Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CP-4 March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

## WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:31652				API No. 15 - 065-23675-00-00				
Name: Norstar Petroleum Inc.				Spot Description:				
Address 1: 6855 S. Havana St., Ste 250				NE NW. SE NE Sec. 16 Twp. 9 S. R. 23 ☐ East West				
Address 2:								
Contact Person: Clark D. Parrott				670 Feet from  East / West Line of Section Footages Calculated from Nearest Outside Section Corner:				
								Phone: (303.) 925-0696
Type of Well: (Check ane) Oil Well Gas Well OG D&A Cathodic  Water Supply Well Other: SWD Permit #:				County: Graham				
ENHR Permit #: Gas Storage Permit #:					Lease Name: Brandyberry Well #: 1-16			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				Date Well Completed: 9/24/2010 The plugging proposal was approved on: 9/23/2010 (Date)				
	s): List All (if needed attach a							
Depth to Top: Bottom: T.D Depth to Top: Bottom: T.D				by: Richard Lacey (KCC District Agent's Name)  Plugging Commenced: 9/23/2010  Plugging Completed: 9/24/2010				
	ness of all water, oil and gas	formations.						
Formation	or Water Records Content	Coping		Record (Surf	face, Conductor & Production)			
	Content	Casing	Size		Setting Depth	Pulled Out		
		Surface	8 5/8	218		0		
		-						
			<del></del>	·		<del> </del>		
Cement w/ 22	20 sx, 60/40 poz, 4	plugged, indicating where the cter of same depth placed from 4% gel as follows: ', 40 sx @ 270', 10	n (bottom), to	(top) for eact	n plug set.		RECEIVED	
							OCT 1 2 2010	
							KCC WICHITA	
Plugging Contractor License #: 34115								
Address 1: RR 1 Box 90 D								
				State: KS zip: 67740				
Phone: ( <u>785</u> ) <u>6</u>	57-8974					·		
Name of Party Respon	sible for Plugging Fees:	lorstar Petroleum I	lnc					
State of Colorado County, Arapahoe				, SS.				
Per Burchardt (Print Name)				Employee of Operator or Operator on above-described well,				
ine same are true and		owledge of the facts statement	its, and matter					
Signature:		-JV	<del></del>					