charged after 60	es made no representation expressed	d is not to		
or madicing debautist	Aut to secondance Mil	in latest published price schedules imself to be duly authorized to sign this order for well owner or of		rection by		
THIS ORDER MUS		insento be duly authorized to sign this order for well owner or of	perator			
BEFORE WORK IS	COMMENCED		By			_
CODE	QUANTITY	Well Owner or Operator DESCRIPTION		UNIT	gent	
				COST	A۸	MOUNT
20.0001	80	Mileage P.U		\$4.00		\$320.00
20.0002	80	Mileage P.T.		\$6.00		\$480.00
20.0007	1	Pump Charge Long String		\$1,650.00		\$1,650.00
20.1001	250	Common Cement Sack		\$17.50		\$4,375.00
20.1008	100	C-41P per lb. Defoamer		\$4.00		\$400.00
20.1009	100	C-12 per lb. Fluid Loss		\$6.50		\$650.00
20.101	100	C-37 per lb. Friction Reducer		\$4.25		\$425.00
20.1015	1200	Fine Salt per lb.		\$0.30		\$360.00
20.1016	1000	Gilsonite per lb.	 	\$0.80		\$800.00
20.1018	600	Mud Flush per gal		\$1.00		\$600.00
20.2002	7	5 1/2" Turbo-Centralizer	+	\$85.00		\$595.00
20.2006	2	5 1/2" Basket		\$155.00		\$310.00
20.2009	1	Latch Down Plug & Baffle		\$175.00		\$175.00
20.2012	1	Insert Float Shoe		\$450.00	•	\$450.00
						
20.0014	200			ļ		
20.0011	300	Bulk Charge		\$1.25		\$375.00
20.0012	426	Bulk Truck Miles		\$1.10		\$468.6D
		Process License Fee on	Gallons	ļ		
I certify that	the above ma	enal has been accepted and used; that the above	TOTAL BILLING			12,433.60
manner und	er the direction	n, supervision and control of the owner, operator of	r his agent, whose signate	n a good and w ure appears bel	orkmanlii ow	ке () = ()
	epresentative	Nathan W		(F)		10,4
Station GE	3		Dick S.		·	dis.
Remarks				er. Operator or Ager	મ	
· 1011101110						

NET 30 DAYS



TREATMENT REPORT

Acid 8	& Ceme	nt 🕰						Acid Stage No.		
					Type Treatment: A	mt.	Type Fluid	Sand Size	Pou	nds of Sand
nte <u>9,</u>	/9/2024	District GB	FO:	No. 50773	Bkdown	Bbl./Gal.				
mpany E	Bear Petrole	um			┦	Bbl./Ga				
II Name	& No. Heners	on 5				Bbi./G∌l				
cation _			Field			ВЫ./Gal.				
onty <u>F</u>	Pratt		State KS		Flush	Bbl./Gal				
			·· ··		Treated from		ft. to	ft. /	No. ft	0
sing:	Size <u>5 1/2</u>	" Type & Wt		Set at ft	from		ft to		Vo. ft	0
rmation;			Perf	to	from		ft to		No. ft	0
rmation:			Perf	to	Actual Volume of Oil / W	ater to Load H	ole:			Bbi /Gai
rmation			Perf.							
					: Pump Trucks. No. U	sed: Std.	318 Sp.		Twin	
									_	
			Swung at		Personnel Nathan Gr					
	Perforated		ft. to		. Auxiliary Tools					
					Plugging or Sealing Mate	erials: Type				
oen Hale S	Size	1.D	ft. F	2.8. tofi	1			Gals.		lb.
\longrightarrow			Total Fluid Pumped	ıļ.						
TIME	epresentative PRE	SSURES	Dick :		Treater			an W.		
n./p.m	Tubing	Casing	Total Fluid Pumped							
		5 1/2"		On Location. R	un casing and f	loat eqqi	uipment.	-		•
										
				TD-4455						
				Pipe-4452'						
										-
				Break circulation	n and circulate	for 45 m	inutes.			
			 				<u> </u>			
 			 	Pump 600gal m	nud flush					
+		 								
		 	1	Plug Rat hole w	ith 30sks and n	nouse ho	le with 20cl	(WS		
	· · · · · · · · · · · · · · · · · · ·	 	 		555.13 6779 11					
				Mix 200sks con	mon 56% C37	5% c4	1n 5% c12	10% calt 5	#/ck C	Silsonite
	<u></u>		 	Wash out pum		.570 64	1p .5/0 C12	1070 3011 3	11731	3113011110
-+				wash out puni	9 8114 III.E3.	·				
-		<u> </u>	-	Displace at 5.5l	nm-700# Blu-	landed :	at 1000#			
+		+	+	Uispiace at 3.31	spin-700# riug	ופווטבט פ	21 TOOOH			
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 -∔		 	 	Thank You!	· · · · · · · · · · · · · · · · · · ·			·		
		ļ								
			↓	Nathan W.						
			<u> </u>							

LITHOLOGY STRIP LOG

WellSight Systems

Scale 1:240 (5"=100') Imperial Measured Depth Log

Well Name: Henderson #5

Well Id:

Location: NE SE NW NW 11-26S-14W

License Number: 15-151-22598-0000 Region: Pratt County

Spud Date: 9/2/2024 Drilling Completed: 9/9/202444

Surface Coordinates:

Bottom Hole

Coordinates:

Ground Elevation (ft): 1984 K.B. Elevation (ft): 1996 Logged Interval (ft): 3500 To: 4455 Total Depth (ft): 4455

Formation:

Type of Drilling Fluid: Chemical mud

Printed by WellSight LogViewer from WellSight Systems 1-800-447-1534 www.WellSight.com

OPERATOR

Company: Bear Petroleum Address: PO BOX 438

Haysville kansas 67060

GEOLOGIST

Name: Rod Andersen

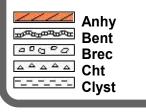
Company: Rod Andersen Consulting Address: 100 S. Main Suite 510

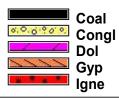
Wichita, Kansas 67202

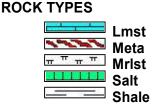
Cores

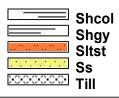
DSTs

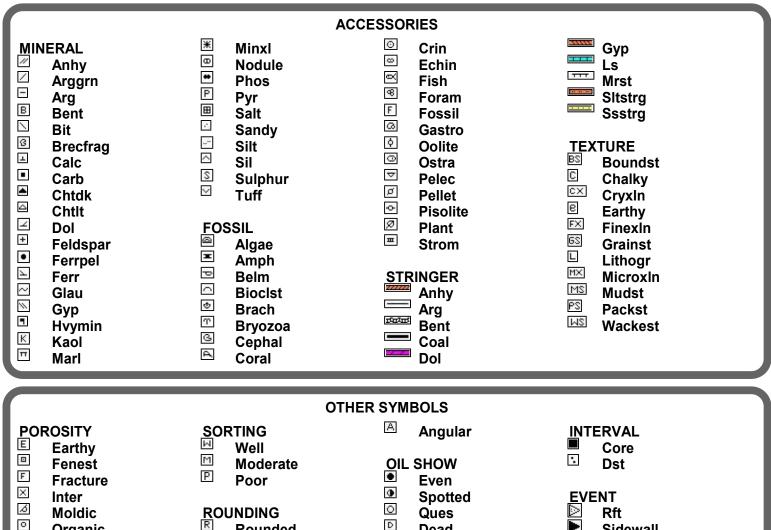
Comments

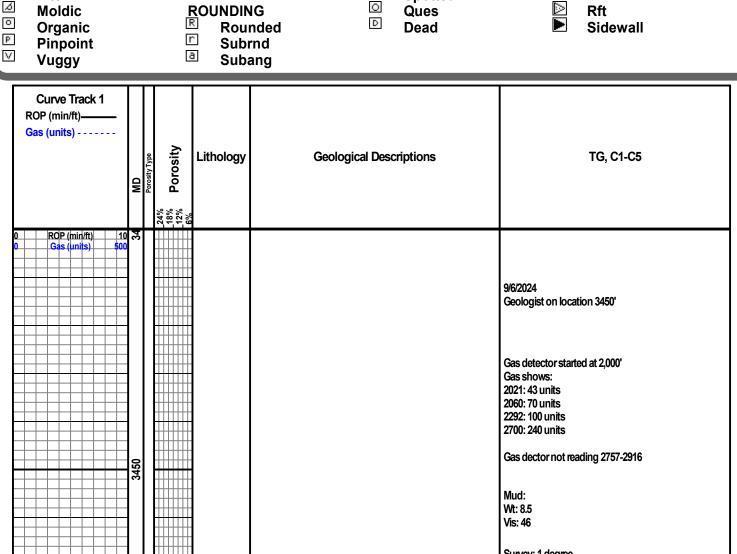


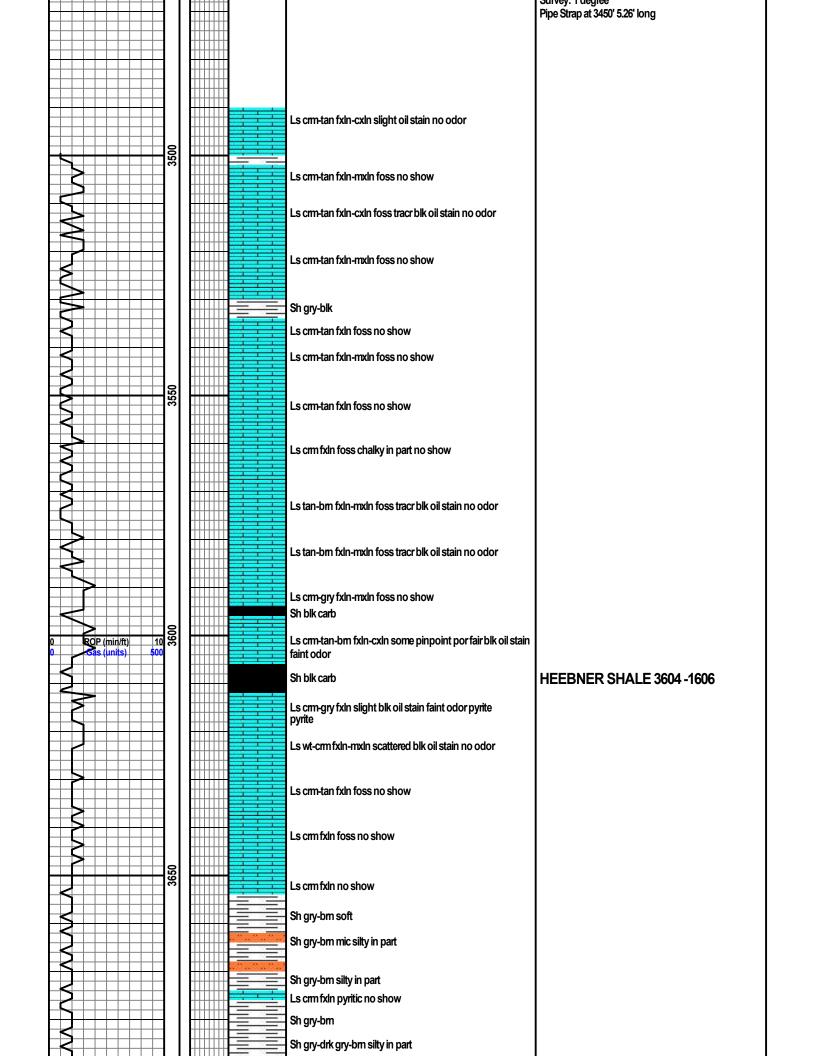


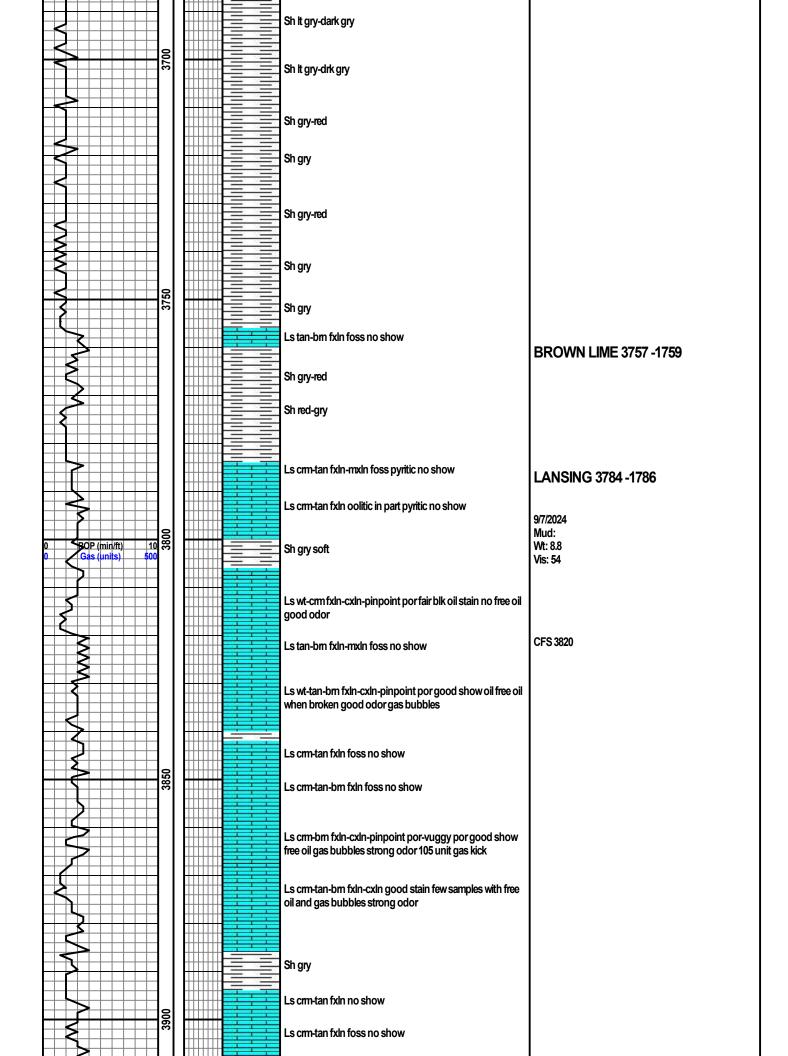


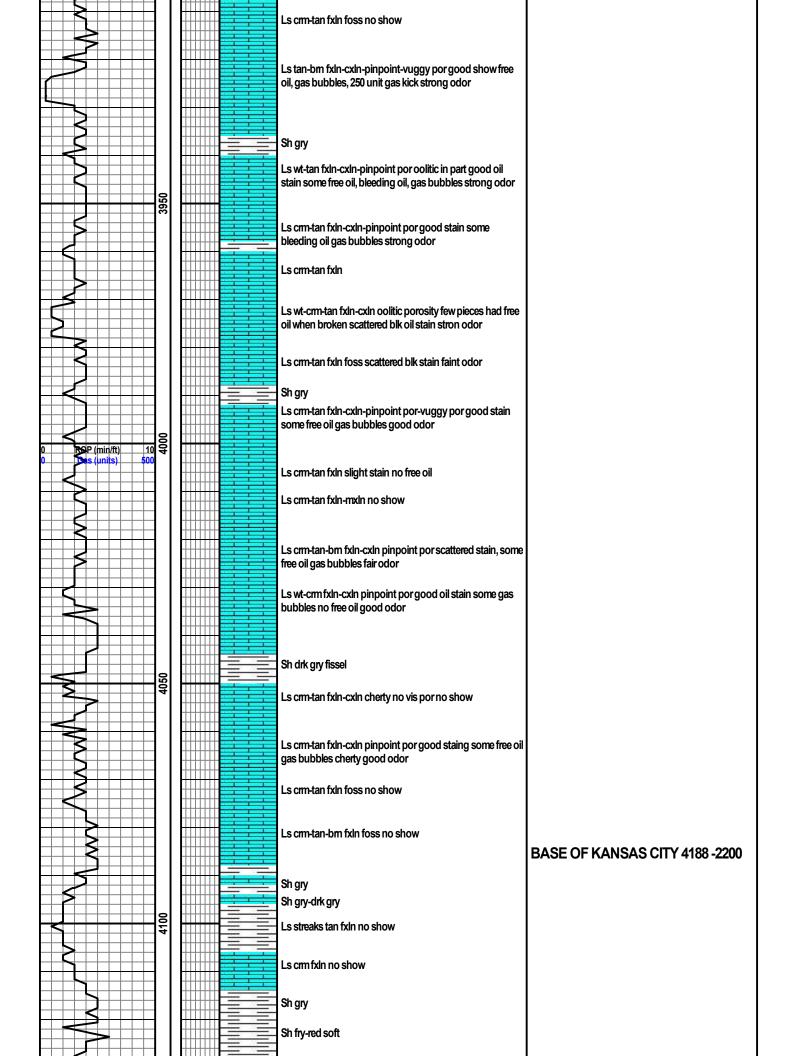


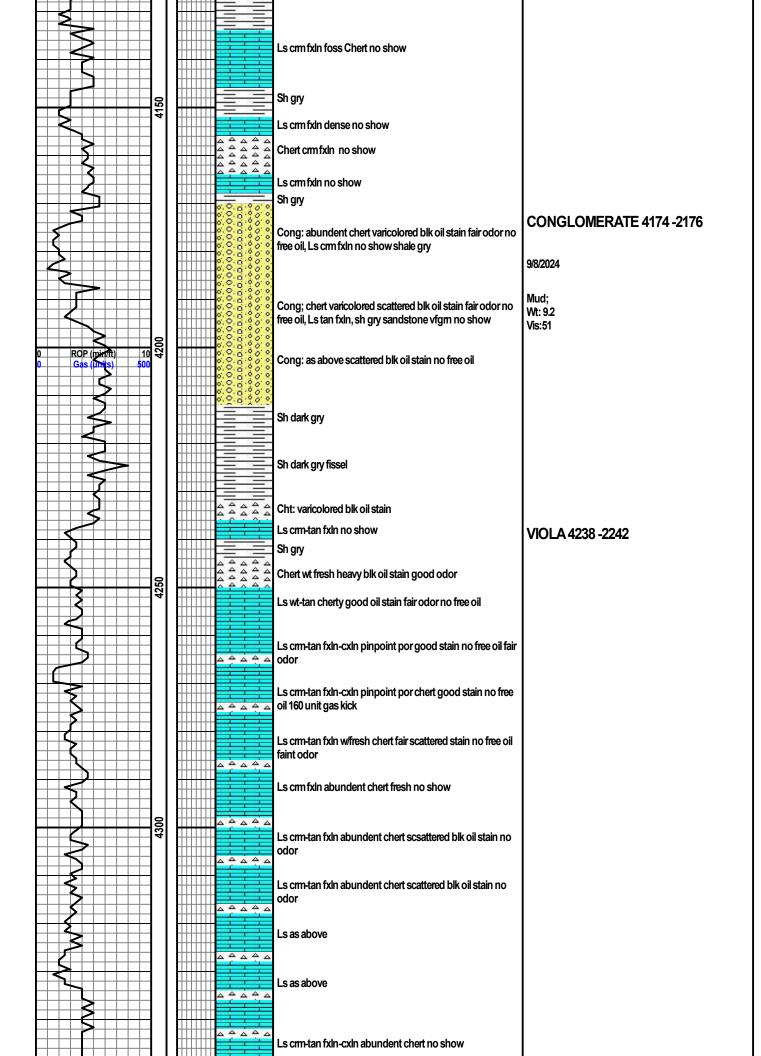


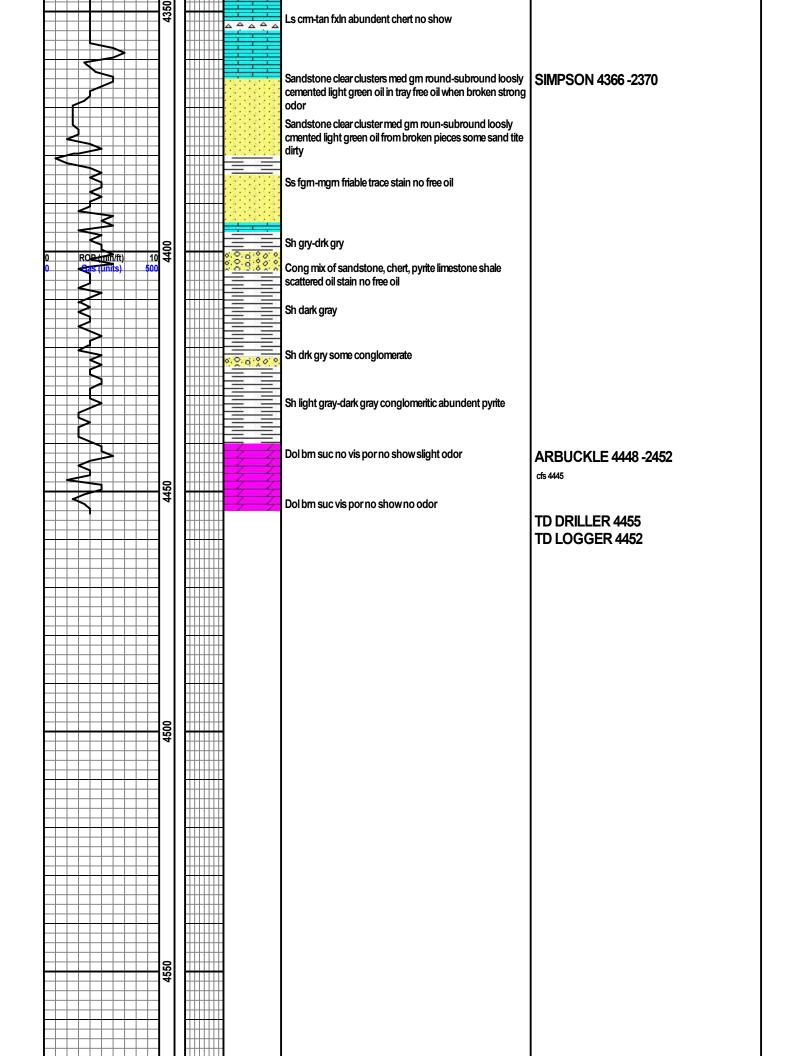


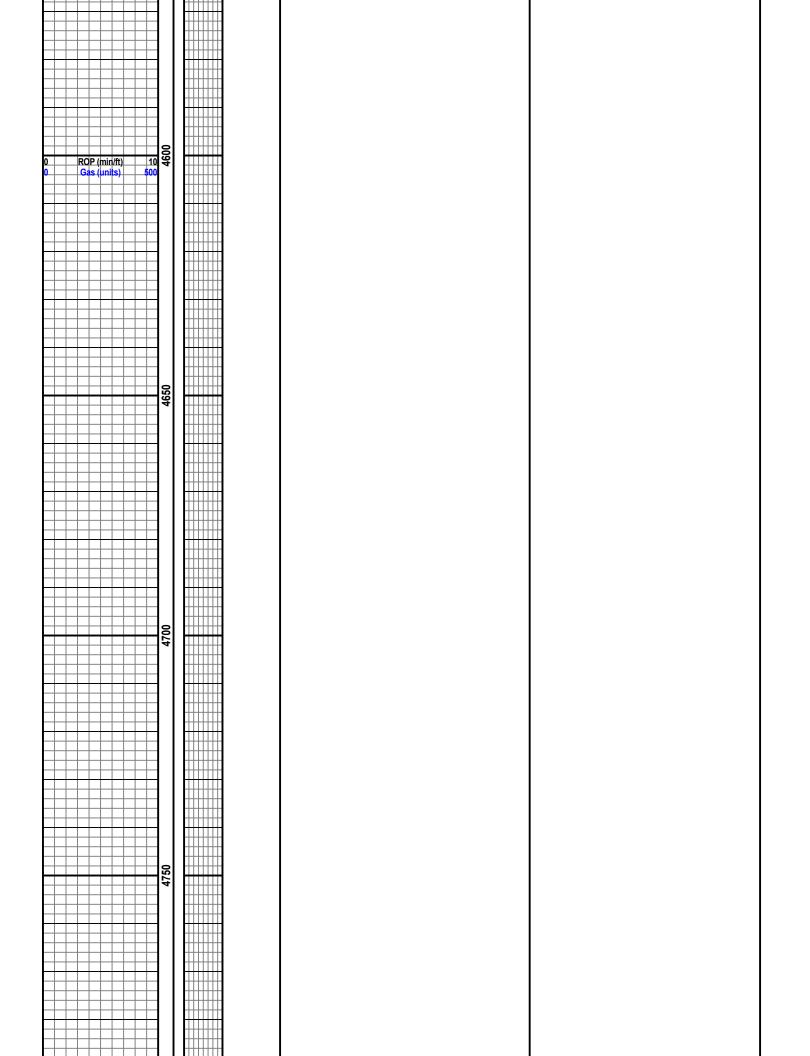












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