

RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL JUL 29 2005

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5317
 Name: Russell Freeman d/b/a Continental Energy
 Address: P.O. Box 918
 City/State/Zip: Garden City, KS 67846-0918
 Purchaser: Unimark, LLC
 Operator Contact Person: Russell Freeman or Jeff Kidd
 Phone: (620) 276-8710
 Contractor: Name: Murfin Drilling Company, Inc.
 License: 30606
 Wellsite Geologist: none
 Designate Type of Completion:
 ___ New Well ___ Re-Entry Workover
 ___ Oil ___ SWD ___ SIOW ___ Temp. Abd.
 Gas ___ ENHR ___ SIGW
 ___ Dry ___ Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: Murfin Drilling Company, Inc.
 Well Name: Jefco-Holstead 1-35
 Original Comp. Date: 12/21/04 Original Total Depth: 4850
 ___ 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>12/11/04</u>	<u>12/21/04</u>	<u>07/23/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 055-21849-00-01
 County: Finney
 ___ NW ___ SW ___ SW Sec. 35 Twp. 22 S. R. 33 East West
1020 feet from N (circle one) Line of Section
330 feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Jefco-Holstead Well #: 1-35
 Field Name: Hugoton
 Producing Formation: Chase
 Elevation: Ground: 2869 Kelly Bushing: 2878
 Total Depth: 3120 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 460 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AH I. NCR 8-12-08
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 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: Production Manager Date: 07/26/05
 Subscribed and sworn to before me this 28 day of July
20 05
 Notary Public: Karen Boonen

Date Commission Expires: 10/11/08
 NOTARY PUBLIC - State of Kansas
 KAREN BOONEN
 My Appl. Exp. _____

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

ORIGINAL

Side Two

ORIGINAL RECEIVED
JUL 29 2011

Operator Name: Russell Freeman d/b/a Continental Energy Lease Name: Jefco-Holstead Well #: 1-35 KCC WICHITA
Sec. 35 Twp. 22 S. R. 33 East West County: Finney

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Krider	2536	+342
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Winfield	2578	+300
List All E. Logs Run:		Towanda	2642	+236
		Ft. Riley	2706	+172
		Florence	2746	+132
		T/Council Grove	2806	+76

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		13 3/8"		460'	common	400	3%cc,2%gel
Production		5 1/2"	14#	3120'	common/lite	625	

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	Perforations @ 2493-98, 2524-33, 2550-52, 2581-90	ACID - 1500 gal 15% MCA, 150 balls	
		FRAC - 38,000# 12/20 Brady Sand + N2	

TUBING RECORD	Size 2 3/8"	Set At 2686'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. SIGW - Awaiting testing/connections	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf yes unknown	Water Bbls. yes unknown	Gas-Oil Ratio	Gravity
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Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

(If vented, Submit ACO-18.) Other (Specify) _____