

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 32754
Name: Elysium Energy, L.L.C.
Address: 1625 Broadway, Suite 2000 **SWNWSE**
City/State/Zip: Denver, CO 80202
Purchaser: NCRA
Operator Contact Person: Chris Gottschalk
Phone: (785) 434-4638
Contractor: Name: Express Well Service
License: _____
Wellsite Geologist: NA

API No. 15 - 065-22,845-0001
County: Graham
Sec. 15 Twp. 9 S. R. 21 East West
1650 feet from 3 / N (circle one) Line of Section
2310 feet from 6 / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE **SE** NW SW
Lease Name: Morel J Well #: 7
Field Name: Morel

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

**RECEIVED
6/12/03
JUN 12 2003
KCC WICHITA**

Producing Formation: Arbuckle
Elevation: Ground: 2219' Kelly Bushing: 2227'
Total Depth: 3748' Plug Back Total Depth: 3748'
Amount of Surface Pipe Set and Cemented at 211' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet

If Workover/Re-entry: Old Well Info as follows:
Operator: Elysium Energy, L.L.C.
Well Name: Morel J #7
Original Comp. Date: 7-28-02 Original Total Depth: 3748'
 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. _____

If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

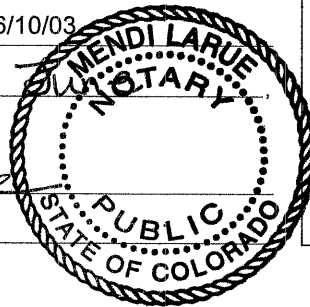
<u>1-24-03</u>	<u>2-17-03</u>
Spud Date or Recompletion Date	Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan ALL 11 WELLS 6.19.03
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
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: [Signature]
Title: Regulatory Engineer Date: 6/10/03
Subscribed and sworn to before me this 10 day of JUNE 2003
Notary Public: Mendi Larue
Date Commission Expires: 8/26/06



KCC Office Use ONLY

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

My Commission Expires 8/26/2006

Operator Name: Elysium Energy, L.L.C. Lease Name: Morel J Well #: 7
 Sec. 15 Twp. 9 S. R. 21 East West County: Graham

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 Yes No
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy)

List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

CASING RECORD <input 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

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
		4014 barrels polymer gel	3718-24'
		1500 gal 15% NE Acid	3718-24'

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-7/8"	3656'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 2-15-03			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
	17		178		

Disposition of Gas Vented Sold Used on Lease *(if vented, Sumit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval 3718'-24'