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					API Number: 15 - 195-2046400 PP		
					Lease Name: Harvey		
					1 Well Number:		
Type of Well:					Spot Location (QQ	QQ): C SW NE	
Type of Well: Oll Docket #:					3300 Feet from North / South Section Line		
The plugging proposa	l was approved on:			(Date)	1000		
by: Deines (KCC District Agent's Name)					Feet from Feat / West Section Line Sec. 16 Twp. 13 S. R. 22 East West		
		vell log attacl		es No	Sec Twp County:		
	s): List All (If needed attach and	_	· ·		County:		
-	Depth to Top:	,	om:	TD	Date Well Complete		
	Bottom: T.D			Plugging Commenced: 12-29-05			
	Depth to Top:			1	Plugging Complete	1-03-06	
				1.0.			
	ness of all water, oil and gas	formations.		· · · · · · · · · · · · · · · · · · ·			
Oil, Gas Formation	or Water Records Content	- Caomy rice			(Surface Conductor & Production)		
	Contone	110111	10		Put In	Pulled Out	
				8 5/8	270		
				4 1/2	4241	2000	
	er plugs were used, state the					· -	
	ntractor: Quality Well Service	, Inc.			License #: 319	P25 RECEIVED	
						JAN 1 3 2006	
Name of Party Respon	sible for Plugging Fees: Be	ar Petrole	um, Inc.			I Walker than the same	
State of Kansa	County,	Sedgw	ick	, SS.		KCC WICHITA	
R A. STA	emmer, Pres	id off					
		facts statem	ents. and ma	(Employee of (atters herein contains	Operator) or (Operato	r) on above-described well, being first duly a above-described well is as filed, and the	
same are true and corr			22	- 11		e above-described well is as liled, and the	
	((Signature)	IA.				
	,	(Address) F	20.80	438 Have	wille, KS 6	57060	
SHANNON HOWL	AND	. ,				40.1	
Notary Public - State of K Expires 3 10 08	SUBSCRIBED and S		^			<u>, 2006</u>	
	Sharro	Notary Pu	Rand	My C	Commission Expires:	2010108	



Station

Remarks

FIELD ORDER № **C** 030089

BOX 438 • HAYSVILLE, KANSAS 67060 316-524-1225 IS AUTHORIZED BY: City State **Address** To Treat Well Customer Order No. Well No. As Follows: Lease Sec. Twp. County Range 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. Agent Well Owner or Operator UNIT **AMOUNT** CODE QUANTITY **DESCRIPTION** COST RECEIVED **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

NET 30 DAYS

Well Owner, Operator or Agent