

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33205  
Name: Poverty Oil Company  
Address: 2713 Ash Street  
City/State/Zip: Hays, KS 67601  
Purchaser: Coffeyville Resources  
Operator Contact Person: Ed Glassman  
Phone: (785) 625-6660  
Contractor: Name: Anderson Drilling  
License: 33237  
Wellsite Geologist: Ed Glassman

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. \_\_\_\_\_

<u>07/14/2006</u>	<u>07/23/2006</u>	<u>08/11/2006</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 163-23545-00-00  
County: Rooks  
Approx. SE NE SW Sec. 19 Twp. 10 S. R. 20  East  West  
1340 feet from (S) N (circle one) Line of Section  
2755 feet from (E) W (circle one) Line of Section

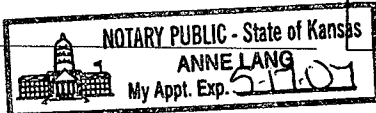
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE (SE) NW SW  
Lease Name: Romine Well #: 1-19  
Field Name: Unknown  
Producing Formation: Arbuckle  
Elevation: Ground: 2108 Kelly Bushing: 2113  
Total Depth: 3780 Plug Back Total Depth: 3754  
Amount of Surface Pipe Set and Cemented at 222 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set 1632 Feet  
If Alternate II completion, cement circulated from 1632  
feet depth to surface w/ 250 11/2-Dlg-11/25/08 sx cmt.

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content 5000 ppm Fluid volume 300 bbls  
Dewatering method used evaporation  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

**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: Edgar J. Glassman  
Title: Geologist Date: 09/06/2006  
Subscribed and sworn to before me this 8th day of September,  
2006.  
Notary Public: Anne Lang  
Date Commission Expires: 5-17-07



**KCC Office Use ONLY**

Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

**RECEIVED**  
**SEP 11 2006**  
**KCC WICHITA**

Operator Name: Poverty Oil Company Lease Name: Romine Well #: 1-19  
 Sec. 19 Twp. 10 S. R. 20  East  West County: Rooks

**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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:  <b>Induction Array, Compensated Density-Neutron,                  Cement Bond, Sonic</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1606</td> <td>(+507)</td> </tr> <tr> <td>Base/Anhydrite</td> <td>1642</td> <td>(+471)</td> </tr> <tr> <td>Topeka</td> <td>3159</td> <td>(-1046)</td> </tr> <tr> <td>Heebner</td> <td>3362</td> <td>(-1249)</td> </tr> <tr> <td>Lansing</td> <td>3402</td> <td>(-1289)</td> </tr> <tr> <td>Base/Kansas City</td> <td>3620</td> <td>(-1507)</td> </tr> <tr> <td>Conglomerate</td> <td>3679</td> <td>(-1566)</td> </tr> <tr> <td>Arbuckle</td> <td>3702</td> <td>(-1589)</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Anhydrite	1606	(+507)	Base/Anhydrite	1642	(+471)	Topeka	3159	(-1046)	Heebner	3362	(-1249)	Lansing	3402	(-1289)	Base/Kansas City	3620	(-1507)	Conglomerate	3679	(-1566)	Arbuckle	3702	(-1589)
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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	12 1/4"	8 5/8 "	20 LB	222'	COM	150	3% CC, 2% Gel
Production	7 7/8 "	5 1/2 "	15 1/2 LB	3779'	ASC	160	2% Gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Surface/1632'	60/40 Poz	250	6% Gel, 1/4# flo seal

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	
			Depth
4 SPF	3728 - 3730	250 gal 15% MCA	3728-3730
4 SPF	3735 - 3736.5	250 gal 15% MCA	3735-3736.5
4 SPF	3742 - 3744	250 gal 15% MCA	3742-3744

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 7/8"	3744'	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 08/11/2006			Producing Method <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
	70	None	17		38

Disposition of Gas      METHOD OF COMPLETION      Production Interval

Vented    Sold    Used on Lease    Open Hole    Perf.    Dually Comp.    Commingled  
*(If vented, Submit ACO-18.)*    Other (Specify) \_\_\_\_\_

# ALLIED CEMENTING CO., INC.

P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT: \_\_\_\_\_

27908

R

DATE <u>7/15/06</u>	SEC. <u>19</u>	TWP. <u>10S</u>	RANGE <u>20W</u>	CALLED OUT	ON LOCATION <u>8:45 A.M.</u>	JOB START	JOB FINISH <u>9:30 A.M.</u>	
LEASE <u>ROMENE</u>		WELL # <u>1-19</u>	LOCATION <u>ELLIS N TO Co. LINE</u>			COUNTY <u>ROCKS</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		<u>2 N &amp; CC RD 1 1/2 W N 10</u>						

CONTRACTOR A & A

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4" T.D. 222'

CASING SIZE 8 7/8" DEPTH 222'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 10'

PERFS. \_\_\_\_\_

DISPLACEMENT 13 1/2 Bbl

OWNER \_\_\_\_\_

CEMENT

AMOUNT ORDERED 150 COM 3-2

COMMON	<u>150</u>	@	<u>1065</u>	<u>159750</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>1665</u>	<u>4995</u>
CHLORIDE	<u>5</u>	@	<u>4660</u>	<u>23300</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>158</u>	@	<u>190</u>	<u>30020</u>
MILEAGE	<u>84 / SK / MILE</u>			<u>75840</u>
<b>RECEIVED</b>				TOTAL <u>293910</u>

EQUIPMENT

PUMP TRUCK CEMENTER PAUL

# 409 HELPER CRAIG

BULK TRUCK

# 345 DRIVER DOUG

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

CEMENT CIRCULATED

PLUG DOWN 9:30 AM

CHARGE TO: POVERTY OIL CO.

STREET 2723 ASH ST.

CITY HAYS STATE KS ZIP 67601

SEP 11 2006

**KCC WICHITA** SERVICE

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE 81500

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE 60 @ 500 30000

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

TOTAL 115000

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL \_\_\_\_\_

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE [Signature]

PRINTED NAME \_\_\_\_\_

# ALLIED CEMENTING CO., INC.

27918

SERVICE POINT: R

TO P.O. BOX 31  
RUSSELL, KANSAS 67665

DATE <u>7/23/06</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>5:30 P.M.</u>	JOB START	JOB FINISH <u>2:45 P.M.</u>
LEASE <u>ROMIWE</u>	WELL # <u>1-16</u>	LOCATION <u>PALCO S. to C.C. RD</u>			COUNTY <u>Rooks</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)				<u>1 1/2 W N 20 T 10</u>			

CONTRACTOR AAA #1

TYPE OF JOB LONGSTRUNG

HOLE SIZE 2 7/8" T.D. 3780'

CASING SIZE 5 1/2" 15.5# DEPTH 3780'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL PORT COLLAR DEPTH 1632'

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT 20.52

CEMENT LEFT IN CSG. 20.52'

PERFS. \_\_\_\_\_

DISPLACEMENT 89 1/2 BBL

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED 125 ASC 2% GEL

500 GAL. WFR-2

COMMON _____	@ _____	_____
POZMIX _____	@ _____	_____
GEL _____	@ <u>3</u>	<u>36.5</u> <u>49.95</u>
CHLORIDE _____	@ _____	_____
ASC _____	@ <u>175</u>	<u>1310</u> <u>2292.50</u>
WFR-2 _____	@ <u>500 gals</u>	<u>1.00</u> <u>500.00</u>
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
HANDLING <u>178</u>	@ <u>1.90</u>	<u>338.20</u>
MILEAGE <u>84/sk/mile</u>	@ _____	<u>854.40</u>
TOTAL		<u>4035.05</u>

EQUIPMENT

PUMP TRUCK CEMENTER PAUL

# 409 HELPER CRAGG

BULK TRUCK

# 345 DRIVER BOB

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

500 GAL. WFR-2, FOUNDED BY 1100 SX ASC.

PLUG LANDED. FLOAT WELD!

PLUG DOWN @ 2:45 P.M.

RAT HOLE 15 SX

SERVICE

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_ 1610.00

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE 60 @ 5.00 300.00

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

RECEIVED

SEP 11 2006

KCC WICHITA

TOTAL 1910.00

PLUG & FLOAT EQUIPMENT

5 1/2"

GUIDE SHOE _____	@ _____	<u>160.00</u>
APU INSERT _____	@ _____	<u>250.00</u>
PORT COLLAR _____	@ _____	<u>1750.00</u>
CENTRALISER <u>5</u>	@ <u>50.00</u>	<u>250.00</u>
BASKET <u>1</u>	@ <u>150.00</u>	<u>150.00</u>
RUBBER PLUG _____	@ _____	<u>65.00</u>
TOTAL		<u>2775.00</u>

CHARGE TO: POVERTY OIL CO.

STREET 2713 Ash St.

CITY Hays STATE KS ZIP 67601

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SIGNATURE \_\_\_\_\_

*[Signature]*

PRINTED NAME \_\_\_\_\_

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DA

# ALLIED CEMENTING CO., INC.

27959

TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

*Russell*

DATE <i>8-10-6</i>	SEC. <i>19</i>	TWP. <i>10</i>	RANGE <i>10</i>	CALLED OUT <i>7:00 Am</i>	ON LOCATION <i>9:00 Am</i>	JOB START	JOB FINISH <i>1:17 PM</i>
LEASE <i>Remine</i>	WELL # <i>1</i>	LOCATION <i>Palco SS 2nd Ninto</i>			COUNTY <i>Roos</i>	STATE <i>Ks</i>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR *Ultimate well service*

TYPE OF JOB *Port collar*

HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_

CASING SIZE *5 1/2* DEPTH \_\_\_\_\_

TUBING SIZE *2 7/8* DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED \_\_\_\_\_

*3500 lb 6x40-6 1/2 # F10*

*USE 2 250 lb*

COMMON	<i>150</i>	@	<i>10 65</i>	<i>1597 50</i>
POZMIX	<i>100</i>	@	<i>5 80</i>	<i>580 00</i>
GEL	<i>13</i>	@	<i>16 65</i>	<i>216 45</i>
CHLORIDE		@		
ASC		@		
<i>Flo-sol</i>	<i>63 #</i>	@	<i>2 00</i>	<i>126 00</i>
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>368</i>	@	<i>1 40</i>	<i>699 20</i>
MILEAGE	<i>9 1/2 SK/ mile</i>			<i>1987 20</i>
				TOTAL <i>5206 35</i>

**EQUIPMENT**

PUMP TRUCK CEMENTER *Bill*

# HELPER *Craig*

BULK TRUCK DRIVER *Bob*

# DRIVER \_\_\_\_\_

**REMARKS:**

*BP. e 3200' Test e 1000'*

*Port collar e*

*Open Tool Est. Circ.*

*Cement w/ 250 lb cement*

*Cement did Circ*

*Ran 5 hrs wash clean*

**SERVICE**

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_ *955 00*

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE *60* @ *6 00* *360 00*

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL *1315 00*

CHARGE TO: *Proverty oil*

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

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TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE *John L. Schneider*

PRINTED NAME \_\_\_\_\_