

ENTERED
Nov 03 2003

ACO-4
8/90

04-cons-143-CCOM

OPERATOR Elysium Energy, L.L.C. DOCKET # CO110302 DATE 10/27/03
 ADDRESS 1625 Broadway, Suite 2000 OPERATOR'S LICENSE # 32754
Denver, CO 80202 API NO. 15- 051-25167-0000
 LEASE Shutts B WELL NO. 8
 QUARTER CSWNE SEC 5 TWP 12S RGE 17 E
 W XX

COMINGLING 82-3-123

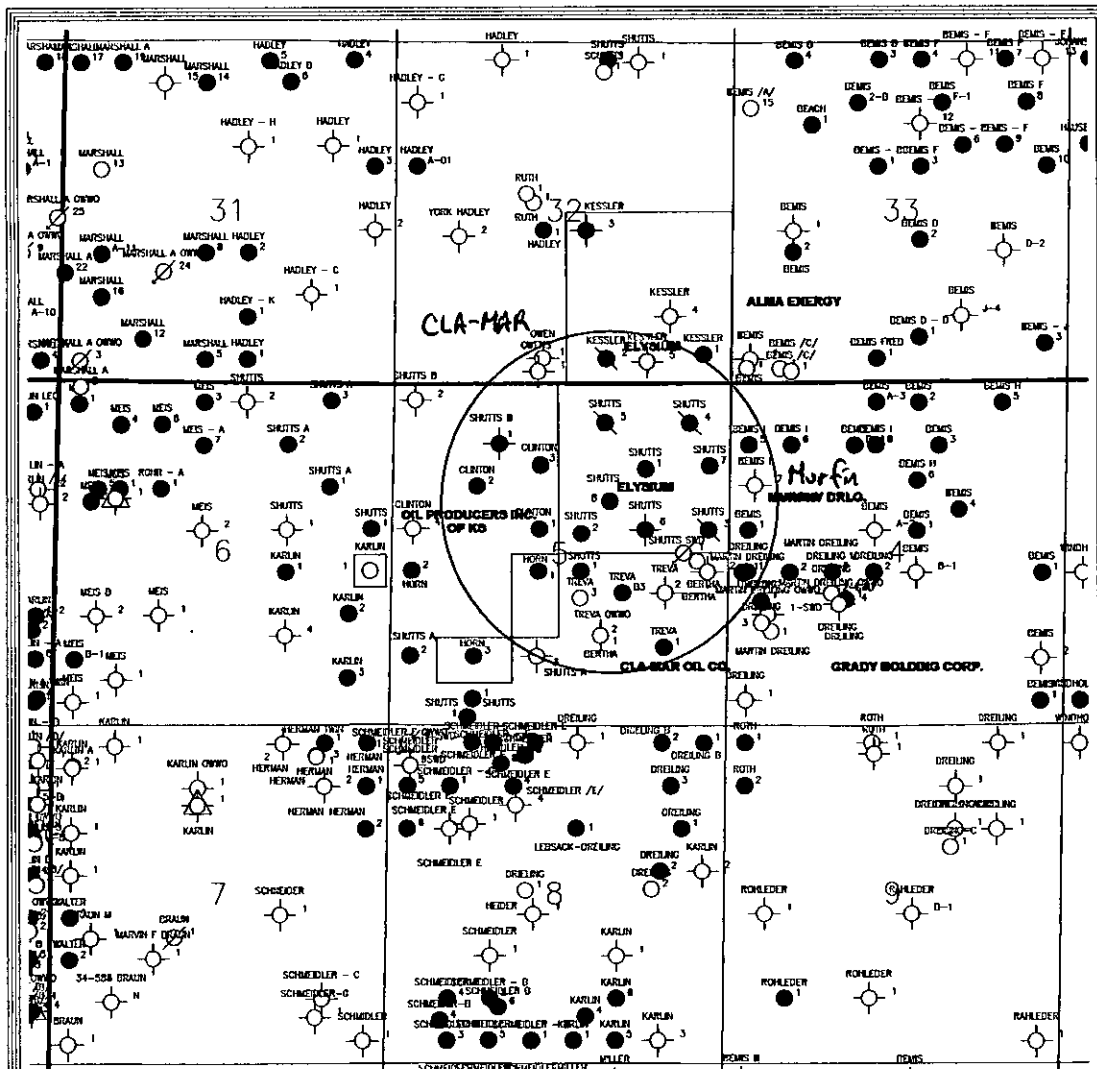
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- XX 1. Description of the well.
 A plat showing:
 a) Location of subject well.
 b) Location of other wells on the lease.
 c) Location of offsetting wells and operator's name.
- XX 2. Names and upper and lower limits of the source of supply involved.
- | | |
|-----------------------------------|----------------------------|
| (NAME) <u>Arbuckle</u> | (PERFS) <u>3614'-3626'</u> |
| (NAME) <u>Lansing/Kansas City</u> | (PERFS) <u>3372'-3512'</u> |
| (NAME) _____ | (PERFS) _____ |
- XX 3. Wireline log of the subject well.
- XX 4. A complete ACO-1 form.
- XX 5. Expected production, oil-gas-water, for each source of supply.
- | | | | |
|--------------------------------|---------------|-----------|----------------|
| FORMATION <u>Arbuckle</u> | BOPD <u>2</u> | MCF _____ | BWPD <u>10</u> |
| FORMATION <u>LKC</u> | BOPD <u>5</u> | MCF _____ | BWPD <u>30</u> |
| FORMATION _____ | BOPD _____ | MCF _____ | BWPD _____ |
| FORMATION _____ | BOPD _____ | MCF _____ | BWPD _____ |
| ESTIMATED COMBINED TOTAL _____ | BOPD <u>7</u> | MCF _____ | BWPD <u>40</u> |

XX 6. Application shall be supported by an Affidavit and shall contain a certificate showing service of a copy of the application without attachments to the offsetting operators. You are responsible for this. Unless waivers are obtained, applications are held for fifteen days to give offsetting operators time to file objections. If waivers are obtained, applications can be processed immediately. If objections are filed, applications are then set for hearing.



○ 1/2 MILE RADIUS

ELYSIUM ENERGY, LLC		
SHUTTS #8		
ELLIS COUNTY, KANSAS		
TOWNSHIP 12 SOUTH - RANGE 17 WEST		
MAP PREPARED BY:	1" = 3000 FEET	10/27/2003
MARK CURTIS	Scale 1:36000.	1217-5A.GPP

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October 29, 2003

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Kansas Corporation Commission
Conservation Division
130 S. Market, Room 2078
Wichita, KS 67202-3802
Attn: Mr. Bob Petersen

RE: Shutts B #8 Commingle Application
Elysium Energy, L.L.C. (Operator #32754)

Dear Mr. Petersen:

Attached is Form ACO-4 with attachments for the commingling of production from the Arbuckle and Lansing/Kansas City formations in the Shutts B #8 well. The Shutts B #8 was completed in the Arbuckle on April 14, 2003. The Lansing/Kansas City will now be tested and commingled with the Arbuckle.

Attached is an affidavit certifying that Elysium Energy, L.L.C. has mailed a copy of the application (Form ACO-4) to all offset operators within a ½ mile radius of the Shutts B #8. Also attached are copies of the certified mail receipts to offset operators.

If you should require further information or have any questions, please feel free to contact Jim Annable at 303-389-3610 or by email at jannable@patinaoil.com.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Annable", written over a faint circular stamp.

James Annable
Regulatory Engineer

Attachments: ACO-4, Affidavit, Certified Mail Receipts

BEFORE THE CORPORATION COMMISSION
OF THE STATE OF KANSAS

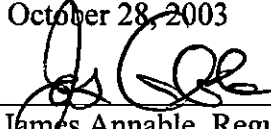
In the Matter of the Application of) Docket No.
Elysium Energy, L.L.C. for an Order)
Authorizing the Commingling of Oil) CONSERVATION DIVISION
& Gas Production from the Arbuckle)
and Lansing/Kansas City Formations)
Shutts B #8 well, Ellis County, KS) Operator Number 32754

Affidavit of Mailing

This is to advise that a copy of the application for an order authorizing the commingling of oil & gas production was sent by certified mail on October 28, 2003 to the following offset operators:

CLA-MAR Oil Co.
Murfin Drilling Company
Oil Producers Inc. of Kansas
Grady Bolding Corp.

Dated: October 28, 2003

By: 
James Annable, Regulatory Engineer
Elysium Energy, L.L.C.

STATE OF COLORADO)
) SS.
CITY AND COUNTY OF DENVER)

Subscribed & sworn to me before this 28th day of October 2003.

My Commission Expires:

9/20/07


Notary Public

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

Sent To: **Oil Producers Inc. KS**

Street, Apt. No., or PO Box No.: **2400 N. Woodlawn, Suite 230**

City, State, ZIP+4: **Wichita, KS 67220**

PS Form 3800, June 2002. See Reverse for Instructions.

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Sent To: **CLA-MAR OIL CO**

Street, Apt. No., or PO Box No.: **P.O. Box 1197**

City, State, ZIP+4: **Hays KS 67607**

PS Form 3800, June 2002. See Reverse for Instructions.

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Sent To: **Martin Drilling Company**

Street, Apt. No., or PO Box No.: **250 N. Water, Suite 300**

City, State, ZIP+4: **Wichita KS 67202**

PS Form 3800, June 2002. See Reverse for Instructions.

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Total Postage & Fees	\$

Postmark Here

Sent To: **Grady Holdings Corp**

Street, Apt. No., or PO Box No.: **P.O. Box 486**

City, State, ZIP+4: **Ellinwood KS 67201**

PS Form 3800, June 2002. See Reverse for Instructions.

7003 1010 0004 8543 7735

7003 1010 0004 8543 7759

**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>3/17/03</u>	<u>3/21/03</u>	<u>4/14/03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25167-0000
 County: Ellis
SW NE Sec. 5 Twp. 12 S. R. 17 East West
1850 feet from S / (circle one) Line of Section
1820 feet from / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Shutts Well #: 8
 Field Name: Bemis-Shutts
 Producing Formation: Arbuckle
 Elevation: Ground: 2123' Kelly Bushing: 2131'
 Total Depth: 3707' Plug Back Total Depth: 3691'
 Amount of Surface Pipe Set and Cemented at 222.8 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 3705
 feet depth to surface w/ 500 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
 Chloride content 9000 ppm Fluid volume 320 bbis
 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.: _____

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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: _____ Date: _____
 Subscribed and sworn to before me this _____ day of _____,
 19_____.
 Notary Public: _____
 Date Commission Expires: _____

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: Shutts Well #: 8
 Sec. 5 Twp. 12 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 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:

Sonic, Micro, CBL, CNL/CDL, Induction

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<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Top Anhydrite	1339'	+792
Topeka	3062'	-931
Toronto	3311'	-1180
LKC	3333'	-1202
Arbuckle	3613'	-1482

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	222.8	Common	150	2%gel, 3%CC
Production	7-7/8"	5-1/2"	17	3705	SMDC	350	11.2 ppg
					SMDC	150	14 ppg

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	3688-3691' CIBP @ 3684'	500 gal 15% NE Acid	3633-36'
4	3669-3676' CIBP @ 3645'		
4	3633-3636' CIBP @ 3630'		
4	3614-3626'		

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-7/8"	3597'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
4/14/03			<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.	Gas-Oil Ratio	Gravity
	1		380		

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 3614-3626'