

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

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

If Workover/Re-entry: Old Well Info as follows: AUG 05 2003

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>3/10/03</u>	<u>3/14/03</u>	<u>4/30/03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25198-0000  
County: Ellis  
E/2 E/2 SW Sec. 27 Twp. 11 S. R. 17  East  West  
1320 feet from ⊙ / N (circle one) Line of Section  
2310 feet from E / ⊙ (circle one) Line of Section

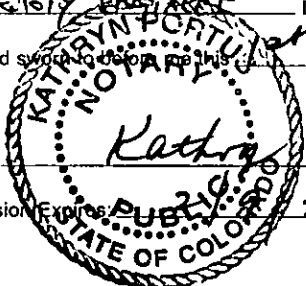
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW ⊙ SW  
Lease Name: Baumer B Well #: 47  
Field Name: Bemis-Shutts  
Producing Formation: Arbuckle  
Elevation: Ground: 2102' Kelly Bushing: 2110'  
Total Depth: 3650' Plug Back Total Depth: 3644'  
Amount of Surface Pipe Set and Cemented at 217 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from 3650  
feet depth to surface w/ 500 sx cmt.

Drilling Fluid Management Plan All in one 14.03  
(Data must be collected from the Reserve Pit)  
Chloride content 9500 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: \_\_\_\_\_  
Title: Regulatory Engineer Date: \_\_\_\_\_  
Subscribed and sworn to before me this August day of 2003.  
Notary Public: Kathryn Parker  
Date Commission Expires: 2005



**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: Baumer B Well #: 47  
 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:  CBL, Micro, Induction, Sonic, CNL/CDL	<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>Top Anhydrite</td> <td>1318</td> <td>+792</td> </tr> <tr> <td>Topeka</td> <td>3030</td> <td>-920</td> </tr> <tr> <td>Toronto</td> <td>3286</td> <td>-1176</td> </tr> <tr> <td>LKC</td> <td>3312</td> <td>-1202</td> </tr> <tr> <td>Arbuckle</td> <td>3578</td> <td>-1468</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Top Anhydrite	1318	+792	Topeka	3030	-920	Toronto	3286	-1176	LKC	3312	-1202	Arbuckle	3578	-1468
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LKC	3312	-1202																				
Arbuckle	3578	-1468																				

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	217	Common	450	2% gel, 3%CC
Production	7-7/8"	5-1/2"	17	3647.66	SMDC	350	11.2 ppg
						150	14 ppg

ADDITIONAL CEMENTING / SQUEEZE RECORD <span style="float: right;">Cement did circulate</span>				
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 <i>(Amount and Kind of Material Used)</i>	Depth
4	3632-3634'	CIBP @ 3628'	<b>RECEIVED</b> <b>KANSAS CORPORATION COMMISSION</b>  <b>AUG 05 2003</b>  <b>CONSERVATION DIVISION</b> <b>WICHITA, KS</b>	
4	3620-3623'	CIBP @ 3610'		
4	3590-3592'			
4	3580-3583'			

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
		2-7/8"	3546'			
Date of First, Resumed Production, SWD or Enhr.			Producing Method			
4/1/03			<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.
	23				367	
		Gas-Oil Ratio		Gravity		

Disposition of Gas		METHOD OF COMPLETION		Production Interval	
<input type="checkbox"/> Vented	<input type="checkbox"/> Sold	<input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole	<input checked="" type="checkbox"/> Perf.	<input type="checkbox"/> Dually Comp.
<i>(If vented, Sumit ACO-18.)</i>			<input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Commingled <u>3580-83', 3590-92'</u>	



CHARGE TO: *Elysium Energy*  
 ADDRESS:  
 CITY, STATE, ZIP CODE: *Plainville KS*

TICKET No 5216

PAGE 1 OF

1. SERVICE LOCATIONS <i>HAYS KS</i>	WELL/PROJECT NO. <i>P-47</i>	LEASE <i>Bauman</i>	COUNTY/PARISH <i>Edis</i>	STATE <i>KS</i>	CITY	DATE <i>3-15-03</i>	OWNER <i>SARE</i>
2. TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR		RIG NAME/NO. <i>Discovery</i>	SHIPPED VIA <i>154</i>	DELIVERED TO <i>N.E. Hays</i>	ORDER NO.	
3. WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>L/S</i>		WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>575</i>					MILEAGE <i>104</i>	<i>23</i>	<i>mi</i>			<i>2.50</i>	<i>75.00</i>
<i>578</i>					<i>Pump change</i>	<i>1</i>	<i>EA</i>	<i>3650</i>	<i>FT</i>		<i>1200.00</i>
<i>400</i>					<i>Guided hole</i>	<i>1</i>	<i>EA</i>	<i>5 1/2</i>	<i>IN</i>		<i>100.00</i>
<i>401</i>					<i>Install Lost valve</i>	<i>1</i>	<i>EA</i>				<i>125.00</i>
<i>402</i>					<i>Drill pipe</i>	<i>4</i>	<i>EA</i>			<i>40.00</i>	<i>176.00</i>
<i>403</i>					<i>CMT Pipe</i>	<i>4</i>	<i>EA</i>			<i>125.00</i>	<i>500.00</i>
<i>410</i>					<i>TOP Plug</i>	<i>1</i>	<i>EA</i>				<i>50.00</i>
<i>231</i>					<i>mud Flush</i>	<i>500</i>	<i>Gal</i>			<i>60</i>	<i>300.00</i>
					<i>Liquid KCL</i>	<i>1</i>	<i>EA</i>				<i>17.00</i>
					<i>from Conservation</i>						<i>6767.14</i>

RECEIVED  
 KANSAS CORPORATION COMMISSION  
 AUG 05 2003  
 CONSERVATION DIVISION  
 WICHITA, KS

**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

X *Dawn A. ...*

DATE SIGNED *3-15-03* TIME SIGNED *3:00*

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
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	<i>6767.14</i>
TAX	
TOTAL	<i>6767.14</i>

ORIGINAL

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

SWIFT OPERATOR *...* APPROVAL

Thank You!



PO Box 466  
Ness City, KS 67560  
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 5216

CUSTOMER Esyrium Energy WELL WELL 2-47 DATE 8-5-03 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF									
330						SMD Cement	525	SKS			9.75	5118.75	
276						Block	130	lbs			1.90	117.00	
290						D-AIR	123	lbs			2.75	338.25	
RECEIVED KANSAS CORPORATION COMMISSION AUG 05 2003 CONSERVATION DIVISION WICHITA KS													
531						SERVICE CHARGE	CUBIC FEET		525			525.00	
523						MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	30	TON MILES	736.05	8.2	662.14

ORIGINAL

CONTINUATION TOTAL 1777.14

**JOB LOG**

**SWIFT Services, Inc.**

**ORIGINAL**

DATE 3-15-03 PAGE NO. 1

CUSTOMER Elysium Energy WELL NO. B-47 LEASE Conner JOB TYPE 1/5 TICKET NO. 5216

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1445							on case TO 3650
	1450							ST 5 1/2 CSC 15.5"
								Run Guide shoe, insert float valve
								Port. on Pallets 3, 5, 7, 9
								Pallets on Top of 1, 2, 10, 50
	1630							CS on bottom hook up & circ
	1715							Annul @ 2.115
								Plug Pothole w/ 15 SKS CMT
								Plug Monochine w/ 10 SKS CMT
	1720	6	12 BBL				300	Plugs 1.2 PCC mud flush
			10 BBL					10 BCC Closer w/ 10
			200 BBL					350 SKS 3MB w/ 1/4" Flex in 1/4" 1/4"
								mix at 11.2 1/4" 1/4"
			42 BBL					150 SKS 3MB 1/4" Flex in 1/4" 1/4" O-A
								mix at 14 1/4" 1/4"
								Annul Mix CMT wash out PCC
	1817	5						Base Top Plug & ST Disp
	1840	3	86.50 BBL				1500	Plug Down
								Base float 1.50
								Port 150 circ to Pit approx 3550
	1900							Sub Complete

RECEIVED  
 KANSAS CORPORATION COMMISSION  
 AUG 05 2003  
 CONSERVATION DIVISION  
 WICHITA, KS

# ALLIED CEMENTING CO., INC. 11412

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

SERVICE POINT: \_\_\_\_\_

ORIGINAL

DATE <u>8/1/03</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>10/1/02</u>	WELL # <u>10</u>	LOCATION <u>2 1/2 mi. S. of Russell, Kan.</u>			COUNTY <u>10</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>2</u>							

CONTRACTOR <u>D. ...</u>	OWNER _____
TYPE OF JOB <u>Refract</u>	
HOLE SIZE <u>12 1/4</u>	T.D. _____
CASING SIZE <u>12 1/4</u>	DEPTH <u>70</u>
TUBING SIZE _____	DEPTH _____
DRILL PIPE _____	DEPTH _____
TOOL _____	DEPTH _____
PRES. MAX _____	MINIMUM _____
MEAS. LINE _____	SHOE JOINT _____
CEMENT LEFT IN CSG. _____	
PERFS. _____	
DISPLACEMENT <u>1.5 cu yd</u>	

**EQUIPMENT**

PUMP TRUCK	CEMENTER <u>D. ...</u>
# <u>321</u>	HELPER <u>...</u>
BULK TRUCK	
# <u>202</u>	DRIVER <u>...</u>
BULK TRUCK	
# _____	DRIVER _____

**CEMENT**

AMOUNT ORDERED 1000 lbs. 3 bags

COMMON \_\_\_\_\_ @ \_\_\_\_\_

POZMIX \_\_\_\_\_ @ \_\_\_\_\_

GEL \_\_\_\_\_ @ \_\_\_\_\_

CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_

HANDLING \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

**TOTAL** \_\_\_\_\_

**REMARKS:**

Refract job for well #10. 12 1/4 hole. 70' depth. 1.5 cu yd cement. 2 1/2 mi. S. of Russell, Kan. 8/1/03.

**SERVICE**

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

PLUG \_\_\_\_\_ @ \_\_\_\_\_

**TOTAL** \_\_\_\_\_

CHARGE TO: Energy

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**FLOAT EQUIPMENT**

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

**TOTAL** \_\_\_\_\_

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.

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME [Name]