

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED

JUN 20 2005

Form ACO-1
September 1999
Form Must Be Typed

KCC WICHITA

ORIGINAL

Operator: License # 4419
Name: Bear Petroleum, Inc.
Address: P.O. Box 438
City/State/Zip: Haysville, KS 67060
Purchaser: Coffeyville Resources
Operator Contact Person: Dick Schremmer
Phone: (316) 524-1225
Contractor: Name: Gulick Drilling co., Inc.
License: 32854
Wellsite Geologist: Bill Shepherd

Designate Type of Completion:

New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

4-15-05	4-21-05	5-24-05
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 173-20982--00-00
County: Sedgwick
C E/2 NE SE Sec. 14 Twp. 29 S. R. 1 East West
1980 feet from (S) N (circle one) Line of Section
330 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW

Lease Name: Charles Well #: 2-14
Field Name: Van Dette North

Producing Formation: Mississippi

Elevation: Ground: 1240 Kelly Bushing: 1248

Total Depth: 3500 Plug Back Total Depth: 3500

Amount of Surface Pipe Set and Cemented at 296 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Alt 1 NCR 8-8-08
(Data must be collected from the Reserve Pit)

Chloride content 10,000 ppm Fluid volume 1000 bbls

Dewatering method used trucked

Location of fluid disposal if hauled offsite:

Operator Name: Bear Petroleum, Inc.

Lease Name: Glaser License No.: 4419

Quarter SW Sec. 13 Twp. 29 S. R. 1st East West

County: Sedgwick Docket No.: D-24712

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: _____
Title: President Date: 6-17-05

Subscribed and sworn to before me this 17 day of June

20 05

Notary Public: Shannon Howland
Date Commission Expires: 3/10/08
SHANNON HOWLAND
Notary Public - State of Kansas
My Appt. Expires 3/10/08

KCC Office Use ONLY

NO Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED ORIGINAL

Operator Name: Bear Petroleum, Inc. Lease Name: Charles Well #: 2-14
 Sec. 14 Twp. 29 S. R. 1 East West County: Sedgwick

JUN 20 2005

KCC WICHITA

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Iatan	2283	-1035
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Kansas City	2601	-1353
List All E. Logs Run:		Cherokee	3066	-1818
		Mississippi Ch.	3122	-1874
		Miss. Dolo.	3146	-1898
		Kinderhook	3426	-2178
		Simpson Sand	3494	-2246
		RTD	3500	-2252

Gamma Ray Neutron CCL, Sonic Bond

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./ Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
		13 3/8"	42	8	common	125	100# cc
		8 5/8"	248'	296	common	200	100# cc
		4 1/2"	10.5	3494	common	150	none

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
Drilled Shoe	3494-3500' 6' OH	175 gal. acid & 500 gal. acid	
		5000# 20-40 Frac - no oil	
	Set CIBP @ 3225'		
2	3146-80'	500 gal. acid - 5000# 20-40 Frac	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8"	3142	NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.	Producing Method			
5-27-05	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
	25	5	25	

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____



Acid & Cement



POST OFFICE BOX 438
HAYSVILLE, KS 67060
(316) 524-1225
(316) 524-1027 FAX

INVOICE

ORIGINAL

BURRTON, KS
(620) 463-5161
FAX (620) 463-2104

GREAT BEND, KS
(620) 793-3366
FAX (620) 793-3536

RECEIVED

INVOICE NUMBER

JUN 20 2005

KCC WICHITA 0025313-IN

BEAR PETROLEUM, INC.
BOX 438
HAYSVILLE

KS 67060

LEASE: CHARLES 2-14

*zemat long string conductor
+ surf*

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
04/26/05	25313		04/26/05			
QUANTITY	U/M	ITEM NO/DESCRIPTION		D/C	PRICE	EXTENSION
1.00	EA	PUMP TRUCK - CONDUCTOR 13 3/4		.00%	500.00	500.00
50.00	MI	PUMP TRUCK MILEAGE		.00%	2.50	125.00
125.00	SAX	COMMON CEMENT		.00%	7.25	906.25
2.00	GAL	CALCIUM CHLORIDE		.00%	25.00	50.00
1.00	EA	PUMP TRUCK - SURFACE 8 5/8		.00%	500.00	500.00
0.00	MI	MILEAGE - NO CHARGE		.00%	.00	.00
200.00	SAX	COMMON CEMENT		.00%	7.25	1,450.00
325.00	EA	BULK CHARGE		.00%	1.00	325.00
788.00	MI	BULK TRUCK - TON MILES		.00%	.85	669.80
1.00	EA	10% FUEL SURCHARGE		.00%	179.48	179.48

There will be a charge of 1.5% (18% annual rate) on all past due accounts.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service, Inc.

Gressel Oil Field Service, Inc. reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

REMIT TO: P.O. BOX 438
Haysville, KS 67060

COP-BUR

NET INVOICE:	4,705.53
SALES TAX:	.00
INVOICE TOTAL:	4,705.53

RECEIVED BY

NET 30 DAYS



FIELD RECEIVED
 ORDER N^o 25313
 JUN 20 2005
 ORIGINAL
 KCC WICHITA

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

DATE 4-15-16 2005

IS AUTHORIZED BY: Bear Petroleum Inc
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Charles Well No. 2-14 Customer Order No. _____

Sec. Twp. Range _____ County Sedgwick 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

Well Owner or Operator

By

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
1100	1	Pump truck - conductor <u>13 3/8</u>		500-
1101	50	Pump truck miles	2.50	125-
1104	125	sax common	2.25	906.25
1101	2	sax cc	25.00	50.00
1100	1	Pump Truck - Surface <u>8 5/8</u>		500-
1101	0	mileage	0	0
1101	200	sax common	2.25	1,450-
4200	325	Bulk Charge	1.00	325-
1201	50	Bulk Truck Miles <u>15.76 ton</u>	1.85	669.80
		Process License Fee on _____ Gallons		
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 Dean

Station _____

Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS



TREATMENT REPORT

Acid Stage No.

Date 4-15-05 District Quanton F. O. No.
 Company Blair Pet.
 Well Name & No. Charles 2-14
 Location..... Field.....
 County Sedgewick State Ks
 Casing: Size 13 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..... 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. 320 Sp. Twin
 Auxiliary Equipment 322
 Packer:..... Set at.....ft.
 Auxiliary Tools.....
 Plugging or Sealing Materials: Type 125 sks common
 Gal. lb.

Company Representative Dick S. Treater Dean Lancaster

RECEIVED
 JUN 20 2005
 KCC WICHITA

TIME a.m /p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
:				Arrive Loc.
:				Hook up truck to cement.
:				Start cement.
:				m.x. 125 sks common.
:				Shut Dip.
:				run 11 Bbls. Shut in casing.
:				Wash up truck
:				Shut down.
:				80' conductor
:				50 mile
:				125 sks Common
:				2% Calcium.



POST OFFICE BOX 438
HAYSVILLE, KS 67060
(316) 524-1225
(316) 524-1027 FAX

INVOICE

**ORIGINAL
RECEIVED**

JUN 20 2005 INVOICE NUMBER

KCC WICHITA 0025629-IN

BURRTON, KS
(620) 463-5161
FAX (620) 463-2104

GREAT BEND, KS
(620) 793-3366
FAX (620) 793-3536

BEAR PETROLEUM, INC.
BOX 438
HAYSVILLE

KS 67060

LEASE: CHARLES 2-14

H/2 Long Spring

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
04/30/05	25629		04/21/05			
QUANTITY	U/M	ITEM NO/DESCRIPTION		D/C	PRICE	EXTENSION
52.00	MI	MILEAGE		.00%	2.50	130.00
1.00	EA	PUMP CHARGE		.00%	1,000.00	1,000.00
1.00	EA	PACKER SHOE		.00%	1,600.00	1,600.00
1.00	EA	LATCH DOWN PLUG AND BAFFLE		.00%	175.00	175.00
6.00	EA	CENTRALIZERS		.00%	55.00	330.00
2.00	GAL	KCL - LIQUID		.00%	17.00	34.00
150.00	SAX	COMMON CEMENT		.00%	7.25	1,087.50
150.00	EA	BULK CHARGE		.00%	1.00	150.00
366.60	MI	BULK TRUCK - TON MILES		.00%	.85	311.61
1.00	EA	10% FUEL SURCHARGE		.00%	144.16	144.16

There will be a charge of 1.5% (18% annual rate) on all past due accounts.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service, Inc.

Gressel Oil Field Service, Inc. reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

REMIT TO: P.O. BOX 438
Haysville, KS 67060

COP-BUR

NET INVOICE:	4,962.27
SALES TAX:	.00
INVOICE TOTAL:	4,962.27

RECEIVED BY

NET 30 DAYS



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

ORIGINAL
FIELD RECEIVED
ORDER JUN 20 2005 25629
KCC WICHITA

DATE 4-21 2005

IS AUTHORIZED BY: BEAR Petroleum
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease CHARLES Well No. 2-14 Customer Order No. _____

Sec. Twp. Range _____ County SEDOGWICK 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
4111	52	MILEAGE	<u>2.50</u>	<u>130.00</u>
4110	1	PUMP CHARGE		<u>1000.00</u>
4104	1	PACKER SHOE		<u>1600.00</u>
4112	1	LATCH DOWN PLUG + BAFFLE		<u>175.00</u>
4113	6	CENTRALIZERS	<u>55.00</u>	<u>330.00</u>
4114	2	KCL	<u>17.00</u>	<u>34.00</u>
4101	150	COMMON	<u>7.25</u>	<u>1087.50</u>
4100	150	Bulk Charge	<u>1.00</u>	<u>150.00</u>
4101		Bulk Truck Miles $7.05 T \times 52 M = 366.6 TM$		<u>311.61</u>
		Process License Fee on Gallons		
		TOTAL BILLING		<u>4818.11</u>

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 George

Station BURTON

DICK
Well Owner, Operator or Agent

Remarks _____

