

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
Type of Well: Gas Docket #: _____
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)
The plugging proposal was approved on: _____ (Date)
by: Steve Durrant (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)

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

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

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

API Number: 15-033-21240-0000
Lease Name: K & G
Well Number: 1
Spot Location (QQQQ): C - SW - SE - SE
353 Feet from North / South Section Line
863 Feet from East / West Section Line
Sec. 11 Twp. 32 S. R. 20 East West
County: Comanche
Date Well Completed: _____
Plugging Commenced: 2-23-09
Plugging Completed: 2-24-09

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
				8 5/8	756	
				4 1/2	5274	3935

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.
Set bridge plug at 4950', bailed 2 sacks cement with bailer, dug cellar, unpacked casing head, set floor, pulled slips, cut surface off 4' below ground, shot pipe off at 3935', pulled casing up to 1600', pulled casing up to 800', pumped 15 gel, 60 sacks, 100# hulls, pulled to 250', pumped 50 sacks, 100# hulls, pulled to 40', pumped 20 sacks to surface.

Name of Plugging Contractor: Quality Well Service, Inc. License #: 31925
Address: 190 US Highway 56, Ellinwood, KS 67526

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CONSERVATION DIVISION
WICHITA, KS

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

SHANNON HOWLAND
Notary Public, State of Kansas
My Appt. Expires 3/10/2012

(Signature) _____
(Address) P.O. Box 438, Haysville, KS 67060

SUBSCRIBED and SWORN TO before me this 1st day of April, 2009
Shannon Howland My Commission Expires: 3/10/2012
Notary Public

P 165



P & A well

FIELD ORDER N^o C 33859

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

DATE 2-24 2009

IS AUTHORIZED BY: Burr Post (NAME OF CUSTOMER)
 Address _____ City _____ State _____
 To Treat Well _____
 As Follows: Lease K&J Seargan #1 Well No. _____ Customer Order No. _____
 Sec. Twp. Range K&J Seargan 11-32S-00W County Comanche 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
4101	1	Pump charge to plug surface		600 ⁰⁰
4000	130 sack	60-40-48 Poz @ 94 ⁰⁰ sack		1233 ⁷⁰
4050	15 sack	Gel @ 14 ⁰⁰ /sack		210 ⁰⁰
4052	2 sack	Hulls @ 100 ⁰⁰ @ 35 ⁰⁰ /lb		35 ⁰⁰
4101	135 miles	1 way pump truck mileage @ 3 ⁰⁰ /mile		405 ⁰⁰
used 100# hulls from Quality & 4 1/2 rubber plug to push gel out of casing				
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4200	130 sack	Bulk Charge 1 ²⁵ /sack		162 ⁵⁰
4201	772 ²⁰	Bulk Truck Miles		849 ⁴²
Process License Fee on _____ Gallons				
TOTAL BILLING				3495.62

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 Burr Post
 Station Burr Post

Well Owner, Operator or Agent

Remarks _____ **NET 30 DAYS**

TREATMENT REPORT

Surface Ply
 Acid Stage No.

Date 2-23-09 District BURDEN F. O. No.
 Company Beas Pet
 Well Name & No. RW Teegen #1
 Location Field
 County Comanche State Ks
 Casing: Size 4 1/2 Type & Wt. Set at ... ft.
 Formation: Perf. to ... ft.
 Formation: Perf. to ... ft.
 Formation: Perf. to ... ft.
 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. 323 Sp. Twin.
 Auxiliary Equipment Bulk 322
 Packer: Set at ... ft.
 Auxiliary Tools
 Plugging or Sealing Materials: Type 15 sacks gel, 200# Hulls 130 sack
 (In.) 60-40-4 1/2 lb.

Company Representative

Treater Jay Puf

TIME a.m./p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
9:20				On location rig up 4 1/2 @ 800'
:				Tie on casing start mixing Gel
:			30 BBl	Gel away knock off lannet 4 1/2 Ply to clean gel out of pipe
:				Start mixing 60 sack ply add 100# Hulls
:			14 BBl	60 sacks coming wash up going down hole
:			26 BBl	12 BBl flush stop down
10:25				4 1/2 @ 250' Tie on case
:				mix 100# Hulls in 50 sack Ply
:			10 BBl	Slurry coming wash up down hole
10:36			14 1/2 BBl	flush in stop down
:				
10:50				Pull 4 1/2 out run joint back in.
:			5 BBl	Mix up 20 sacks pump away
11:15				wash up truck pack up half location

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