

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**

Form ACO-1
September 1999
Form Must Be Typed

**WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 32754
 Name: Elysium Energy, L.L.C.
 Address: 1625 Broadway, Suite 2000
 City/State/Zip: Denver, CO 80202
 Purchaser: NCRA
 Operator Contact Person: Chris Gottschalk
 Phone: (785) 434-4638
 Contractor: Name: Discovery Drilling Co., Inc.
 License: 31548
 Wellsite Geologist: Ron Nelson

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>11-15-02</u>	<u>11-19-02</u>	<u>12-9-02</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 163-23363-0000
 County: Rooks
SE SW NE Sec. 2 Twp. 9 S. R. 19 East West
2310 feet from S / (circle one) Line of Section
1650 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Slansky Well #: 14

Field Name: Barry
 Producing Formation: Arbuckle

Elevation: Ground: 2000' Kelly Bushing: 2008'
 Total Depth: 3455' Plug Back Total Depth: 3448'
 Amount of Surface Pipe Set and Cemented at 221 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 3450
 feet depth to surface w/ 525 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 20,000 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: _____

Title: Regulatory Engineer Date: 2/28/03

Subscribed and sworn to before me this 3rd day of March, 2003

Notary Public: Stephanum M. Gomes

Date Commission Expires: 9/20/03

KCC Office Use ONLY

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

Operator Name: Elysium Energy, L.L.C. Lease Name: Slansky Well #: 14

Sec. 2 Twp. 9 S. R. 19 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 type="checkbox"/> Yes <input checked="" 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: GR/Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Topeka</td> <td>2932'</td> <td>-924</td> </tr> <tr> <td>Toronto</td> <td>3154'</td> <td>-1146</td> </tr> <tr> <td>Lansing</td> <td>3173'</td> <td>-1165</td> </tr> <tr> <td>B/KC</td> <td>3394'</td> <td>-1386</td> </tr> <tr> <td>Arbuckle</td> <td>3422'</td> <td>-1414</td> </tr> </table>	Name	Top	Datum	Topeka	2932'	-924	Toronto	3154'	-1146	Lansing	3173'	-1165	B/KC	3394'	-1386	Arbuckle	3422'	-1414
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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"	23	221'	Common	150	2%gel,3%CCI
Production	7-7/8"	5-1/2"	15.5	3450'	SMDC	525	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
4	3416-20', 3422-29'		

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		2-7/8"	3436'				
Date of First, Resumed Production, SWD or Enhr.			Producing Method				
12-9-02			<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		
	46		71				

Disposition of Gas: Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: 3416-29'

(If vented, Sumit ACO-18.)