

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 Peroleum inc.
Address: 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: 3-1-06 (Date)
by: Herb Dienes (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)
Marmaton Depth to Top: 3810 Bottom: 3840 T.D. 3850

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

API Number: 15-195-2137700-00
Lease Name: Flax B
Well Number: 2
Spot Location (QQQQ): nw - se - sw - _____
990 Feet from North / South Section Line
3630 Feet from East / West Section Line
Sec. 3 Twp. 11 S. R. 22 East West
County: Trego
Date Well Completed: 11-17-83
Plugging Commenced: 3-2-06
Plugging Completed: 3-2-06

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
surf.		surf	302	8 5/8	302	0
production		surf	3942	5 1/2	3942	0
liner		surf	3808	2 3/8	3808	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.

Pumped 140 sax down 2 3/8 liner and shut in tied on to braden head and pumped 35 sax and shut in all 60/40 poz 2 % gel

Name of Plugging Contractor: Alliance Well Service, Inc. License #: 33346

Address: 271 Lake Rd. Pratt Ks. 67124

Name of Party Responsible for Plugging Fees: Bear PetrOleum Inc.

State of Ks. County, Trego, 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) Box 438 Haysville Ks, 67060

SUBSCRIBED and SWORN TO before me this 10 day of March, 20 06

SHANNON HOWLAND
Notary Public - State of Kansas
My Appt. Expires 3/10/08

Shannon Howland My Commission Expires: 3/10/08
Notary Public

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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PKT



FIELD ORDER N° C 030289

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

DATE 3-02 2006

IS AUTHORIZED BY: BEAR Petroleum
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease FLAX Well No. B-2 Customer Order No. _____

Sec. Twp. Range _____ County Trego State KJ

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

By _____ Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
<u>4111</u>	<u>96</u>	<u>MILEAGE</u>	<u>3⁰⁰</u>	<u>288⁰⁰</u>
<u>4100</u>	<u>1</u>	<u>Pump Charge</u>		<u>500⁰⁰</u>
<u>4000</u>	<u>175</u>	<u>60/40 P02 2% Gel</u>	<u>7⁰⁰</u>	<u>1225⁰⁰</u>
<u>4200</u>	<u>175</u>	<u>Bulk Charge</u>	<u>1²⁵</u>	<u>218⁷⁵</u>
<u>4201</u>		<u>Bulk Truck Miles 7.7Tx 96m = 739.20 TM</u>	<u>1¹⁰</u>	<u>813¹²</u>
		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 CB

Dick
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS



TREATMENT REPORT

Acid Stage No.

Date 3-02-06 District GB F. O. No. C 030289
 Company BEAR PETROLEUM
 Well Name & No. FLAX B-2
 Location..... Field.....
 County TREGO State KS
 Casing: Size 2 3/8 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. 1" 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
 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.....
 Actual Volume of Oil/Water to Load Hole:..... Bbl./Gal.
 Pump Trucks. No. Used: Std..... Sp..... Twin.....
 Auxiliary Equipment.....
 Packer:..... Set at..... ft.
 Auxiliary Tools.....
 Plugging or Sealing Materials: Type.....
 (Gals. lb.)

Company Representative DICK Treater DEAN

TIME a.m / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
09:00				ON LOCATION
:				
:				140 SKS down 2 3/8 TUBING
:				Filled up
:				BRADEN HEAD down 35 SKS
:				JOB complete
:				Thank You
:				DEAN
:				1" TUBING LOST
:				KCC WICHITA
:			31.12	7 JTS
:			31.15	
:			31.16	
:			31.05	
:			31.25	
:			31.32	
:			31.05	
:			218.60	

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