

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4419
Name: Bear Petroleum Inc.
Address: Box 438
City/State/Zip: Haysville Ks. 67060
Purchaser: Coffeyville Resources
Operator Contact Person: Dick Schremmer
Phone: (316) 524-1225
Contractor: Name: Plains, LLC
License: 33465
Wellsite Geologist: The Dickster
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: James W Hershberger
Well Name: Ferguson # 1
Original Comp. Date: 3-12-64 Original Total Depth: 2866
☐ 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. _____

10-9-07	10-19-07	10-26-07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 015-19750-00-01
County: Butler
SW NW SE Sec. 28 Twp. 29 S. R. 5 ☒ East ☐ West
1740 feet from (S) / N (circle one) Line of Section
2160 feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Ferguson Well #: 1
Field Name: Combs NE
Producing Formation: Mississippi
Elevation: Ground: 1309 Kelly Bushing: 1327
Total Depth: 2866 Plug Back Total Depth: 2860
Amount of Surface Pipe Set and Cemented at 160 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 250
feet depth to Ø w/ 70 sx cmt.
Alt 2-Dlg-2/16/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 20.00 ppm Fluid volume 120 bbls
Dewatering method used Trucked

Location of fluid disposal if hauled offsite:

Operator Name: Bear Petroleum
Lease Name: Holt License No.: 4419
Quarter SE Sec. 4 Twp. 30 S. R. 5 ☒ East ☐ West
County: Cowley Docket No.: D-25,470

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: 10-30-07
Subscribed and sworn to before me this 30th day of November,
20 07.
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

N Letter of Confidentiality Received
☒ If Denied, Yes ☐ Date: RECEIVED
☒ Wireline Log Received **KANSAS CORPORATION COMMISSION**
☐ Geologist Report Received **DEC 03 2007**
☐ UIC Distribution

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Bear Petroleum Inc. Lease Name: Ferguson Well #: 1
 Sec. 28 Twp. 29 S. R. 5 ☒ East ☐ West County: Butler

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 ☐ Yes ☒ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

Radiation Guard Log Sonic Bond Log

☐ Log Formation (Top), Depth and Datum ☒ Sample

Name	Top	Datum
KC	2188	-861
MISS	2842	-1525

CASING RECORD <input type="checkbox"/> New <input checked="" 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
		8 5 / 8	24	160	common	125	none
		4 1 / 2	10.5	2865	common	325	150 common
							175 60/40 2% gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	250	60/40 4% gel	70	1" from 250' to surface

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	2833-2838	840gl 15% NE FE	2838

TUBING RECORD		Size	Set At	Packer At	Liner Run		DEC 03 2007	
27 / 8			2840	NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumerd Production, SWD or Enhr.			Producing Method			CONSERVATION DIVISION		
11-15-07			<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			WICHITA, KS		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	7		0		38			40

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

METHOD OF COMPLETION ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled ☐ Other (Specify) _____

Production Interval 2833-38

RECEIVED
KANSAS CORPORATION COMMISSION

CONSERVATION DIVISION
WICHITA, KS



FIELD ORDER

Nº C 32440

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

DATE Oct 25 2007

IS AUTHORIZED BY: Bob Pet (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well
As Follows: Lease Ferguson Well No. 1-23 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

[illegible]

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 Cory R. Ryle

Station BARTON

Well Owner, Operator or Agent

Remarks NET 20 DAYS

NET 30 DAYS



FIELD ORDER **Nº C 32438**

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

DATE 10-19 2007

IS AUTHORIZED BY: Brian H. (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well
As Follows: Lease Ferris Well No. 1 WD Customer Order No. _____

Sec. Twp. _____
Range _____ County Bentley 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

[illegible]

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 Alvin K.

Station Burien

Well Owner, Operator or Agent

Remarks

NET 30 DAYS

KEN'S PRINT #7889