

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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: P.O. Box 438
City/State/Zip: Haysville, KS 67060
Purchaser: West Wichta Gas Gathering
Operator Contact Person: Dick Schremmer
Phone: (316) 524-1225
Contractor: Name: Warren Drilling, LLC
License: 33724
Wellsite Geologist: James C. Musgrove

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WICHITA, KS

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. _____
2-27-08 3-4-08 3-18-08
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 159-22563-0000
County: Rice
SW SW NW Sec. 30 Twp. 21 S. R. 8 East West
2970 feet from (S) / N (circle one) Line of Section
4950 feet from (E) / W (circle one) Line of Section

Distances Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Fitz-Patrick Well #: 1-30
Field Name: Fitzpatrick
Producing Formation: Mississippi
Elevation: Ground: 1649 Kelly Bushing: 1657
Total Depth: 3450 Plug Back Total Depth: 3395
Amount of Surface Pipe Set and Cemented at 236 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.
Alt 1 - Dig - 6/11/08

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 20,000 ppm Fluid volume 5390 bbls
Dewatering method used Trucked
Location of fluid disposal if hauled offsite: _____
Operator Name: Gressel Oil Field Service, Inc.
Lease Name: Bern License No.: 3004
Quarter NW/4 Sec. 6 Twp. 20 S. R. 10 East West
County: Rice Docket No.: D-24255

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: [Signature]
Title: President Date: 4-14-08
Subscribed and sworn to before me this 14th day of April, 2008.
Notary Public: Shannon Howland
Date Commission Expires: 3/01/2012

SHANNON HOWLAND
Notary Public - State of Kansas
My Appt. Expires 3/01/2012

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: Bear Petroleum, Inc. Lease Name: Fitz-Patrick Well #: 1-30
 Sec. 30 Twp. 21 S. R. 8 East West County: Rice

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 checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Brown Lime	2949	-1292
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	2981	-1324
List All E. Logs Run:		Base Kansas City	3286	-1629
		Mississippi	3331	-1674
		Kinderhook Shale	3386	-1729
		RTD	3450	-1793
		LTD	3449	-1792

Sonic Cement Bond Log & Radiation Guard Log

CASING RECORD <input checked="" 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
Surface		8 5/8"	23	236	common	250	3% cc
Production		4 1/2"	10.5	3447	common	250	10% salt, 3/4% CFR2

ADDITIONAL CEMENTING / SQUEEZE RECORD			
Purpose:	Depth Top Bottom	Type of Cement	# Sacks and 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			

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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
2	3332-3340'	2000 gal 15% Mud Acid	3332-40
		Frac with 270,000 scf Nitrogen and 37,000 # sand	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8"	3340'	NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
4-1-08		<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
	0	60	5		

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: 3332-3340'



Cement surface

FIELD ORDER N° C 33443

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

DATE 2-28 2008

IS AUTHORIZED BY:

BEAR Petroleum
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease FITZPATRICK Well No. 1-30 Customer Order No. _____

Sec. Twp. Range _____ County Rice 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
<u>MILE</u>	<u>40</u>	<u>MILEAGE Pickup</u>	<u>1⁰⁰</u>	<u>40⁰⁰</u>
<u>4101</u>	<u>40</u>	<u>MILEAGE Pump Truck</u>	<u>3⁰⁰</u>	<u>120⁰⁰</u>
<u>4110</u>	<u>1</u>	<u>Pump Charge</u>		<u>600⁰⁰</u>
<u>4051</u>	<u>50</u>	<u>CALCIUM Chloride</u>	<u>8⁰⁰</u>	<u>400⁰⁰</u>
<u>4001</u>	<u>250</u>	<u>Common Cement</u>	<u>10⁶⁵</u>	<u>2662⁵⁰</u>
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<u>4200</u>	<u>250</u>	<u>Bulk Charge</u>	<u>1²⁵</u>	<u>312⁵⁰</u>
<u>4501</u>		<u>Bulk Truck Miles 11.75 TX 40m = 470 TM</u>	<u>1¹⁰</u>	<u>517⁰⁰</u>
		<u>Process License Fee on _____ Gallons</u>		
		TOTAL BILLING		<u>4652⁰⁰</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 A. G. CURTIS

Station GB

DICK

Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS



Cement Long String

FIELD ORDER N° C 33446

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

DATE 3-04 20 08

IS AUTHORIZED BY: Bear Petroleum
(NAME OF CUSTOMER)

Address _____ City _____ State _____
To Treat Well As Follows: Lease FITZPATRICK Well No. 1-30 Customer Order No. _____
Sec. Twp. Range 30-21s-8w County Rice 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
MILEY	40	MILEAGE Pickup	1 ⁰⁰	40 ⁰⁰
2101	40	MILEAGE Pump Truck	3 ⁰⁰	120 ⁰⁰
2100	1	Pump Charge		1200 ⁰⁰
H009	5	CENTRALIZERS	65 ⁰⁰	325 ⁰⁰
ELE	1	BASKET		110 ⁰⁰
MAV	1	INSERT FLOAT Shoe		285 ⁰⁰
TOP CAP	1	LATCH DOWN Plug & BAFFLE		145 ⁰⁰
1044	15	C37L FRICTION Reducer	20 ⁰⁰	300 ⁰⁰
1255	10	BATERCIDE	22 ⁰⁰	225 ⁰⁰
1040	2	KCL	22 ⁰⁰	45 ⁰⁰
2001	250	COMMON	10 ⁶⁵	2662 ⁵⁰
1044	2	DeFOAMER	22 ⁵⁰	45 ⁰⁰
4600	250	Bulk Charge	1 ²⁵	312 ⁵⁰
2601		Bulk Truck Miles 11.75T x 40m = 470 TM	1 ¹⁰	517 ⁰⁰
		Process License Fee on Gallons		
TOTAL BILLING				6332 ⁰⁰

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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 A.G. CURTIS
Station GB

Dick
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

