KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Lease Operator: Bear Petroleum, Inc.
Address: PO Box 438, Haysville, KS 67060
Phone: (316) 524-1225 Operator License #: 4419

Type of Well: ENHR
Docket #: E-23,540
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)
The plugging proposal was approved on: ____________(Date)
by: ____________ (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)

<table>
<thead>
<tr>
<th>Depth to Top</th>
<th>Bottom</th>
<th>T.D.</th>
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</thead>
<tbody>
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</tbody>
</table>

Show depth and thickness of all water, oil and gas formations.

<table>
<thead>
<tr>
<th>Oil, Gas or Water Records</th>
<th>Casing Record (Surface Conductor &amp; Production)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Formation</td>
<td>Content</td>
</tr>
<tr>
<td>-----------</td>
<td>---------</td>
</tr>
<tr>
<td>8 5/8</td>
<td>1342</td>
</tr>
<tr>
<td>5 1/2</td>
<td>3720</td>
</tr>
</tbody>
</table>

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.

Ripped 2600', and 2400', worked free, pulled to 2000', pumped 100 sacks, pulled to 140', pumped 40 sacks, pulled to 550', pumped 30 sacks, pulled to 200', cement circulated to surface.

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Name of Plugging Contractor: Quality Well Service, Inc.
License #: 31925
Address: 401 West Main, Lyons, KS 67554

Name of Party Responsible for Plugging Fees: Bear Petroleum, Inc.

State of _____________ County, ________________ ss.

(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
(Signature)
Notary Public - State of Kansas
My Appt. Expires 3/10/08

ADDRESS: P.O. Box 438, Haysville, KS 67060

SUBSCRIBED and SWORN TO before me this 23rd day of December, 2004

Shannon Howland
Notary Public
My Commission Expires: 3/10/08

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202
KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING APPLICATION
Please TYPE Form and File ONE Copy

API # 15-051-20,557

Well Operator: Bear Petroleum, Inc.
Address: P.O. Box 438
City: Haysville
State: KS
Zip Code: 67606
Contact Phone: (316) 524-1225
Lease: Younger
Well #: 1
Sec. 35 Twp. 14 S. R. 19

- NW - SW - NE
Spot Location / QQQQ
County: Ellis

3630 Feet (in exact footage) From
2310 Feet (in exact footage)

Check One: Oil Well Gas Well D&A Cathodic Water Supply Well SWD Docket # 5-23,540 Other:

Conductor Casing Size: 8 5/8
Surface Casing Size: 5 1/2

List (ALL) Perforations and Bridgeplug Sets: OH 3720-25', Arbuckle, CIBP 3650', KC Perfs 3742-76',

Cement squeezed 9-28-04, PBTD 3435' cement

Elevation: 2101 

Condition of Well: Good Poor Casing Leak Junk in Hole

Proposed Method of Plugging (attach a separate page if additional space is needed): According to the rules and regulations of the KCC

Is Well Log attached to this application as required? Yes No Is ACO-1 filed? Yes No

If not explain why:

Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission.

List Name of Company Representative authorized to be in charge of plugging operations: Dick Schremmer

Address: P.O. Box 438
City / State: Haysville, KS 67606

Plugging Contractor: Mike’s Testing & Salvage
Address: P.O. Box 487, Chase, KS 67524-0467

Proposed Date and Hour of Plugging (if known?): unknown

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator / Agent.

Date: 10-14-04

Authorized Operator / Agent:

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202
COPELAND
Acid & Cement

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

FIELD ORDER No. 25802

DATE 12-02-2004

IS AUTHORIZED BY:
Bear Petroleum
(NAME OF CUSTOMER)

Address
City
State

To Treat Well
As Follows: Lease
Younker
Well No.
Customer Order No.

Sec. Twp.
Range
County
State

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the heretofore 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

<table>
<thead>
<tr>
<th>CODE</th>
<th>QUANTITY</th>
<th>DESCRIPTION</th>
<th>UNIT COST</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>103D</td>
<td>10</td>
<td>Mileage Pump Truck</td>
<td>2.00</td>
<td>125.00</td>
</tr>
<tr>
<td>103</td>
<td>50</td>
<td>Pump Charge</td>
<td></td>
<td>400.00</td>
</tr>
<tr>
<td>103</td>
<td>560</td>
<td>Hills</td>
<td>1.25</td>
<td>125.00</td>
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<tr>
<td>200</td>
<td>230</td>
<td>60/40 Add. Gel</td>
<td>6.00</td>
<td>1380.00</td>
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<tr>
<td>105</td>
<td>8</td>
<td>4% Additional Gel</td>
<td>9.50</td>
<td>76.00</td>
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<table>
<thead>
<tr>
<th>CODE</th>
<th>QUANTITY</th>
<th>DESCRIPTION</th>
<th>UNIT COST</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>200</td>
<td>230</td>
<td>Bulk Charge</td>
<td>1.00</td>
<td>230.00</td>
</tr>
<tr>
<td>801</td>
<td></td>
<td>Bulk Truck Miles</td>
<td>10.134 x 50 = 506 TM</td>
<td>0.85</td>
</tr>
</tbody>
</table>

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: A. B. CURTIS

Station: COB

Well Owner, Operator or Agent

Remarks

NET 30 DAYS
**TREATMENT REPORT**

**Date:** 12-20-74

**District:** GB

**Company:** Bear Younger

**Well Name & No.:**

**Location:** Ellis

**State:** KS

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<table>
<thead>
<tr>
<th>Type Treatment</th>
<th>Amt.</th>
<th>Type Fluid</th>
<th>Sand Size</th>
<th>Pounds of Sand</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bldown</td>
<td></td>
<td>Bbl./Gal.</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Bbl./Gal.</td>
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<td>Bbl./Gal.</td>
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<tr>
<td></td>
<td></td>
<td>Bbl./Gal.</td>
<td></td>
<td></td>
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</tbody>
</table>

|----------------|-----------|-----------|-----------|

**Flux:** Bbl./Gal.

**Treated 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:**

**Packer:**

**Auxiliary Tools:**

**Plugging or Sealing Materials:** Type

<table>
<thead>
<tr>
<th>Then Hole Size</th>
<th>T.D.</th>
<th>P.D. to.</th>
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**Company Representative:**

**Treater:** A. G. CURTIS

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**TIME**

<table>
<thead>
<tr>
<th>a.m./p.m.</th>
<th>PRESSURES</th>
<th>Total Fluid Pumped</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Tubing</td>
<td>Casing</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>REMARKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000'</td>
<td>100 SKS + 300 HUlls</td>
<td></td>
</tr>
<tr>
<td>1400'</td>
<td>40 SKS + 100 HUlls</td>
<td></td>
</tr>
<tr>
<td>550'</td>
<td>30 SKS + 100 HUlls</td>
<td></td>
</tr>
<tr>
<td>200'</td>
<td>CIRCULATE TO SURFACE</td>
<td></td>
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<tr>
<td></td>
<td>60 SKS</td>
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**230 SKS Total**

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**KEN'S PRINT #7599**
API #: 15 - 051-20,557 (Identifier Number of this well). This must be listed for wells drilled since 1967; if no API # was issued, indicate original spud or completion date.

Well Operator: Bear Petroleum, Inc.

Address: P.O. Box 438
City: Haysville
State: KS Zip Code: 67060 Contact Phone: (316) 524 - 1225

Lease: Younker Well #: 1 Sec. 35 Twp. 14 S. R. 19 East West

- NW - SW - NE Spot Location / QQQQ County: Ellis

3630 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)

2310 Feet (in exact footage) From East / West (from nearest outside section corner) Line of Section (Not Lease Line)

Check One: Oil Well Gas Well D&A Catholic Water Supply Well

☐ SWD Docket #: ☐ ENHR Docket #: Other:

Conductor Casing Size: Set at: Cemented with:

Surface Casing Size: 8 5/8" Set at: 1342 Cemented with: 650 Sacks

Production Casing Size: 5 1/2" Set at: 3720 Cemented with: 135 Sacks

List (ALL) Perforations and Bridgeplug Sets: OH 3720-25', Arbuckle, CIBP 3650', KC Perfs 3724-76',

Cement squeezed 9-28-04, PBTG 3435' cement

Elevation: 2101 (KL / LKL) TD: 3725 PBTG: 3435 Anhydrite Depth: 1345 + 756 (Stone Coral Formation)

Condition of Well: ☑ Good ☐ Poor ☐ Casing Leak ☐ Junk In Hole

Proposed Method of Plugging (attach a separate page if additional space is needed): According to the rules and regulations of the KCC

________________________________________

Is Well Log attached to this application as required? ☑ Yes ☐ No Is ACO-1 filed? ☑ Yes ☐ No

If not explain why________________________________________

Plugging of this Well will be done in accordance with K.S.A. 55-101 et seq. and the Rules and Regulations of the State Corporation Commission.

List Name of Company Representative authorized to be in charge of plugging operations: Dick Schremmer

Phone: (316) 524 - 1225

Address: P.O. Box 438
City / State: Haysville, KS 67060

Plugging Contractor: Mike's Testing & Salvage (Company Name) KCC License #: 31529

Address: P.O. Box 467, Chase, KS 67524-0467 Phone: (620) 938 - 2943

Proposed Date and Hour of Plugging (if known): unknown

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 10-14-04 Authorized Operator / Agent: ______________________________________

Mail to: KCC - Conservation Division, 130 S. Market - Room 2076, Wichita, Kansas 67202
# TREATMENT REPORT

**Date:** 11-17-04  **District:** Hudson  **F. O. No.:**

**Company:** Bear Oil  **Well Name & No.:** Hughes #1  **Location:**

**County:** Rice  **State:** KS

<table>
<thead>
<tr>
<th>Type Treatment</th>
<th>Amt.</th>
<th>Type Fluid</th>
<th>Sand Size</th>
<th>Pounds of Sand</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bldown</td>
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<td>Bl./Gal.</td>
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<td>Bl./Gal.</td>
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<td>Bl./Gal.</td>
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</table>

| Flush         | Bl./Gal. |           |           |

<table>
<thead>
<tr>
<th>Treated from</th>
<th>ft. to</th>
<th>ft. No. ft.</th>
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</tbody>
</table>

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<thead>
<tr>
<th>Actual Volume of Oil/Water to Load Hole:</th>
<th>Bl./Gal.</th>
</tr>
</thead>
</table>

**Pump Trucks, No. Used:** Sub 320  **Sp.** Twin

**Auxiliary Equipment**

**Packer:**

<table>
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<tr>
<th>Auxiliary Tools</th>
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</table>

**Plugging or Sealing Materials: Type: 150 SU 6% 6% 4% 4% 4%**

**Company Representative:**

**Treater:** A. Lawrence

## TIME
<table>
<thead>
<tr>
<th>a.m./p.m.</th>
<th>Tubing</th>
<th>Casing</th>
<th>Total Fluid Pumped</th>
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</thead>
<tbody>
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</tbody>
</table>

### REMARKS

- Cement plug at 1050' w/ 35 sks 6% 6% 6%
- Sand plug at 600' w/ 35 sks 6% 6% 6%
- Last plug at 300' to surface w/ 80 sks 6% 6% 6%
- Cement setting full in cellar
- Job complete

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