

ORIGINAL 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

RECEIVED

SEP 27 2004

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 SIOW 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. _____
4/14/04 4/18/04 4/18/04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

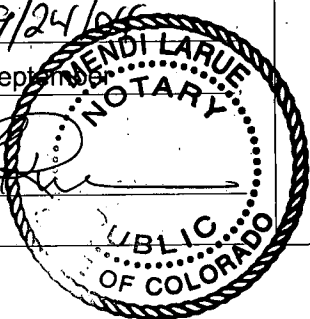
API No. 15 - 065-22971-0000
County: Graham **KCC WICHITA**
SW NW NW Sec. 2 Twp. 10 S. R. 21 East West
990 feet from S / (circle one) Line of Section
330 feet from E / (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE **NW** SW
Lease Name: Noah Well #: 9
Field Name: Cooper
Producing Formation: NA
Elevation: Ground: 2280' Kelly Bushing: 2288'
Total Depth: 3900' Plug Back Total Depth: D&A
Amount of Surface Pipe Set and Cemented at 212 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/ _____ sx cmt.

Drilling Fluid Management Plan *PJA KJR 6/14/07*
(Data must be collected from the Reserve Pit)
Chloride content 16,000 ppm Fluid volume 310 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: [Signature]
Title: Regulatory Engineer Date: 9/24/04
Subscribed and sworn to before me this 24th day of September
2004
Notary Public: [Signature]
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: Noah Well #: 9
 Sec: 2 Twp. 10 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 <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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Geologic Report Log	<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>Base Anhydrite</td> <td>1798'</td> <td>+490</td> </tr> <tr> <td>Topeka</td> <td>3275'</td> <td>-987</td> </tr> <tr> <td>Toronto</td> <td>3513'</td> <td>-1225</td> </tr> <tr> <td>LKC</td> <td>3526'</td> <td>-1238</td> </tr> <tr> <td>Arbuckle</td> <td>3875'</td> <td>-1587</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Base Anhydrite	1798'	+490	Topeka	3275'	-987	Toronto	3513'	-1225	LKC	3526'	-1238	Arbuckle	3875'	-1587
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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	212'	Common	150	2%gel,3%CC

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 (Amount and Kind of Material Used)	Depth
	1st Plug @ 3850' w/25 sx 60/40 Poz, 6% gel		
	2nd Plug @ 1800' w/25 sx		
	3rd Plug @ 1000' w/100 sx		
	4th Plug @ 275' w/40 sx		
	5th Plug @ 40' w/10 sx, 10 sx mouse, 15 sx rat		

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TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease
 Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.)
 Other (Specify) _____

ALLIED CEMENTING CO., INC. 12156

~~Federal Tax ID # 17-000~~

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Oakley

DATE <i>H-14-04</i>	SEC. <i>2</i>	TWP. <i>N3</i>	RANGE <i>21w</i>	CALLED OUT	ON LOCATION <i>2:30 PM</i>	JOB START <i>3:10 PM</i>	JOB FINISH <i>3:30 PM</i>
LEASE <i>Noah</i>	WELL# <i>9</i>	LOCATION <i>Church of God 1/2 S E/S</i>			COUNTY <i>Graham</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one)							

CONTRACTOR <i>Discovery Drilling Rig 1</i>		OWNER <i>Some</i>
TYPE OF JOB		
HOLE SIZE <i>12 1/4</i>	T.D. <i>223'</i>	CEMENT
CASING SIZE <i>9 5/8</i>	DEPTH <i>222'</i>	AMOUNT ORDERED
TUBING SIZE	DEPTH	<i>1505ks Low 390 CC 2 1/2 Gal</i>
DRILL PIPE	DEPTH	
TOOL	DEPTH	
PRES. MAX	MINIMUM	COMMON _____ @ _____
MEAS. LINE	SHOE JOINT	POZMIX _____ @ _____
CEMENT LEFT IN CSG. <i>15'</i>		GEL _____ @ _____
PERFS:		CHLORIDE _____ @ _____
DISPLACEMENT <i>13 1/2 Bbls</i>		_____ @ _____
EQUIPMENT		
PUMP TRUCK	CEMENTER <i>Dean</i>	_____ @ _____
# <i>373-281</i>	HELPER <i>Fuzzy</i>	_____ @ _____
BULK TRUCK		_____ @ _____
# <i>212</i>	DRIVER <i>Mike</i>	_____ @ _____
BULK TRUCK		_____ @ _____
#	DRIVER	_____ @ _____
		HANDLING _____ @ _____
		MILEAGE _____ @ _____
		TOTAL _____

REMARKS:	SERVICE
<i>Cement did circulate</i>	DEPTH OF JOB _____
	PUMP TRUCK CHARGE _____
	EXTRA FOOTAGE _____ @ _____
	MILEAGE _____ @ _____
	PLUG <i>8 5/8 surface</i> _____ @ _____
	_____ @ _____
	_____ @ _____
	TOTAL _____

CHARGE TO: *Elysium Energy LLC*

STREET _____

CITY _____ STATE _____ ZIP _____

<p>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.</p>	<p>_____ @ _____</p> <p>_____ @ _____</p> <p>_____ @ _____</p> <p>_____ @ _____</p> <p>_____ @ _____</p> <p>TOTAL _____</p>
--	---

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE *Syl Rome*

PRINTED NAME _____

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KCC WICHITA

ALLIED CEMENTING CO., INC.

15584

Federal Tax ID # 20-0000000

REMIT TO: P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

DATE 4/18/04 SEC. _____ TWP. _____ RANGE _____ CALLED OUT _____ ON LOCATION _____

LEASE Noah WELL# 9 LOCATION Manitou God 1 1/2 S COUNTY Osage STATE KS

OLD OR NEW (Circle one) NEW ES

CONTRACTOR Discovery Drilling Rig OWNER _____

TYPE OF JOB plug

HOLE SIZE 17 1/2 T.D. 3900 CEMENT AMOUNT ORDERED 225 lbs Flowseal per ft

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

EQUIPMENT

PUMP TRUCK # 366 CEMENTER Dave

BULK TRUCK # _____ DRIVER _____

BULK TRUCK # 213 DRIVER Craig

CEMENTER HELPER Shane

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

REMARKS:

25 sk @ 3850

25 @ 1800

100 @ 1000

40 @ 275

10 @ 40 w/c plug

10 mouse +

15 Rat hole

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG plug _____ @ _____

TOTAL _____

CHARGE TO: Elysium Energy LLC

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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SIGNATURE _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

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Elysium Energy, LLC

Noah #9

Plugging Orders & Herb Deines

1 st Plug @	3850	'	w/	25	Skts	6 th Skts
2 nd Plug @	1800	'	w/	25	Skts	Middle of 29 th Skts
3 rd Plug @	1000	'	w/	100	Skts	Bottom of 16 th Skts
4 th Plug @	275	'	w/	40	Skts	Middle of 5 th Skts
5 th Plug @	40	'	w/	10	Skts	Middle of 1 st Skts

(10 Skts in Mouse Hole) (25 Skts in Rat Hole)

Total 225 Skts 60/40 Poz 6% Gel w/ 1/4" CF/Sk

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