

This permit was originally issued to General Energy, Alan Emery Energy, now Town Oil Co. owns this well.

Missouri Oil and Gas Council

Form OGC-3

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

APPLICATION TO DRILL DEEPEN PLUG BACK
for an oil well or gas well

NAME OF COMPANY OR OPERATOR Town Oil Co. DATE 12/6/85
Route 4 Paula KS 66071
Address City State

DESCRIPTION OF WELL AND LEASE

Name of lease Jack Beary Well number 53D Elevation (ground) 1066.5

WELL LOCATION (give footage from section lines)
738.19 ft. from (N) 187 sec. line 1762.25 ft. from (E) 187 sec. line

WELL LOCATION Section 4 Township 46N Range 33W County CASS

Nearest distance from proposed location to property or lease line: 275 feet
Distance from proposed location to nearest drilling, completed or applied for well on the same lease: 220 feet

Proposed depth 650 Drilling contractor, name & address _____ Rotary or Cable Tools Approx. date work will start see note at top of permit

Number of acres in lease 24.5 Number of wells on lease, including this well, completed in or drilling to this reservoir: _____
Number of abandoned wells on lease: _____

If lease, purchased with one or more wells drilled, from whom purchased: Name _____ No. of Wells: producing _____
Address _____ inactive _____
abandoned _____

Status of Bond Single Well Amt. _____ Blanket Bond Amt. 20,000 ON FILE ATTACHED

Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.

Proposed casing program: amt. size wt./ft. cem. Approved casing -- To be filled in by State Geologist

amt.	size	wt./ft.	cem.	amt.	size	wt./ft.	cem.
<u>650</u>	<u>4"</u>	<u>10.4</u>	<u>yes</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>
<u>20</u>	<u>7 1/2"</u>	<u>22</u>	<u>yes</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

I, the undersigned, state that I am the Partner of the Town Oil (company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.
Signature Leslie Town

Permit Number: 20123
Approval Date: 12/6/85
Approved By: Wallace B. Howe BMR

- Drillers log required
- Drill stem test info. required if run
- E-logs required if run
- Samples required
- Core analysis required if run
- Samples not required

Note: This Permit not transferable to any other person or to any other location.
Remit two copies to: Missouri Oil and Gas Council
P.O. Box 250 Rolla, Mo. 65401
One will be returned for driller's signature

DEC 16 1985
MO. OIL & GAS COUNCIL
WATER SAMPLES REQUIRED @ _____

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

APPLICATION TO DRILL DEEPEN PLUG BACK

NAME OF COMPANY OR OPERATOR General Energy Inc of Linn Co. DATE 12-15-80
Box 216 Mound City KANSAS 66056
Address City State

DESCRIPTION OF WELL AND LEASE

Name of lease JACK BEARY Well number 53 D Elevation (ground) 1066.5

WELL LOCATION (give footage from section lines)
738.19 ft. from (N) sec. line 1762.25 ft. from (E) sec. line

WELL LOCATION Section 4 Township 46 Range 33 County CASS

Nearest distance from proposed location to property or lease line: 275 feet
Distance from proposed location to nearest drilling, completed or applied - for well on the same lease: 220 feet

Proposed depth: 650 Rotary or Cable tools ROTARY Approx. date work will start 12-20-80

Number of acres in lease: 24.5 Number of wells on lease, including this well, completed in or drilling to this reservoir: 0
Number of abandoned wells on lease: 0

If lease, purchased with one or more wells drilled, from whom purchased: Name _____ Address _____ No. of Wells: producing _____ inactive _____ abandoned _____

Status of Bond Single Well Amt. _____ Blanket Bond Amt. 20,000 ON FILE ATTACHED

Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.

Proposed casing program:				Approved casing - To be filled in by State Geologist			
amt.	size	wt./ft.	cem.	amt.	size	wt./ft.	cem.
<u>650</u>	<u>4</u>	<u>10.4</u>	<u>yes</u>	_____	_____	_____	_____
<u>20</u>	<u>7/4</u>	<u>22</u>	<u>yes</u>	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

I, the undersigned, state that I am the president of the General Energy, Inc. (company) and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

Signature Gilbert McGeown

Permit Number: 20123

Approval Date: 12/18/80

Approved By: Wallace B. Howe R.A.

Note: This Permit not transferable to any other person or to any other location.

Remit two copies to: Missouri Oil and Gas Council
P.O. Box 250 Rolla, Mo. 65401
One will be returned for driller's signature

SAMPLES REQUIRED
 SAMPLES NOT REQUIRED

WATER SAMPLES REQUIRED @: DEC 18 1980
MO OIL & GAS COUNCIL

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

Note: Permit approval for drilling only, not injection. Approval or denial for injection determined after Mechanical Integrity Test results reviewed and official notification given.

Missouri Oil and Gas Council

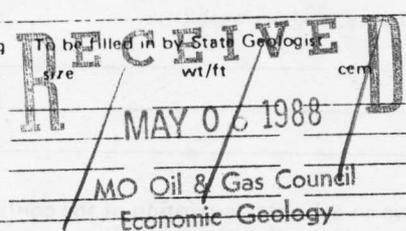
Form OGC-3I

INJECTION WELL PERMIT APPLICATION: to drill, deepen, plug back, or convert an existing well

APPLICATION TO DRILL DEEPEN PLUG BACK CONVERSION

NAME OF COMPANY OR OPERATOR Town Oil Co. DATE 4-29-88

Rt. 4 Paola Kansas 66071
Address City State

DESCRIPTION OF WELL AND LEASE			
Name of lease <u>Beary</u>	Well number <u>53-D</u>	Elevation (ground) <u>1066.5</u>	
WELL LOCATION (give footage from section lines) <u>738.19</u> ft. from (N) <input checked="" type="checkbox"/> sec line <u>1762.25</u> from (E) <input checked="" type="checkbox"/> sec line			
WELL LOCATION Section <u>4</u> Township <u>46N</u> Range <u>33W</u>			COUNTY <u>Cass</u>
Nearest distance from proposed location to property or lease line <u>275</u> feet		Distance from proposed location to nearest drilling, completed or applied for well on the same lease <u>220</u> feet	
Proposed depth <u>650</u>	Rotary or Cable tools	Drilling Contractor, name and address	Approx. date work will start
Number of acres in lease <u>24.5</u>	Number of wells on lease, including this well, completed in or drilling to this reservoir: _____ Number of abandoned wells on lease: _____		
If lease purchased with one or more wells drilled, from whom purchased? Name _____ Address _____		No of Wells: producing _____ injection _____ inactive _____ abandoned _____	
Status of Bond Single Well <input type="checkbox"/> Amt. _____ Blanket Bond <input checked="" type="checkbox"/> Amt. <u>\$20,000</u>			<input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> ATTACHED
Outline Proposed Stimulation Program			
Proposed casing program		Approved casing program	
amt. <u>650</u>	size <u>4"</u>	wt/ft <u>10.4</u>	cem. <u>yes</u>
<u>20</u>	<u>9 1/4"</u>	<u>22</u>	<u>yes</u>
<div style="text-align: right;">  </div>			
I, the undersigned, state that I am the <u>Partner</u> of the <u>Town Oil Co.</u> (company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.			
			Signature <u>Lester Town</u>

Permit Number 20123 SAMPLES REQUIRED SAMPLES NOT REQUIRED

Approved Date 5/26/88 WATER SAMPLES REQUIRED @ _____

Approved by [Signature]

Not to be used for any other location or to any other location. Remit two copies to: Missouri Oil and Gas Council P.O. Box 250, Rolla, MO 65401

One will be returned for driller's signature

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

I _____ of the _____
Company confirm that an approved drilling permit has been obtained by the owner of this well. Council approval of this permit will be shown on this form by presence of a permit number and signature of authorized Council representative.

Driller's signature _____

Date _____

Proposed Operations Data

Proposed average daily injection, pressure 400 psig, rate 25 bpd/gpm, volume 300 bbl/gal

Approved average daily injection, (to be filled in by State Geologist), pressure 400 psig, rate 25 bpd/gpm, volume 300 bbl/gal

Proposed maximum daily injection, pressure 600 psig, rate 50 bpd/gpm, volume 1000 bbl/gal

Approved maximum daily injection, (to be filled in by State Geologist), pressure 600 psig, rate 50 bpd/gpm, volume 1000 bbl/gal

Estimated fracture pressure/gradient of injection zone breakdown 800 psi/foot

Describe the source of the injection fluid produced and fresh water

Submit an appropriate analysis of the injection fluid. (Submit on separate sheet).

Describe the compatibility of the proposed injected fluid with that of the receiving formations, including total dissolved solids comparisons. KD

TDS 30,832.

see log

Give an accurate description of the injection zone including lithologic descriptions, geologic name, thickness, depth, porosity, and permeability.

Give an accurate description of the confining zones including lithologic description, geologic name, thickness, depth, porosity, and permeability.

see log

Submit all available logging and testing data on the well.

Give a detailed description of any well needing corrective action which penetrates the injection zone in the area of review (1/2 mile radius around well). Include the reason for and proposed corrective action.

None attached

[Handwritten signature]

MISSOURI OIL AND GAS COUNCIL

Form OGC-5

WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

New Well Work-Over Deepen Plug Back Same Reservoir Different Reservoir Oil Gas Dry

Owner: **Emery Energy, Inc.** Address: **Box 519, Osawatomie, Kansas 66064**

Lease Name: **Jack Beary Lease** Well Number: **D-53**

Location: **738.19 ft. ENL 1762.25 Ft. FEL** Sec. **4** Twp. **46N** Range **33W**

County: **Cass** Permit number (OGC3 number): **20123**

Date spudded: **1-22-81** Date total depth reached: **1-26-81** Date completed, ready to produce: **2-27-81** Elevation (DF, RKB, RT or Gr.) **1066.5** feet Gr. Elevation of casing hd. flange: **Same as sur. ele.**

Total depth: **640** ft. P. B. T. D.: **627.50**

Producing interval (s) for this completion: **567-580** Rotary tools used (interval) From **0** to **T.D.** Drilling Fluid used: **water, air** Cable tools used (interval) From **None** to **None**

Was this well directionally drilled? **no** Was directional survey made? **no** Was copy of directional survey filed? **no** Date filed: **5/25/1981**

Type of electrical or other logs run (list logs filed with the State Geologist): **Gamma Ray, Neutron, CGL** Date filed: **5/25/1981**

CASING RECORD

Purpose	Size hole drilled	Size casing set	Weight (lb ft)	Depth set	Sacks cement	Amt pulled
surface	9 in.	7 in.	35	20.9		
producing	6.25 in.	4 in.	10.6	627.50	70	

TUBING RECORD

LINER RECORD

Size	Depth set	Packer set at	Size	Top	Bottom	Sacks cement	Screen (ft.)
2.375 in.	562 ft.	none ft.	N/A in.	N/A ft.	N/A ft.	N/A	N/A

PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

Number per ft.	Size & type	Depth Interval	Am't. & kind of material used	Depth Interval
1	3 1/2 glass	567-580	water gel	2
			sand 20-40	10
			sand 10-30	20

INITIAL PRODUCTION

Date of first production: **3-4-81** Producing method (indicate if flowing, gas lift or pumping—if pumping, show size & type of pump): **No record-see later production report**

Date of test	Hrs. tested	Choke size	Oil prod. during test	Gas prod. during test	Water prod. during test	Oil gravity
no			bbls.	MCF	bbls.	API (Corr.)

Tubing pressure	Casing pressure	Cal'ed rate of Production per 24 hrs.	Oil	Gas	Water	Gas-oil ratio
			bbls.	MCF	bbls.	

Disposition of gas (state whether vented, used for fuel or sold):
Method of disposal of mud pit contents:

CERTIFICATE: I, the undersigned, state that I am the **Vice-President** of the **Emery Energy, Inc.** (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

Devon M. Hurst
Signature **Devon Hurst**

RECEIVED

JUN 05 1981

MO. OIL & GAS COUNCIL

Remit two copies: one will be returned.

W00005

DETAIL OF FORMATIONS PENETRATED

Formation	Top	Bottom	Description*
PENNSYLVANIAN SYSTEM	0	42	
KANSAS CITY Iola Ls.	42	116	White to light gray limestone
Chanute Sh.			Gray to green shales with gray limestone beds
Cement City Sh.	66	78	Blue, gray limestone
Belton Ss.	98	116	Sandstone
Cherryvale Sh.	116	157	Gray, blue shales
Dennis Ls.			
Winterset Sh.	157	190	Gray, blue coarse limestone
Stark Sh.	190	196	Black, fissile shale
Swope Ls.			
Bethany Falls Ls.	196	217	Gray, fine to coarse limestone
Hush puckney Sh.	217	223	Black, fissile shale
Hertha Ls.	223	233	Gray to blue limestone
PLEASANTON Knobtown Ss.	233	416	Gray, green shales sand
Dawson Coal Hor.	461	466	Black, fissile, slaty shale
HENRIETTA Alamont	416 416	515 433	Gray brown, fine grained limestone with gray shale
Pawnee	433	470	Fine grained, light gray limestone
Peru Ss.	447	451	Sand
Myrick Sta. Ls.	464	470	Gray to brown limestone
Anna Sh.	470	474	Coal to black fissile shale
Fort Scott Englevale Ss.	474 474	515 495	Gray to green shales and limestone Fine to medium grained channel sandstone
CHEROKEE Upper Cherokee	515	---	Gray to dark shales
Upper Squirrel	515	521	Fine to medium grained sandstones
Lower Squirrel	557	582	Fine to medium grained sandstones
Bevier Coal Hor.	---	---	Black coal
Lower Cherokee Burbank Ss. Bartlesville Ss.	582	640 T.D.	Sandstone, irregular Shale, sandy shale, thin sandstone
Core # 1 460-479	XXXXXX	XXXXXX	Englevale 474-495
Core # 2	542.5	562	Lower Squirrel 557-582
Core # 3	562	600	

Core # 4 579-600

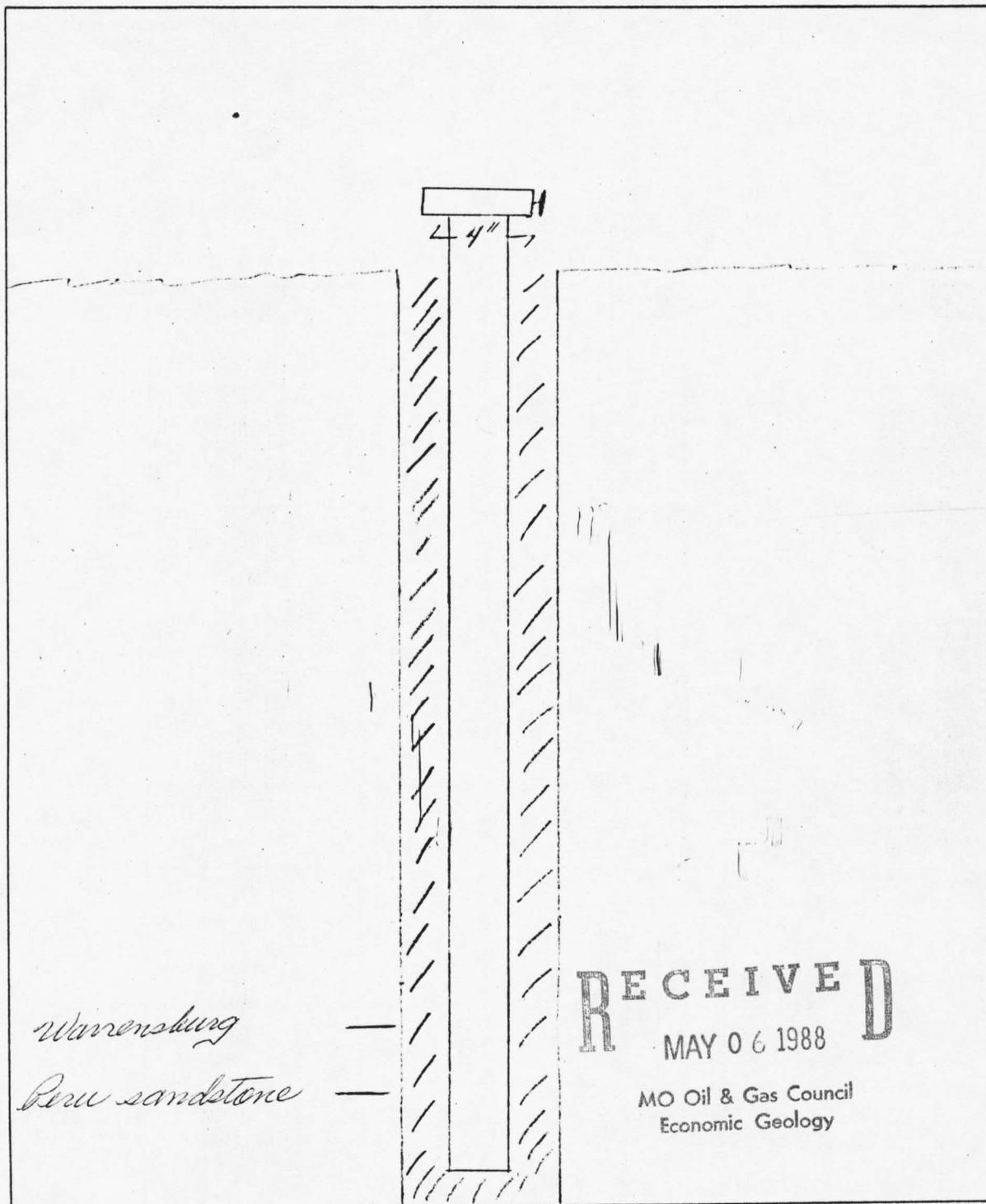
*Show all important zones of porosity, detail of all cores, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

INSTRUCTIONS:

Attach drillers log or other acceptable log of well if available.

Missouri Oil and Gas Council
INJECTION WELL SCHEMATIC

Form OGC-11



Instructions

On the above space draw a neat accurate schematic diagram of the applicant injection well including the following: configuration of well head, total depth or plug back total depth, depth of all injection or disposal intervals, and their formation names, lithology of all formations penetrated, depths of the tops and bottoms of all casing and tubing, size and grade of all casing and tubing, and the type and depth of packer, depth, location, and type of all cement, depth of all perforations and squeeze jobs, and geologic name and depth to bottom of all underground sources of drinking water which may be affected by the injection. Use back if additional space is needed, or attach sheet.

MECHANICAL INTEGRITY TEST REPORT

Test Date: 10 Aug 1993

Operator: Town Oil Co.
Contact Person: Lester Town
Address: 16205 West 287th St. Paola, Ks. 66071
Phone: 913-294-2125

Lease BEARY Well # D-53
County CASS Permit # 20123

TEST INFORMATION:

Type MIT: Pressure Radioactive Tracer Survey Temperature Survey

	<u>Run #1</u>	<u>Run #2</u>	<u>Run #3</u>
Start Time:	<u>5:12</u>	<u> </u>	<u> </u>
End Time:	<u>5:35</u>	<u> </u>	<u> </u>
Length of Test: (Start Time minus End Time)	<u>23</u>	<u> </u>	<u> </u>

Initial Pressure (PSI):	<u>149</u>	<u> </u>	<u> </u>
Ending Pressure (PSI):	<u>139</u>	<u> </u>	<u> </u>
Pressure Change: (Initial Pressure minus Ending Pressure)	<u>10</u>	<u> </u>	<u> </u>

Fluid used for test (water, nitrogen, CO2, ect.): Air & Nitrogen

Comments about test: Perf at 567-590 Fluid Depression Test

The bottom of the tested zone is shut in with Float Shoe & Cement at a depth of 567 ft. In signing the form below, it is certified that the above indicated well was tested for mechanical integrity on the date shown at the top of this page.

Signed: Stelting P. Hamble EOR
Operator Contact Person or Title
Approved Agent

DO NOT WRITE BELOW THIS LINE

Results were: Satisfactory Not Satisfactory
State Agent: E. Ha Witnessed: Yes No

REMARKS: Loss equiv. to 13 PSI / 30 min, which is less than 10% of total pressure initially.

Computer Update FILE WITH PERMIT!

MECHANICAL INTEGRITY TEST REPORT

Test Date: 8-20-98

Operator: TOWN OIL COMPANY
Contact Person: Lester Town
Address: 16205 West 287th St. Paola, Ks. 66071
Phone: 913-294-2125

Lease BEARY Well # 53-D
County CASS Permit # 20123

TEST INFORMATION:

Type MIT: Pressure Radioactive Tracer Survey Temperature Survey

	Run #1	Run #2	Run #3
Start Time:	<u>10:27 am</u>	_____	_____
End Time:	<u>10:59 am</u>	_____	_____

Length of Test: 32 min
(Start Time minus End Time)

Initial Pressure (PSI): 192 #
Ending Pressure (PSI): 180 #

Pressure Change: 12 #
(Initial Pressure minus Ending Pressure)

Fluid used for test (water, nitrogen, CO2, ect.): Air

Comments about test: Top perf. 567', 132' to fluid, 435' total fluid
435 v. 43 = 188 #

The bottom of the tested zone is shut in with float shoe and cement at a depth of 567 ft. In signing the form below, it is certified that the above indicated well was tested for mechanical integrity on the date shown at the top of this page.

Signed: Stefany P. Hameruck EOR
Operator Contact Person or Title
Approved Agent

DO NOT WRITE BELOW THIS LINE

Results were: Satisfactory Not Satisfactory
State Agent: Theodore R. Tuf Witnessed: Yes No

REMARKS: _____
Computer Update gms FILE WITH PERMIT!

MECHANICAL INTEGRITY TEST REPORT

Test Date: 6-11-03

Operator: TOWN OIL COMPANY
Contact Person: Lester Town
Address: 16205 West 287th St. Paola, Ks. 66071
Phone: 913-294-2125

Lease BEARY Well # 53-D
County CASS Permit # 20123

TEST INFORMATION:

Type MIT: Pressure Radioactive Tracer Survey Temperature Survey

	Run #1	Run #2	Run #3
Start Time:	<u>9:33</u>		
End Time:	<u>10:03</u>		

Length of Test: :30
(Start Time minus End Time)

Initial Pressure (PSI): 250
Ending Pressure (PSI): 240

Pressure Change: 10
(Initial Pressure minus Ending Pressure)

Fluid used for test (water, nitrogen, CO2, ect.): Oil

Comments about test: (567)(.433) = 245 #

The bottom of the tested zone is shut in with _____
at a depth of _____ ft. In signing the form below, it is certified
that the above indicated well was tested for mechanical integrity on the
date shown at the top of this page.

Signed: Stacy P. Hambrick EOR
Operator Contact Person or Title
Approved Agent

DO NOT WRITE BELOW THIS LINE

Results were: Satisfactory Not Satisfactory
State Agent: Mark [Signature] Witnessed: Yes No

REMARKS: _____
Computer Update FILE WITH PERMIT!



EMERY ENERGY, INC.

225 North State Street
Salt Lake City, Utah 84103
(801) 531-8770

June 14, 1984

RECEIVED

JUN 22 1984

Missouri Department of Natural Resources
P.O. Box 250
Rolla, MO. 65401
Attn: Mr. Bruce W, Netzler, Geologist

MO. OIL & GAS COUNCIL

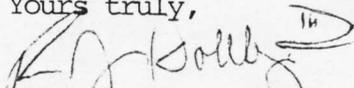
Dear Mr. Netzler,

I am in receipt of your letter requesting an interpretation of the log reports submitted to your office in 1981 by our company covering wells on the Beary Lease, Cass County, Missouri. In 1982-83 we basically shut down our operations in the Kansas/Missouri area and let the people go who were responsible for both the drilling of these wells and the Government reports. I have looked over the logs and our in-house geologist here in Salt Lake has examined it also but we are unable to come up with the answers. The fact is that no one is around who was there to observe the way the formations lay, so I don't know ~~how~~ we can clear up the matter.
how

If 3½ years hadn't passed I'd have confidence that maybe we could tack something down, but now I believe it is too late.

I'm sorry I wasn't able to help you in getting this cleared up. Please feel free to call if you have any other questions.

Yours truly,


Ron J. Hollberg, III
Production Dept.

RJH/rh

PUBLIC NOTICE

Town Oil Company, Rt. 4, Rolla, Kansas 66071 has applied for injection well permits at the following locations:

No.	Distance from North Line of Section	Distance from East Line of Section
53-B	355.73	1762.25
55-B	355.73	1542.25
57-B	357.17	1322.25
53-D	738.19	1762.25
55-D	737.19	1542.25
57-D	741.52	1322.25

born according to law, says that he is the publisher of the Star-Herald, a weekly newspaper of Rolla, Missouri, published continuously for a period of 20 years in Cass County, State aforesaid; and that he is familiar with the provisions of the Laws of the State of Missouri and that the notice hereto annexed was published in the Star-Herald for two weeks consecutively, as follows:

of Section 4, Township 46N, Range 33W, Cass County, Missouri.
 Written comments or requests for additional information regarding such wells should be directed within fifteen (15) days of this notice to: State Geologist, Missouri Oil and Gas Council, P.O. Box 250, Rolla, Missouri 65401.

50 dated 4/28, 1988

April 28, 1988

- 1st insertion Vol. No. dated, 19.....
- 2nd insertion Vol. No. dated, 19.....
- 3rd insertion, Vol. No. dated, 19.....
- 4th insertion, Vol. No. dated, 19.....
- 5th insertion, Vol. No. dated, 19.....
- 6th insertion, Vol. No. dated, 19.....

Printer's Fee, \$ 33.00

Bledsoe

[Signature]
 Publisher

Subscribed and sworn to before me this 28th day of April

19 88

Witness my hand official seal.

RECEIVED
 MAY 06 1988

MO Oil & Gas Council
 Economic Geology

Dora E. Nation
 Notary Public

DORA E. NATION
 Notary Public - State of Missouri
 Commissioned in Cass County
 My Commission Expires May 5, 1989

Probate Judge



MISSOURI DEPARTMENT OF NATURAL RESOURCES
GEOLOGICAL SURVEY PROGRAM
INJECTION WELL MONITORING REPORT

TABLE 200-1

INSTRUCTIONS 1 RECORD INJECTION RATE AND INJECTION PRESSURE AT LEAST MONTHLY WITH THE RESULTS SUBMITTED ANNUALLY.

COUNTY	PERMIT NUMBER	OPERATOR	WELL NUMBER	
	037	Tenn Oil Co.	Beary D-53	
MONTH	INJECTION RATE - bpd/gpm	INJECTION PRESSURE - psig	DATE MEASUREMENT TAKEN	REMARKS
JAN. (01)	90	2100	1-28-06	
FEB. (02)	90		2-28-06	
MARCH (03)	90		3-28-06	
APRIL (04)	90		4-28-06	
MAY (05)	90		5-28-06	
JUNE (06)	90		6-28-06	
JULY (07)	90		7-28-06	
AUG. (08)	90		8-28-06	
SEPT. (09)	90		9-28-06	
OCT. (10)	90		10-28-06	
NOV. (11)	90		11-28-06	
DEC. (12)	90		12-28-06	

RECEIVED

AUG 24 2007

Oil & Gas Count

REPORT SENT TO COMMISSIONER TO GEOLOGICAL SURVEY PROGRAM, P.O. BOX 250, JEFFERSON, MISSOURI 64502, (673) 343-2143

08 11 07



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 GEOLOGICAL SURVEY PROGRAM
 INJECTION WELL MONITORING REPORT

FORM OGC-12

INSTRUCTIONS RECORD INJECTION RATE AND INJECTION PRESSURE AT LEAST MONTHLY WITH THE RESULTS SUBMITTED ANNUALLY.

COUNTY	PERMIT NUMBER	OPERATOR	WELL NUMBER
CASS	20123	TOWN OIL COMPANY	BEARY D-53
MONTH	INJECTION RATE - bpd/gpm	INJECTION PRESSURE - psig	DATE MEASUREMENT TAKEN
(01) JAN.	90	400	1-31-08
(02) FEB.	90	400	2-28-08
(03) MARCH	90	400	3-31-08
(04) APRIL	90	400	4-30-08
(05) MAY	90	400	5-31-08
(06) JUNE	90	400	6-30-08
(07) JULY	90	400	7-31-08
(08) AUG.	90	400	8-31-08
(09) SEPT.	90	400	9-30-08
(10) OCT.	90	400	10-31-08
(11) NOV.	90	400	11-30-08
(12) DEC.	90	400	12-31-08

RECEIVED

JAN 23 2009

Mo Oil & Gas Council

MO 780-0208 (8-08) REMIT TWO (2) COPIES TO: GEOLOGICAL SURVEY PROGRAM, P.O. BOX 250, ROLLA MO 65402, (573) 368-2143
 ONE (1) COPY WILL BE RETURNED



MISSOURI DEPARTMENT OF NATURAL RESOURCES
GEOLOGICAL SURVEY PROGRAM
INJECTION WELL MONITORING REPORT

INSTRUCTIONS		RECORD INJECTION RATE AND INJECTION PRESSURE AT LEAST MONTHLY WITH THE RESULTS SUBMITTED ANNUALLY.		
COUNTY	PERMIT NUMBER	OPERATOR	WELL NUMBER	
CASS	20123	TOWN OIL COMPANY	BEARY D-53	
MONTH	INJECTION RATE - bpd/gpm	INJECTION PRESSURE - psig	DATE MEASUREMENT TAKEN	REMARKS
(01) JAN.	90	400	1-31-09	RECEIVED JAN 25 2010 Mo Oil & Gas Council
(02) FEB.	90	400	2-28-09	
(03) MARCH	90	400	3-31-09	
(04) APRIL	90	400	4-30-09	
(05) MAY	90	400	5-31-09	
(06) JUNE	90	400	6-30-09	
(07) JULY	90	400	7-31-09	
(08) AUG.	90	400	8-31-09	
(09) SEPT.	90	400	9-30-09	
(10) OCT.	90	400	10-31-09	
(11) NOV.	90	400	11-30-09	
(12) DEC.	90	400	12-31-09	

MO 780-0208 (8-06) REMIT TWO (2) COPIES TO: GEOLOGICAL SURVEY PROGRAM, P.O. BOX 280, ROLLA MO 65402, (573) 368-2143
 ONE (1) COPY WILL BE RETURNED