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: Poverty Oil LLC API Number: 15 - 195-22586 - 00 - 00 Mollenkamp Trust A Address: 2713 Ash Street; Hays, KS 67601 Lease Name: Phone: (785 ) 259 -5807 Operator License #: 33933 Well Number: Type of Well: D & A Spot Location (QQQQ): \_\_\_\_ (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR) Feet from North / South Section Line The plugging proposal was approved on:  $\frac{11-27-2008}{}$ (Date) Feet from East / West Section Line by: Case Morris \_\_\_\_ (KCC District Agent's Name) County:\_\_\_ If not, is well log attached? Yes No Is ACO-1 filed? Yes No 11-29-2008 Producing Formation(s): List All (if needed attach another sheet) Date Well Completed: None \_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_ 11-29-2008 Depth to Top: \_\_\_ \_\_ Bottom: \_ Plugging Completed: 11-29-2008 Depth to Top: ... Bottom: T.D. Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Record (Surface Conductor & Production) Formation Content To Put In **Pulled Out** None 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. 1st plug at 1800' with 25 sxs 2nd plug at 750' with 100 sxs 3rd plug at 260' with 40 sxs 4th plug at 40' with 10 sxs, rat hole with 30 sxs, mouse hole 15 sxs Name of Plugging Contractor: Discovery Drilling RECEIVEL KANSAS CORPORATION COMMISSIO Address: Hays, KS 67601 FEB 10 2009 Name of Party Responsible for Pluggling Fees: Poverty Oil LLC State of Kansas CONSERVATION DIVISION WICHITA, KS Ed Glassman (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 and correct, so help me God. DIANA GLASSMAN (Signature) **Notary Public** 2713 Ash Street; Hays, KS 67601 State of Kansas y Commission Expires 1 D and SWORN TO before me this 9th day of February \_\_\_\_\_ My Commission Expires: <u>Accorder</u> 7, 2011

