FORM D

AEOFINED 2 APR 2 8 2003

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION 20549 Washington, D.C.

FORM D

UNIFORM LIMITED OFFERING EXEMPTION

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR OMB APPROVAL

OMB Number: 3235-0076 December 31, 1993 Expires: Decembe Estimated average burden hours per form

16.00

1229398

SEC USE ONLY

Prefix

Serial

Date Receive

Name of offering ([] check if this is an amendment and name has changed, and indicate change.) COOMER ENERGY PROJECT #2003-01, A KENTUCKY LIMITED PARTNERSHIP

Filing Under (Check boxes(es) that apply): []Rule 504 []Rule 505 [X] Rule 506 []Section 4(6) []ULOE Type of Filing: [X] New Filing [] Amendment [] Final

BASIC IDENTIFICATION DATA

Enter the issuer the information requested about. check if this is an amendment and name has changed, and indicate change.) Name of Issuer: COOMER ENERGY PROJECT #2003-01, A KENTUCKY GENERAL PARTNERSHIP

Address of Executive Offices (Number and Street, City, State, Zip Code) 101 WESTWOOD DRIVE, COLUMBIA, KENTUCKY 42728

Telephone Number (Including Area Code) 270 384-9759

Address of Principal Business Operations (Number and Street, City, Sate, Zip Code) 101 WESTWOOD DRIVE, COLUMBIA, KENTUCKY 42728

Telephone Number (Including Area Code) 270 384 9759

Brief Description of Business DRILLING OF TWO (2) OIL WELLS IN KENTUCKY

Type of Business Organization [] corporation [] limited partnership, already formed

01 2003 [] Other (please specify) THOMSON FINANCIAL

[] business trust [X] limited partnership to be formed

Actual or Estimated Date of Incorporation or Organization:

0 4 0 3

Month

[] Actual

[X] Estimated

Jurisdiction of Incorporation or Organization:

(Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

Year

Y ĸ

GENERAL INSTRUCTIONS

O Must File: All issuers making an offering of securities in reliance eon an exemption under Regulation D or Section 4(6), CFR 230.501 et seq. or 15 U.S.C. 77d(6). an to File. A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed led with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the addresses when below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifty Street, NW, Washington, D.C. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuers and officing, any changes thereto, the information requested in Parts and any material changes from the information previously supplied in Parts a and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

State:
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) states that have adopted ULOE and that have adopted this form. Issuers relying of ULOE must Securities Administration in each state where sales are to be, or have been made. If a state religious of the condition to the claim for the exemption, a fee in the property amount shall accompany this for the appropriate states in accordance with the law. The Appendix to the notice constitutes a completed:

Pailure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to predicated on the filing of federal notice.

Enter the information requested for the following the power of the issuer, if the issuer that is the issuer is the issuer that is the issuer is the issuer is the issuer is the power that is the issuer is the issu	ng: uer has been or o vote or dispos of the issuer; corporate iss	se, or direct uers and of	the vote or disposi	s; tion of, 10%
Check Box(es) that Apply: [X] Promoter []Benef	icial Owner []Executive (Officer []Director	[X]General and/or Managing Partners
Full Name (Last name first, if individual) COOMER ENERGY, INC.				
Business or Residence Address (Number and Stree 101 WESTWOOD DRIVE, COLUMBIA, KENTUCKY 42728	et, City, State,	Zip Code)		
Check Box(es) that Apply: [X]Promoter [X]Bene	eficial Owner	[X] Executive	Officer [X]Director	[]General and/or Managing Partners
Full Name (Last name first, if individual) TRAVIS COOMER				
Business or Residence Address (Number and Street 101 WESTWOOD DRIVE, COLUMBIA, KENTUCKY 42728	t, City, State,	, Zip Code)		
Check Box(es) that Apply: [X] Promoter [X] Bend	eficial Owner	[X] Executive	Officer [X] Directo	or [] General and/or Managing Partners
Full Name (Last name first, if individual) CARLOS V. SANDOVAL				11021032113
Business or Residence Address (Number and Street 101 WESTWOOD DRIVE, COLUMBIA, KENTUCKY	et, City, State,	, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Benef	ficial Owner []	Executive	Officer [X] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual)		* **		
Business or Residence Address (Number and Stree Check Box(es) that Apply: [] Promoter [] Benef			Officer [] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street	et, City, State	, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Bener	ficial Owner [] Executive	Officer [] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street	et, City, State	, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Bene:	Eicial Owner [] Executive	Officer [] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street	et, City, State	, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Bene:	ficial Owner (] Executive	Officer [] Director	[] General and/or Managing Partners

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? [X] Yes []No

Answer also in Appendix, Column 2, if filing under ULOE.

- 2. What is the minimum investment that will be accepted from an individual? 1/4 unit \$ 9,000
- 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchaser in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check	"All Stat	es" or c	heck ind:	ividual S	States) .						[]	All States	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check	"All Stat	es" or c	heck indi	ividual S	States) .						[]	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[OM]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Use blank sheet, or copy and use additional copies of this sheet, as necessary.) 3 of 8

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"0"	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS er the aggregate offering price of securities included in this offering and the total amount al if answer is "none" or "zero". If the transaction is an exchange offering, check this box [] an lumns below the amounts of the securities offered for exchange and already exchanged.	ready sold. Enter d indicate in the
	Type of Security Aggregate Offering Price	Amount Already Sold
	Debt	\$
	Equity	\$
	[] Common [] Preferred	
	Convertible Securities (including warrants)	\$
	Partnership Interests \$ Other (Specify) \$ 360,000 \$	\$ \$ 36,000
	Total	36,000
	Answer also in Appendix, Column 3, if filing under ULOE.	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate persons who have purchased securities and the aggregate dollar amount of their purchase on the enter "0" if answer is "none" or "zero".	the number of total lines. Aggregate
	Number Investors	Dollar Amount of Purchases
	Accredited Investors	\$ 36,000
	Non-accredited investors	\$-
	Total (for filings under Rule 504 only	\$
	Answer also in Appendix, Column 4, if filing under ULOE	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for a sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months first sale of securities in this offering. Classify securities by type listed in Part C - Q	prior to the
	Type of offering Type of Security	Dollar Amount Sold
	Rule 505	\$ \$
	Rule 504	\$
	Total	\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the this offering. exclude amounts relating solely to organization expenses of the issuer. The i be given as subject to future contingencies. If the amount of an expenditure is not know estimate and check the box to the left of the estimate.	nformation may
	Transfer Agent's Fees	\$
	Printing and Engraving Costs	\$
	Legal Fees	\$_6,000
	Accounting Fees	\$ 500
	Engineering Fees	\$500
	Sales Commissions (specify finders' fees separately) []	\$ <u>-0-</u>
	Other Expenses (identify) printing and miscellaneous []	\$_3,000
	Total	\$ <u>10,000</u>
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	b. Enter the difference between the aggre	BER OF INVESTORS, EXPENSES AND USE OF P	KUCEEDS
5.	proceeds to the issuer."	gate offering price given in response to Part C - Question 4.a. This difference	o Part C - Question 1 and e is the "adjusted gross"
	Indicate below the amount of the adjusted of the purposes shown. If the amount for a the left of the estimate. The total of the issuer set forth in response to part C - (any purpose is not known, furnish an est: ne payments listed must equal the adjust	imate and check the box to
		Óff Direc	nts to icers tors & Payments to liates Others
	Salaries and Fees		[]\$
	Purchase of Real Estate		[]\$
	Purchase, rental or leasing & installa	ation of machinery & equipment [] \$	[]\$
	Construction or leasing of plat build	ings and facilities [] \$	[]\$
	Acquisition of other businesses (incluinvolved in this offering that may assets or securities of another issues		[]\$
	Repayment of Indebtedness	[] \$	[]\$
	Working Capital		[]\$
	Other (Specify) Contract Drill	ling and Completion [] \$ 350	0,000 []\$
	-		
		[] \$	[] \$
	Column Totals	[] \$ <u>35</u> 6	0,000 []\$
	Total Payments Listed (column totals a	added)	[] \$_350,000
		D. FEDERAL SIGNATURE	
fil Sec	e issuer has duly caused this notice to be ed Under Rule 505, the following signatur curities and Exchange Commission, upon writ v non-accredited investor pursuant to parag	re constitutes an undertaking by the interest ten request of its staff, the informati	ssuer to furnish to the U.S.
Ι£	ssuer (Print or Type)	Signature	Date
	OOMER ENERGY PROJECT #2003-01,	Teranio Coome	4-17-03
	ame of Signer (Print or Type)	Title of Signer (Print or Type) PRESIDENT,	
1	RAVIS COOMER	COOMER ENERGY, INC.	

ATTENTION

International misstatement or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Ε.	STATE	SI	GNA	TURE

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is flied, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)

COOMER ENERGY PROJECT #2003-01

Name of Signer (Print or Type)

TRAVIS COOMER

PRESIDENT

COOMER ENERGY INC.

Instructions:

Print the names and title of the signing representative under his signature for the state portion of this form. Once copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signature.

APPENDIX

1		2	3		5				
	sell t accre inve (Par	nd to to non- dited stors t B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Type of in	Disqualificatio n under state ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	LIMITED PARTNERSHIP \$360,000	Number of Accredited Investors	Amount	Number of Non- Accredite Investors	Amount	Yes	No
AL									
AK									
AZ	х		"	1	36,000	-0-			
AR									
CA									
СО				· · · · · · · · · · · · · · · · · · ·			·		
CT									
DE	<u> </u>								
DC							-		
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN	1								
MS									
MO									

APPENDIX

1		2	3	3								
	sell t accre inve: (Par	nd to to non- dited stors t B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Type of investor and amount purchased in state (Part C-Item 2)				Disqualificatio n under state ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	LIMITED PARTNERSHIP \$360,000	Number of Accredited Investors	Amount	Number of Non- Accredite Investors	Amount	Yes	No			
МТ												
NE												
NV												
NH												
ŊJ												
NM												
NY												
NC												
ND												
ОН												
OK												
OR												
PA												
RI												
sc												
SD												
TN												
TX												
UT												
VT												
VA												
WA												
WV												
WI												
WY												
PR												

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