Notice: Fill out COMPLETELY RECEIVED KANSAS CORPORATION COMMISSION and return to Conservation Division at the address below within 30 days from plugging date.

K.A.R. 82-3-117

Form CP-4 September 2003 Type or Print on this Form Form must be Signed All blanks must be Filled

KCC Morns					173-01692-00.00			
Lease Operator: Bear Petroleum, Inc.					API I	Number: <u>15 -</u> 1-	<del>26-19</del> 57	
Address: P.O. Box 438, Haysville, KS 67060					Lease Name: Callaway			
Phone: (316) 524 - 1225 Operator License #: 4419					Well Number: 1			
	·			1	Spot	Location (QQQQ):		
(Oil, Gas D&A, SWD, ENHR, W	later Supply Well, Cathodic	., Other)	et #:(If SWD	or ENHR)				
The plugging proposal was	approved on: 8-1-03			(Date)	Feet from North / South Section Line  2310 Feet from East / West Section Line  Sec. 24 Twp. 29 S. R. 1 East West  County: Sedgwick  Date Well Completed: N/A  Plugging Commenced: 8-21-03			
<sub>by:</sub> Butch			(KCC <b>District</b> A	gent's Name)				
Is ACO-1 filed? Yes	No If not, is we	li log attached	l? Yes [	No .				
Producing Formation(s): List	All (If needed attach anot	her sheet)						
Mississippi	Depth to Top: 333	Bottom:	3351 <sub>T.I</sub>	D. <u>3351</u>				
	Depth to Top:	Bottom:	: T.0	D				
	Depth to Top:	Bottom:	: T.C	D	Plug	ging Completed: 8		
Show depth and thickness o	f all water, oil and gas	formations.						
Oil, Gas or Wa	ter Records		Cé	asing Record (Su	ırface (	Conductor & Production	on)	
Formation	Content	From	То	Size		Put In	Pulled Out	
	Surface	Surf	286	8 5/8		286	0	
	Production	Surf	3359	5 1/2	-	3359	510	
					$\exists$			
hole. If cement or other plu-	gs were used, state the 80', dumped 6 sax	character of s	same depth pla	ced, from		feet to	nethods used in introducing it into the feet each set. 325', circulate 100 sax	
Name of Plugging Contracto						License #: 6957		
Address: P.O. Box 282,	Burden, KS 6701	7						
Name of Party Responsible	for Plugging Fees: Be	ar Petroleu	m, Inc.					
State of Kansas	County, _S	Sedgwick		_ , ss.				
R. A. Schremmer				_ (Employee of (	Operat	tor) or (Operator) on	above-described well, being first du	
sworn on oath, says: That I	have knowledge of the	acts statemen	ts, and matters	s herein contain	ed, an	d the log of the abo	ove-described well is as filed, and the	
same are true and correct, s	o help me God.		10/10	12/	/_			
SHANNON HO Notary Public - Sta My Appt. Expires 3(10)	CAATUAL	Signature) / Address) P.C	D. Box 438,	Haysville, K	(S 6	7060		
My Appt. Expires The	SUBSCRIBED and SI	WORN TO bef	ore me this _3	31st day of C	Octol	ber	, 20 03	
	Starrar	buran	<u>d</u>	My (	Commi	ission Expires: 31	10/04	
		Notary Publ	IIC .					



## B.P.C. WELL PLUGGING

RECEIVED

SEP 1 0 2003

OV 0 4 2003

P.O. BOX 282 BURDEN, KS 67019

CC WICHITA

JAMES R. BRADEN							
HOME # 620-438-2856	MOBILE # 620-222-1252						

DATE	INVOICE #
9/8/2003	03/348

BILL TO	
BEAR PETROLEUM INC P.O. BOX 438 HAYSVILLE, KS 67060	

JOB LOCATION	
CALLOWAY #1	

TERMS 30 DAYS	
Charge of 1.8% on due accounts	

DATE	ITEM	DESCRIPTION	AMOUNT
8/21/2003 8/22/2003		MOVED IN, RIGGED UP TO PLUG BOTTOM. SANDED BACK TO 3280', DUMPED 6SX. CEMENT ON TOP OF SAND. DUG OUT CELLAR. SET UP JACKS. COULDN'T GET SLIPS OFF. SHOT OFF 510'. LAYED OUT 5 1/2" PIPE. LOADED UP JACKS. BUSTED OUT BRADEN HEAD. RIGGED DOWN.	
	RIG UP CHARGE PIPE PULLING CHARGE SHOOTING CHARGE	1000' MINIMUM @ \$0.50 PER FT. 1 SHOT @ \$200.00 PER SHOT	1,000.00T 500.00T 200.00T

Thank you for your business.	SUBTOTAL	\$1,700.00
	<b>SALES TAX (5.3%)</b>	\$90.10
	BALANCE DUE	\$1,790.10



Remarks

KEN'S #41801

## RECEIVED

NOV 0 4 2003

FIELD

Nº 24078

KCC WICHITA BOX 438 • HAYSVILLE, KANSAS 67060

316-524-1225 IS AUTHORIZED BY: Address To Treat Well Customer Order No. As Follows: Lease Sec. Twp. County Range CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is 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 Agent Well Owner or Operator UNIT **AMOUNT** DESCRIPTION COST CODE QUANTITY **Bulk Charge Bulk Truck Miles** Gallons Process License Fee on\_ **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\_ Station\_ Well Owner, Operator or Agent

**NET 30 DAYS** 



## RECEIVED NOV 0 4 2003 Acid & Cement KCC WICHITMEATMENT REPORT

Acid Stage No.

40.7	4×47	Burn	Am -		reatment: Am		Type Fluid			ounds of Sand
Date P	DI C.	strict								
Company	ear Pal	#1				•				
						<u>-</u>				
			Field	Flush		•				
County	gewik		State			•				
Cusing: Size S Type & Wt. Set atft.					from	ft. (	to	ft. 1	No. ft	••••••
				to	from	ft. 1	to	ft. 1	No. ft	
				to	l Volume of Oil /	Water to Load	Hale:			Bbi./Gal.
Liner: Size	Type & W	t	Top atf	Bottom atft. Pump			Sp.			
							·····			
				1			······			
Per	forated from		11. 10	ft. Auxilia	ne or Meeling M	terials: Type	60/40 62	,	•••••••	••••••
		<u></u>	<b>a.</b>							
then Hole Siz	e	. T.D		3. to		А		CiRIA.		
Company I	Representativ			Trea	ater Du	Lund	10			
TIME		SURES	Total Fluid Pumped			REMARK	8			
a.m /p.m.	Tubing	Casing	Famper							
:				Draw to toc			······			
:				from pely to 3	25					
:				Runged Cement						
:				Core to surfa	re					
:				Ruled Poly						
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