AUGUSTINE FUND LP Form 4 October 07, 2002

| 07, | 2002  |                        |  |  |  |
|-----|---|------------------------|--|--|--|
|     |   | OMB APPROVAL           |  |  |  |
|     |   | Estimated a            | 3235-0287 January 31, 2005 average burden response 0.5 |  |  |
|     | UNITED STATES SECURITIES AND Washington, D.C. 205   |                        | OMMISSION  |  |  |
|     | FORM 4  |                        |  |  |  |
|     | STATEMENT OF CHANGES IN BENEFIC   | IAL OWNERSH            | IP   |  |  |
| [_] | Filed pursuant to Section 16(a) of the Securi<br>Section 17(a) of the Public Utility Holdin<br>Section 30(h) of the Investment Co<br>Check this box if no longer subject to Secti<br>obligations may continue. See Instruction 1( | g Company Ampany Act o | ct of 1935 or<br>f 1940                                |  |  |
| 1.  | Name and Address of Reporting Person*   |                        |  |  |  |
|     | Augustine Fund, LP  |                        |  |  |  |
|     | (Last) (First)  | (Mid                   | dle)   |  |  |
|     | 141 W. Jackson, Suite   | 2182                   |  |  |  |
|     | (Street)  |                        |  |  |  |
|     | Chicago, IL 60604   |                        |  |  |  |
|     | (City) (State)  | (Zi                    | p)   |  |  |
| 2.  | Issuer Name and Ticker or Trading Symbol  |                        |  |  |  |
|     | NuWay Energy, Inc. (NW  | AY)                    |  |  |  |
| 3.  | IRS Identification Number of Reporting Perso  | n, if an En            | tity (Voluntary)                                       |  |  |
| 4.  | Statement for Month/Day/Year  |                        |  |  |  |
|     | October 7, 2002   |                        |  |  |  |
| 5.  | If Amendment, Date of Original (Month/Day/Ye  | ar)                    |  |  |  |
| 6.  | Relationship of Reporting Person(s) to Issue (Check all applicable)   | ========<br>r          |  |  |  |

| [_] Director<br>[_] Officer (give titl  | [X] 10% Owner  Le below) [_] Other (specify below) |           |            |  |                  |        |
|---|--|-----------|------------|--|------------------|--------|
| 7. Individual or Joint/Gro  [_] Form filed by one [X] Form filed by more                          |  |           |            |  |                  |        |
| Table I Non-De  |  |           |            |  |                  |        |
|   |  | Date, if  |            | 4. Securities Acqu Disposed of (D) (Instr. 3, 4 an |                  | (A) or |
| 1. Title of Security (Instr. 3)   | Dav/   | Day/      | (Instr. 8) | Amount   | (A)<br>or<br>(D) | Price  |
| Common Stock  | 10/03/02   |           | P          | 20,000   | А                | \$0.57 |
|   | 10/04/02   |           | P          | 18,000   | A<br>            | \$0.46 |
|   |  |           |            |  |                  |        |
| Reminder: Report on a separa owned directly or * If the Form is filed by 4(b)(v).                 | indirectly.  |           |            |  | ====             |        |
| Persons who respond to the contained in this form are nunless the form displays a control number. | ot required t                                      | o respond | n          | (Over)<br>SEC 1474 (9-02)                          |                  |        |
| FORM 4 (continued)  |  |           |            |  |                  |        |
| Table II Derivative Secur (e.g., puts, calls,   |  |           |            |  |                  |        |

| 1.<br>Title of                  | of<br>Deriv-<br>ative | 3. Trans- action Date (Month/ | Date,<br>if any<br>(Month/ | Trans-<br>action<br>Code<br>(Instr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |                 |           |                 | 7. Title and of Under Securitie (Instr. | lying<br>es<br>3 and 4) |
|---------------------------------|-----------------------|-------------------------------|----------------------------|-------------------------------------|--|-----------------|-----------|-----------------|---|-------------------------|
| Derivative<br>Security          |                       |                               |                            |                                     |  |                 |           | Expira-<br>tion |   | Number<br>of            |
| (Instr. 3)                      |                       |                               |                            | Code V                              | (A)  | (D)             | cisable   |                 | Title                                   | Shares                  |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
| ========                        |                       | ======                        | ======                     | -======                             |  |                 |           | -======         |   |                         |
| Explanation of Responses:       |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
|                                 |                       |                               |                            |                                     |  |                 |           |                 |   |                         |
| /a/ John Dor                    |                       |                               |                            |                                     |  | _               | ot obor 7 | 2002            |   |                         |
| /s/ John Porter                 |                       |                               |                            |                                     |  | October 7, 2002 |           |                 |   |                         |
| **Signature of Reporting Person |                       |                               |                            |                                     |  |                 | Dat       | .e              |   |                         |

Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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