

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

2/19/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31652

Name: Norstar Petroleum Inc.

Address 1: 6855 S. Havana St., Suite 250

Address 2: _____

City: Centennial State: CO Zip: 80112 + _____

Contact Person: Clark D. Parrott

Phone: (303) 925-0696

CONTRACTOR: License # 30606

Name: Murfin Drilling Company, Inc.

Wellsite Geologist: Tim Priest

Purchaser: _____

Designate Type of Completion:

- New Well _____ Re-Entry _____ Workover
- _____ Oil _____ SWD _____ SLOW
- _____ Gas _____ ENHR _____ SIGW
- _____ CM (Coal Bed Methane) _____ Temp. Abd.
- 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. _____ Conv. to SWD

_____ Plug Back: _____ Plug Back Total Depth

_____ Commingled Docket No.: _____

_____ Dual Completion Docket No.: _____

_____ Other (SWD or Enhr.?) Docket No.: _____

1/9/2010 1/16/2010 1/17/2010

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 039-21112-00-00

Spot Description: _____

SW NE NW NW Sec. 15 Twp. 2 S. R. 27 East West

342 Feet from North / South Line of Section

686 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Decatur

Lease Name: NPI Wilson Well #: 1-15

Field Name: Monaghan North

Producing Formation: _____

Elevation: Ground: 2520 ft Kelly Bushing: 2525 ft

Total Depth: 3900 RTD Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 261 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

(Data must be collected from the Reserve Pit)

Chloride content: 6000 ppm Fluid volume: 400 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: [Signature]

Title: President Date: 2/18/10

Subscribed and sworn to before me this 10 day of FEB

20 10
Notary Public: [Signature]

Date Commission Expires: 4/5/2011

KCC Office Use ONLY

- Letter of Confidentiality Received
- If Denied, Yes Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution

MAR 9 2010

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