

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
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

Lease Operator: Bear Petroleum, Inc.
Address: PO Box 438, Haysville, KS 67060
Phone: (316) 524-1225 Operator License #: 4419
Type of Well: Oil Docket #: _____
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)
The plugging proposal was approved on: _____ (Date)
by: _____ (KCC District Agent's Name)
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 Number: 15-159-00353-00-00
Lease Name: Hughes
Well Number: 2
Spot Location (QQQQ): _____ - NE - SW
1980 Feet from North / South Section Line
3300 Feet from East / West Section Line
Sec. 6 Twp. 21 S. R. 6 East West
County: Rice
Date Well Completed: _____
Plugging Commenced: 11-19-04
Plugging Completed: 11-23-04

*KCC
BEM
12-29-04
RBMS*

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface Conductor & Production)				
Formation	Content	From	To	Size	Put In	Pulled Out
				8"	247'	
				5"	3471'	2403'

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.

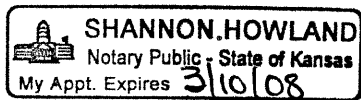
Sand at 3391', bailed 5 sacks Portland, ripped 2509', and 2403', worked free, pulled to 1050', pumped 35 sacks, pulled to 600', pumped 35 sacks, pulled to 300', cement circulated to surface.

**RECEIVED
DEC 28 2004
KCC WICHITA**

Name of Plugging Contractor: Quality Well Service, Inc. License #: 31925
Address: 401 West Main, Lyons, KS 67554

Name of Party Responsible for Plugging Fees: Bear Petroleum, Inc.
State of Kansas County, Sedgwick, ss.

R.A. Schremmer (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.



(Signature) [Signature]
(Address) P.O. Box 438, Haysville, KS 67060

SUBSCRIBED and SWORN TO before me this 27th day of December, 2004
Shannon Howland My Commission Expires: 3/10/08
Notary Public

Bu



FIELD ORDER N^o 24285

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

DATE 11-20 2004

IS AUTHORIZED BY: Dean Petroleum
(NAME OF CUSTOMER)

Address _____ City _____ State _____

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

Sec. Twp. Range _____ County Rice State _____

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
1031	1	Pump truck for PTA		400-
1130	40	mileage	2.50	100-
1100	150	salt 64/40 pud	6.25	937.50
4000	150	Bulk Charge		150-
4001	40	Bulk Truck Miles 6.5	.85	221-
		Process License Fee on _____ Gallons		
TOTAL BILLING				

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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 Dean

Station _____

Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

KEN'S #41801

TREATMENT REPORT

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Acid Stage No.

Date 11-23-04 District Durston F. O. No.
 Company Beaver
 Well Name & No. Hughes #2
 Location Field
 County Rice State KS

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.

Casing: Size 5 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. Swung at ft.
 Perforated from ft. to ft.
 Open Hole Size T. I. ft. P. I. to ft.

Actual Volume of Oil/Water to Load Hole: Bbl. /Gal.
 Pump Trucks. No. Used: Std. 320 Sp. Twin
 Auxiliary Equipment
 Packer: Set at ft.
 Auxiliary Tools
 Plugging or Sealing Materials: Type 150 sks 60/40 4% lb.

Company Representative Treater Dean L.

TIME a.m /p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
:				Arrive loc.
:				1st pump 1st plug at 1050' w/ 35 sks 60/40 4%
:				
:				2nd plug at 600' w/ 35 sks 60/40 4%
:				
:				3rd 3rd plug 300' to surface w/ 80 sk 60/40 4%
:				
:				cement at surface
:				wash up track
:				Rig down
:				Job complete
:				
:				150 sks 60/40 4%
:				40 miles
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