

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

10/9/10

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33933

Name: Poverty Oil LLC

Address 1: 2713 Ash Street

Address 2: _____

City: Hays State: KS Zip: 67601 + _____

Contact Person: Ed Glassman

Phone: (785) 259-5807

CONTRACTOR: License # 31548

Name: Discovery Drilling Co., Inc.

Wellsite Geologist: Ed Glassman

Purchaser: None

Designate Type of Completion:

- New Well _____ Re-Entry _____ Workover
 - _____ Oil _____ SWD _____ SLOW
 - _____ Gas _____ ENHR _____ SIGW
 - _____ CM (Coal Bed Methane) _____ Temp. Abd.
 - 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. _____ Conv. to SWD

_____ Plug Back: _____ Plug Back Total Depth

_____ Commingled Docket No.: _____

_____ Dual Completion Docket No.: _____

_____ Other (SWD or Enhr.?) Docket No.: _____

<u>09/14/2009</u>	<u>09/19/2009</u>	<u>09/20/2009</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23568-00-00

Spot Description: 140' S. & 143' W.

SW NE SE SW Sec. 19 Twp. 9 S. R. 25 East West

850' Feet from North / South Line of Section

3113' Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Graham

Lease Name: Popp Well #: 1

Field Name: Corke Southeast

Producing Formation: None

Elevation: Ground: 2606 Kelly Bushing: 2614

Total Depth: 4160 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 222.82' 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/ _____ ^{sk cmt.}

PA-Dlg - 10/14/09

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 15,000 ppm Fluid volume: 240 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: Ed Glassman

Title: Geologist/Owner Date: 10/09/2009

Subscribed and sworn to before me this 9th day of October

2009

Notary Public: Diana Glassman

Date Commission Expires: December 7, 2011

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

DIANA GLASSMAN Geologist
Notary Public
State of Kansas
My Commission Expires 12-7-11