KOLAR Document ID: 1992337

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

KANSAS CORPORATION COMMISSION
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 #: 4419
Name: Bear Petroleum, LLC
Address 1: PO BOX 438
Address 2:
City: HAYSVILLE State: KS Zip: 67060 + 0438
Contact Person: Phil Pierpoint
Phone: (316) 524-1225

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)*
LKC Depth to Top: 2927 Bottom: 2930 T.D. 3527
Depth to Top: Bottom: T.D.
Depth to Top: Bottom: T.D.

API No. 15 - 15-173-20598-00-00
Spot Description:
- NE SW SE Sec. 32 Twp. 29 S. R. 1 ☑ East ☐ West
990 Feet from ☐ North / ☑ South Line of Section
1650 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
County: Sedgwick
Lease Name: RINKER B Well #: 1
Date Well Completed:
The plugging proposal was approved on: *(Date)*
by: *(KCC **District** Agent's Name)*
Plugging Commenced: 08/18/2026
Plugging Completed: 08/19/2026

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
		Surface	8.625	220	0
		Production	4.5	3524	0

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.

Tie onto tubing at 1000' and pumped 50 sax common cement. Pulled tubing. Tag cement at 550'. Set CIBP @ 520'. Perforate 300-301', 4 SPF. Run tubing to 520' and circulate 55 sax common cement to surface. Topped off with 25 sax common cement. Job complete.
Total cement - 130 sax

Plugging Contractor License #: 3004 Name: Gressel Oilfield Service, LLC
Address 1: PO BOX 438 Address 2:
City: HAYSVILLE State: KS Zip: 67060 + 0438
Phone: (316) 524-1225
Name of Party Responsible for Plugging Fees: Bear Petroleum LLC
State of Kansas County, Sedgwick , ss.
Phil Pierpoint *(Print Name)* ☑ Employee of Operator or ☐ Operator on above-described well,

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

COPELAND
Acid & Cement

FIELD ORDER № C 48841

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

DATE 8/18 20 26

IS AUTHORIZED BY: Bear Petro. (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Rinker B Well No. #1 Customer Order No. _____

Sec. Twp. Range 32-29s-1E County Sedgwick County 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 _____ (Well Owner or Operator) By _____ (Agent)

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	1	Pump charge for plug Job	700.00	700.00
	105	Sacks Common Cement	18.00	1890.00
	10	mileage fuel charge pump truck	6.00	60.00
	105 sx	Bulk Charge @ 1.25	$150.00 min charge	150.00
	5 miles	Bulk Truck Miles @ 1.10	$150.00 min charge	150.00
		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 Derrick

Station Burton, ks

_____ (Well Owner, Operator or Agent)

Remarks Plug Job w/ 105sx Common Cement

NET 30 DAYS

COPELAND
Acid & Cement

TREATMENT REPORT

Acid Stage No. .....

Date 8/18/2016 District ..... P. O. No. .....
Company Bear Petro
Well Name & No. Rinker B #1
Location ..... Field .....
County Sedgwick County State KS

Casing: Size 4 1/2" 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. 2 7/8" 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
Breakdown	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: 1/4 Bbl. Gal.
Pump Trucks. No. Used: Std. #323 Hp. Twin
Auxiliary Equipment Bulk Cement #322
Packer: ..... Set at .....ft.
Auxiliary Tools .....
Plugging or Sealing Materials: Type 105 sx Common Cement
Gals. .....lb.

Company Representative _____ Treater Derek

TIME a.m./p.m.	PRESSURES Tubing	PRESSURES Casing	Total Fluid Pumped	REMARKS
8:57				Arr. JSA. Rig up + tie onto tubing @ 1000'
9:15	0		1/4 Bbl	Break Circulation, 1/4 Bbl to break
9:18	0		17 Bbl	Start 50 sx plug common Cement slurry, 2 BPM @ 0 # w/ 4 Bbl water behind, ISIP-0, pull tubing, tag Cement at wireline @ 550', Set CIBP, perforate, run tubing to 520', tie onto surface pipe
2:00		250 #	—	Try to pump down backside, pressured up to 250 # instantly, tie onto tubing
2:07	0		1/4 Bbl	Break Circulation, 1/4 Bbl to break
2:09	0		14 1/4 Bbl	Start common cement slurry until good Cement @ surface 2 BPM @ 0 # ISIP-0, pull tubing, standing full
2:57				Wash up, tear down, L.L.

COPELAND
Acid & Cement

FIELD ORDER № C 48842

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

DATE 8/19 20 26

IS AUTHORIZED BY: Bear Petro. (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Kinker B Well No. #1 Customer Order No. _____

Sec. Twp. Range 32-29s-16 County Sedgwick County 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 _____ (Well Owner or Operator) By _____ (Agent)

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	25	Sacks Common Cement	18.00	450.00
		Bulk Charge		
		Bulk Truck Miles		
		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 Derick

Station Barton, Ks

_____ (Well Owner, Operator or Agent)

Remarks Dry hill w/ 25sx Common Cement

NET 30 DAYS