

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

8/27/10

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 # 4958

Name: Mallard JV, Inc.

Wellsite Geologist: Tim Priest

Purchaser: _____

Designate Type of Completion:

New Well _____ Re-Entry _____ Workover _____

_____ Oil _____ SWD _____ SIOW

_____ 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.: _____

7/14/2009 7/21/2009 7/22/2009

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

API No. 15 - 135-24933-00-00

Spot Description: _____

_____ NW SE NW Sec. 34 Twp. 20 S. R. 23 East West

1905 Feet from North / South Line of Section

1650 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Ness

Lease Name: Byrom Well #: 4-34

Field Name: Reinert

Producing Formation: _____

Elevation: Ground: 2217 Kelly Bushing: 2222

Total Depth: 4500 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 260 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/ _____

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content: 11,000 ppm Fluid volume: 800 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.: _____

PA-Dg-9/8/09

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: 8/25/09

Subscribed and sworn to before me this 25th day of AUGUST

09

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 RECEIVED

_____ UIC Distribution AUG 31 2009

KCC WICHITA

Operator Name: Norstar Petroleum Inc. Lease Name: Byrom Well #: 4-34
 Sec. 34 Twp. 20 S. R. 23 East West County: Ness

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: CDL/CNL, DIL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>3671</td> <td>-1449</td> </tr> <tr> <td>Lansing</td> <td>3717</td> <td>-1495</td> </tr> <tr> <td>Ft. Scott</td> <td>4248</td> <td>-2026</td> </tr> <tr> <td>Cherokee Shale</td> <td>4275</td> <td>-2053</td> </tr> <tr> <td>Cherokee Sd</td> <td>4367</td> <td>-2145</td> </tr> <tr> <td>Mississippi</td> <td>4430</td> <td>-2208</td> </tr> </table>	Name	Top	Datum	Heebner	3671	-1449	Lansing	3717	-1495	Ft. Scott	4248	-2026	Cherokee Shale	4275	-2053	Cherokee Sd	4367	-2145	Mississippi	4430	-2208
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CASING RECORD <input type="checkbox"/> New <input checked="" 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#	260	Common	175	2% gel, 3% cc

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

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method: <input type="checkbox"/> Flowing <input 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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 036263

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Ness City, KS

DATE <u>7-22-09</u>	SEC <u>34</u>	TWP. <u>20</u>	RANGE <u>23 W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:00pm</u>	JOB FINISH <u>8:00pm</u>
LEASE <u>Byrom</u>		WELL # <u>4-34</u>	LOCATION <u>Ness City S. to river bridge</u>		COUNTY <u>Ness</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)			<u>E around corners S/into</u>				

KCC

AUG 27 2009

CONFIDENTIAL

CONTRACTOR Maillard

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8 T.D. 1500

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 100# MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT Freshwater

OWNER Norstar Petro.

CEMENT

AMOUNT ORDERED 2505x 60/40 4# 60#

1/4# Flo seal

COMMON	<u>150</u>	@	<u>13.50</u>	<u>2025.00</u>
POZMIX	<u>100</u>	@	<u>7.55</u>	<u>755.00</u>
GEL	<u>9</u>	@	<u>20.25</u>	<u>182.25</u>
CHLORIDE		@		
ASC		@		
	<u>Water 63#</u>	@	<u>2.45</u>	<u>154.35</u>
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>250</u>	@	<u>2.25</u>	<u>562.50</u>
MILEAGE	<u>15/250x.10</u>			<u>375.00</u>
TOTAL				<u>4054.10</u>

EQUIPMENT

PUMP TRUCK CEMENTER Randy Pomy

181 HELPER Garlen

BULK TRUCK

456-148 DRIVER Wayne

BULK TRUCK

_____ DRIVER _____

REMARKS:

On location Rig up Safety meeting

1- 1500' 50sx

2- 750' 90sx

3- 300' 50sx

4- 60' 20sx

RH- 30sx

MH- 30sx

Rig down

SERVICE

DEPTH OF JOB	<u>1500</u>		
PUMP TRUCK CHARGE			<u>990.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>15.</u>	@	<u>7.00</u> <u>105.00</u>
MANIFOLD		@	
		@	
		@	
TOTAL <u>1095.00</u>			

CHARGE TO: Norstar Petro.

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

		@	
<u>1 8 1/2" mandrel</u>		@	<u>66.00</u>
		@	
		@	
TOTAL <u>66.00</u>			

Thank you!

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Alyle Juergensen

SIGNATURE Alyle Juergensen

SALES TAX (If Any) _____

TOTAL CHARGES [scribble]

DISCOUNT _____ IF PAID IN 30 DAYS

RECEIVED

AUG 31 2009

KCC WICHITA