

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: P.O. 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: Duane Krueger (Date)  
by: 9-28-07 (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)  
Bartlesville Depth to Top: 2770 Bottom: 2810 T.D. 2900  
\_\_\_\_\_  
Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
\_\_\_\_\_  
Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

API Number: 15 - 035-20841 - 00 - 00  
Lease Name: Rising  
Well Number: #5  
Spot Location (QQQQ): C - NW - SW - \_\_\_\_\_  
1980 Feet from  North /  South Section Line  
4620 Feet from  East /  West Section Line  
Sec. 8 Twp. 31 S. R. 6  East  West  
County: Cowley  
Date Well Completed: 7-20-1975  
Plugging Commenced: 10-3-07  
Plugging Completed: 12-3-07

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
	Surface	Surface	200	8 5/8"	200	0
	Production	Surface	2980	4 1/2"	2980	1007

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.

Dumped sand to 2700' and dump bailed 4 sacks cement. Cut and pulled casing. Ran pipe to 360' and circulated 120 sacks cement to surface. Stayed full. Plugging complete.  
Total cement - 124 sacks 60/40 poz 4%

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Name of Plugging Contractor: Mike's Testing & Salvage, Inc. License #: 31529  
Address: P.O. Box 467, Chase, KS 67524

CONSERVATION DIVISION  
WICHITA, KS

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

R. A. Schremmer, President (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) \_\_\_\_\_  
(Address) P.O. Box 438, Haysville, KS 67060

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

SUBSCRIBED and SWORN TO before me this 20th day of December, 20 07  
Shannon Howland My Commission Expires: 3/10/08  
Notary Public

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

*PH*



FIELD ORDER N° C 32271

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

DATE 12-03 2007

IS AUTHORIZED BY: Bear Petroleum  
(NAME OF CUSTOMER)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

To Treat Well As Follows: Lease Rising Well No. 5 Customer Order No. \_\_\_\_\_

Sec. Twp. Range \_\_\_\_\_ County Cowley 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 \_\_\_\_\_ By \_\_\_\_\_  
Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
<u>MILE</u>	<u>50</u>	<u>MILEAGE</u>	<u>1.00</u>	<u>50.00</u>
<u>2/101</u>	<u>50</u>	<u>MILEAGE</u>	<u>3.00</u>	<u>150.00</u>
<u>2/100</u>	<u>1</u>	<u>PUMP CHARGE</u>		<u>500.00</u>
<u>2/900</u>	<u>120</u>	<u>60/40 2% gel Allowed</u>	<u>8.50</u>	<u>1020.00</u>
<u>2/050</u>	<u>2</u>	<u>2% ADDITIONAL GEL</u>	<u>12.50</u>	<u>25.00</u>
<u>2/200</u>		<u>Bulk Charge</u>	<u>MIN</u>	<u>150.00</u>
<u>2/01</u>		<u>Bulk Truck Miles</u>	<u>MIN</u>	<u>150.00</u>
		Process License Fee on _____ Gallons		
<b>TOTAL BILLING</b>				

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CONSERVATION DIVISION  
WICHITA, KS

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 A. G. Curtis

Station GB

Dick  
Well Owner, Operator or Agent

Remarks \_\_\_\_\_

**NET 30 DAYS**



**TREATMENT REPORT**

Acid Stage No. ....

Date 12-03-07 District CB F. O. No. C 32271  
 Company BEAK PER  
 Well Name & No. RISING 5  
 Location \_\_\_\_\_ Field \_\_\_\_\_  
 County Cowley State KS

Casing: Size \_\_\_\_\_ 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.D. \_\_\_\_\_ ft. P.B. to \_\_\_\_\_ ft.

Type Treatment: Amt. \_\_\_\_\_ Type Fluid \_\_\_\_\_ Sand Size \_\_\_\_\_ Pounds of Sand \_\_\_\_\_

Bkdown: \_\_\_\_\_ 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. 320 Sp. \_\_\_\_\_ Twin \_\_\_\_\_  
 Auxiliary Equipment \_\_\_\_\_  
 Packer: \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Auxiliary Tools \_\_\_\_\_  
 Plugging or Sealing Materials: Type \_\_\_\_\_ Gals. \_\_\_\_\_ lb.

Company Representative Dick Treater A.G. Curtis

TIME a.m. /p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
13:45				ON LOC
:				Poly Pipe @ 360'
:				MIX Cement 60/40 4%
:				CIRCULATED TO SURFACE
:				w/ 120 SLS
:				Stayed Full
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WICHITA, KS

JOB Complete  
 Thank You  
 A.G. Curtis