

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

ORIGINAL

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

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JUN 01 2005
CONSERVATION DIVISION
WICHITA, KS

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>2/22/05</u>	<u>2/26/05</u>	<u>3/15/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25396-0000
County: Ellis
W2 Sec. 27 Twp. 11 S. R. 17 East West
2550 feet from S / W (circle one) Line of Section
1360 feet from E / W (circle one) Line of Section

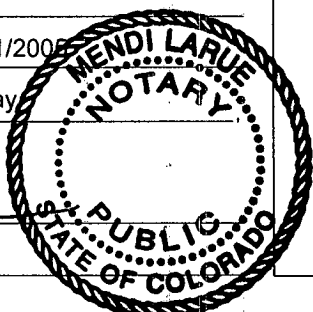
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Baumer "B" Well #: 54
Field Name: Bemis-Shutts
Producing Formation: Arbuckle
Elevation: Ground: 2023' Kelly Bushing: 2031'
Total Depth: 3565' Plug Back Total Depth: 3545'
Amount of Surface Pipe Set and Cemented at 212.9 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 3562
feet depth to surface w/ 500 sx cmt.

Drilling Fluid Management Plan AH II NCR 8-5-08
(Data must be collected from the Reserve Pit)
Chloride content 14000 ppm Fluid volume 320 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: 5/31/2005
Subscribed and sworn to before me this 31st day of May
2005
Notary Public: [Signature]
Date Commission Expires: 8/26/06



KCC Office Use ONLY
NO Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

My Commission Expires 8/26/2008

Operator Name: Elysium Energy, L.L.C. Lease Name: Baumer "B" Well #: 54
 Sec. 27 Twp. 11 S. R. 17 East West County: Ellis

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: Sonic, Induction, Micro, CNL/CDL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Top Anhydrite</td> <td>1242</td> <td>+789</td> </tr> <tr> <td>Topeka</td> <td>2949</td> <td>-918</td> </tr> <tr> <td>Toronto</td> <td>3204</td> <td>-1173</td> </tr> <tr> <td>LKC</td> <td>3229</td> <td>-1198</td> </tr> <tr> <td>Arbuckle</td> <td>3505</td> <td>-1474</td> </tr> </table>	Name	Top	Datum	Top Anhydrite	1242	+789	Topeka	2949	-918	Toronto	3204	-1173	LKC	3229	-1198	Arbuckle	3505	-1474
Name	Top	Datum																	
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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	212.9	Common	160	2% gel, 3%CC
Production	7-7/8"	5-1/2"	15.5	3562	SMDC	360	11.2 ppg
						150	14 ppg

ADDITIONAL CEMENTING / SQUEEZE RECORD Cement did circulate				
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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	3519-22'		
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TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
	2-7/8"	3513'		
Date of First, Resumed Production, SWD or Enhr.		Producing Method		
3/15/2005		<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
	2		193	

Disposition of Gas	METHOD OF COMPLETION
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(if vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <u>3519-3522'</u> <input type="checkbox"/> Other (Specify) _____

ALLIED CEMENTING CO., INC. ORIGINAL 18661

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

SERVICE POINT: OR

DATE <u>2-22-05</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Boumgar</u>	WELL # <u>54</u>	LOCATION <u>Cotnam 2E 10N 1W</u>			COUNTY <u>Ellis</u>	STATE <u>Ks</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Discovery #1

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 213

CASING SIZE 6 5/8 DEPTH 212

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 10' 15"

PERFS. _____

DISPLACEMENT 23# 13 BBL

EQUIPMENT

345 _____ Dave

PUMP TRUCK CEMENTER _____ Steve

HELPER _____

BULK TRUCK _____

DRIVER _____

BULK TRUCK _____

222 DRIVER Gay

REMARKS:

As per C

CHARGE TO Elysium Energy LLC

STREET _____

CITY _____ STATE _____ ZIP _____

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 Thomas ALM

OWNER _____

CEMENT AMOUNT ORDERED 160 COM 312

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

E & Woodson

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Thomas ALM

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 JUN 11 2005
 CONSERVATION DIVISION
 WICHITA KS



CHARGE TO: Elysium Energy
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET
 NO 7711

PAGE 1 OF 1

SERVICE LOCATIONS: 1. MASS
 2. Ness City
 3.
 4.
 REFERRAL LOCATION:

WELL/PROJECT NO.: 451
 LEASE: Bourne
 COUNTY/PARISH: Ellis
 STATE: KS
 CITY:
 DATE: 02-27-05
 OWNER:

TICKET TYPE: SERVICE SALES
 CONTRACTOR:
 RIG NAME/NO.: Discovery Drk R₁₅E 1
 SHIPPED VIA: C.T.
 DELIVERED TO: 10th & Washington Catherine
 ORDER NO.:

WELL TYPE: 0.1
 WELL CATEGORY: Develop
 JOB PURPOSE: 5/2 Long String
 WELL PERMIT NO.:
 WELL LOCATION:

INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF			UM		UM			
575		1			MILEAGE #105	35	mi			3.00	10.5	00
578		1			Pump Service	1	ec			1250.00	1250	00
298		1			D.A.	2	scf			8.00	16	00
402		1			Controlizers	4	ec	5 1/2	in	55.00	220	00
403		1			Baskets	4	ec	5 1/2	in	140.00	560	00
406		1			Latch Down Pump B-55	1	ec	5 1/2	in	200.00	200	00
407		1			Ingenit Flood Sine w/ Auto Fill	1	ec	5 1/2	in	230.00	230	00
335		2			SMO Cement	525	SBS			10.25	5381	25
276		2			Floate	131	lbs			1.00	131	00
581		2			Service Charge CRT	525	SBS			1.10	577	50
583		2			Drayage	917.4	Tm			.90	825	66

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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: 02-27-05 TIME SIGNED: 1200
 A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				9,496 41
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				

ORIGINAL

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: D. Smith APPROVAL:

Thank You!