

ORIGINAL

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACD-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 4419

Name: Bear Petroleum, Inc.

Address Box 438

Haysville, KS 67060

City/State/Zip _____

Purchaser: Maclaskey

Operator Contact Person: Dick Schremmer

Phone (316) 524-1225

Contractor: Name: JMAR Drilling

License: 31617

Wellsite Geologist: William Sheperd

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: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

11-2-95 11-9-95 11-16-95

Spud Date 11-2-95 Date Reached TD 11-9-95 Completion Date 11-16-95

API NO. 15- 173-20884-0000

County Sedgwick

C N/2 NE SE Sec. 24 Twp. 29S Rge. 1 W

2310 Feet from S (circle one) Line of Section

660 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE, NW or SW (circle one)

Lease Name Johnson Well # #1

Field Name Brumley

Producing Formation Mississippi

Elevation: Ground 1279 KB 1286

Total Depth 3430 PBTD 3430

Amount of Surface Pipe Set and Cemented at 219 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 cnt.

Drilling Fluid Management Plan ALT 1 291 5-16-96
(Data must be collected from the Reserve Pit)

Chloride content 25,000 ppm Fluid volume 100 bbls

Dewatering method used Trucked

Location of fluid disposal if hauled offsite: _____

Operator Name Bear Petroleum, Inc.

Lease Name Callaway License No. 4419

NE Quarter Sec. 24 Twp. 29 Rge. 1 W

County Sedgwick Docket No. D-26787

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 on 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 R.A. Schremmer

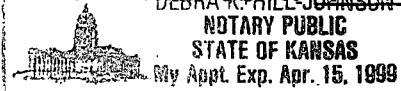
R. A. (Dick) Schremmer

Title President Date 2-19-96

Subscribed and sworn to before me this 19th day of February, 19 96.

Notary Public Debra K. Hill-Johnson

Date Commission Expires April 15, 1999



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
G Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

Operator Name Bear Petroleum, Inc. Lease Name Johnson Well # #1
 Sec. 24 Twp. 29 Rge. 1 East West
 County Sedgwick

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Iatan	2418	-1132
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Stulnaker	2422	-1136
List All E.Logs Run:		Kansas City	2760	-1474
ELI - Dual Induction Log		Cherokee	3183	-1897
ELI - Compensated Density Neutron		Mississippi	3318	-2032
Subterranean - Bond Log		LTD	3434	-2148

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
Conductor	17"	13 3/8"	60	69	Class A	90	4 sax Cholride
Surface	8 5/8"	10"	24	219	Class A	185	6 sax Chloride
Production	5 1/2"	5 1/2"	14	3429	Class A	150	<i>See Attached</i>

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 (Amount and Kind of Material Used)	Depth
2	3366'-3368'	500 gl. 15% MA	3366'-68'
2	3322'-3326'	500 gl. MA 15%	<i>3322'-26'</i>
		1000 gl. 15% NE	

TUBING RECORD	Size <u>2 3/8"</u>	Set At <u>3368</u>	Packer At <u>NA</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
11-18-95				
Estimated Production Per 24 Hours	Oil Bbls. <u>2 1/2</u>	Gas Mcf. <u>NA</u>	Water Bbls. <u>85</u>	Gas-Oil Ratio <u>40</u>

Disposition of Gas:	<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION	Production Interval
		<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	<u>3366'-68'</u>
		<input type="checkbox"/> Other (Specify) _____	<u>3322'-26'</u>

11-07-95

RECEIVED
KANSAS CORP COMM
1996 FEB 21 A 11:38

INVOICE NO. 917
FIELD TICKET NO. 2878
DATE 11-07-95

UNITED CEMENTING & ACID CO., INC.

(316) 321-4680

REMIT TO
BOX 712
EL DORADO, KANSAS 67042

Bear Petroleum Co., Inc.
PO Box 438
Haysville KS 67060

FULLY INSURED

P.O. #

DATE OF JOB	COUNTY	STATE	LEASE	WELL NO.
11-01-95	SG	KS	Johnson	#1
SIZE OF CASING	DEPTH OF WELL	DEPTH OF JOB	PLUG DEPTH	PRESSURE
13 3/8	80	78	70	
Cementing conductor.				
90 sax	Class A Cement	(1) Cementing unit		350.00
4 sax	Cal. Chloride	@ 5.10 per sax		459.00*
	Bulk charge	@ 22.00 per sax		88.00*
		@ .82 x 94 sax		77.08*
	Drayage	@ 4.50- T x .60 x 38 mi.		102.60*
				42.87
SALES TAX \$				
TOTAL \$				1,119.55

TERMS: NET 30 DAYS FROM INVOICE DATE
PLEASE PAY FROM THIS INVOICE

7-11-95

RECEIVED
KANSAS CORP COMM
1995 FEB 21 11:38

INVOICE NO. 918
FIELD TICKET NO. 2879
DATE 11-07-95

**UNITED CEMENTING
& ACID CO., INC.**

(316) 321-4680

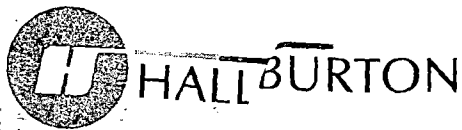
REMIT TO
BOX 712
EL DORADO, KANSAS 67042

Bear Petroleum, Inc.
PO Box 438
Haysville KS 67060

FULLY INSURED

		P.O. #	
DATE OF JOB	COUNTY	STATE	LEASE
11-02-95	SG.	KS	Johnson
WELL NO.	SIZE OF CASING	DEPTH OF WELL	DEPTH OF JOB
#1	8 5/8"	230'	227'
PLUG DEPTH	PRESSURE		
208'			
Cementing surface pipe..			
185 sax	Class A Cement	(1) Cementing unit, group jobs rate.	250.00
6 sax	Cal. Chloride	@ 5.10 per sax	943.50*
	Bulk charge	@ 22.00 per sax	132.00*
	Drayage	@ .82 x 191 sax	156.62*
		@ 9.50-T x .60 x 38 mi.	216.60*
SALES TAX			\$ 85.47
TOTAL			\$ 1,784.19

TERMS: NET 30 DAYS FROM INVOICE DATE
PLEASE PAY FROM THIS INVOICE



HALLIBURTON ENERGY SERVICES

HAL-1906-N

SERVICE LOCATIONS

CHARGE TO: **BEAR PETROLEUM**

ADDRESS

CITY, STATE, ZIP CODE

No. **906742-1**

PAGE 1 OF 2

RECEIVED
COMM
A 11:30
1995/11/27

1. SERVICE LOCATIONS FRAC 1	WELL/PROJECT NO. 1	LEASE Johnson	COUNTY/PARISH SENGUPTA	STATE LA	CITY/OFFSHORE LOCATION LA 11:30	DATE 11-9-95	OWNER SAME
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES	CONTRACTOR J. Mal.	RIG NAME/NO.	SHIPPED 1995/11/27	DELIVERED TO WELL SITE	ORDER NO.	
3. WELL TYPE 01	WELL CATEGORY 01	JOB PURPOSE 035	WELL PERMIT NO. AT 15173208640000	WELL LOCATION 24-293-1W			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000-117		1			MILEAGE Round Trip	180		MI		2.85	513.00
001-516		1			Ramp Charge	6	HR		3417	1500.00	1500.00
018-315		1			fluid flush	500		gal		1.65	325.00
030-016		1			5 1/2" SW TUBG	1		KA		60.00	60.00
12A	825.205	1			5 1/2" Guide shoe	1		KA		121.00	121.00
24A	815.19251	1			5 1/2" INSLET FLOAT VALVE	1		KA		110.00	110.00
27	815.19313	1			AUTO FILL UP ASSUM FOR 5 1/2"	1		KA		69.00	69.00
40	806.60222	1			5 1/2" CENTRALIZER	6		KA		60.00	360.00
019-241		1			50' BRIDGE 5 1/2"	1		KA		185.00	185.00
116-207		1			MEANS LUG					235.00	235.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: **11-9-95** TIME SIGNED: **14:30**

A.M. P.M.

do not require IPC (Instrument Protection). Not offered

SUB SURFACE SAFETY VALVE WAS:
 PULLED & RETURN PULLED RUN

TYPE LOCK DEPTH

BEAN SIZE SPACERS

TYPE OF EQUALIZING SUB. CASING PRESSURE

TUBING SIZE TUBING PRESSURE WELL DEPTH

TREE CONNECTION TYPE VALVE

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? AGREE

WE UNDERSTOOD AND MET YOUR NEEDS? UN-DECIDED

OUR SERVICE WAS PERFORMED WITHOUT DELAY? DIS-AGREE

WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?

ARE YOU SATISFIED WITH OUR SERVICE?
 YES NO

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL: **3021**

FROM CONTINUATION PAGE(S)

SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE: **6264**

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT): **R.A. Schanner**

CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): *[Signature]*

HALLIBURTON OPERATOR/ENGINEER: **M.R. [Signature]**

EMP #

HALLIBURTON APPROVAL