

CARBON DIOXIDE STORAGE FACILITY SURETY OR INSURANCE INSTRUMENT

NORTH DAKOTA DEPARTMENT OF MINERAL RESOURCES

SFN 62585 (12-2024)

Financial Instrument Number (if applicable)

The financial responsibility form and the no back before signing and notarizing. Please Please submit the original.			NDIC Instrumen	NDIC Instrument Number		
Name of Principal of This Instrument						
Financial Instrument Company Name						
The State the Financial Instrument Company is	Incorporated	I in				
Amount Principal and Instrument Company is I	ndebted to the	e State of North Dakota				
In consideration of allowing the principal to operate a Dakota, are indebted to the State of North Dakota in representatives and successors, jointly and severally	the sum, as spe					
The condition of this obligation is that the principal de Dakota and this bond is required by N.D.C.C § 38-22 money is available to fulfill the storage operator's obli Commission's orders and administrative rules, togeth it remains in full force and effect.	-03 and the No gations. If the p	rth Dakota Industrial Commis orincipal, in its operations, full	sion's admi y complies v	nistrative rules to pro with N.D.C.C. Chapte	vide finar er 38-22 a	ncial assurance that and the Industrial
The instrument shall remain in full force and effect un Commission authorizes the release of the instrument fully satisfy the Commission's requirements for releasthe face value of the instrument to the Commission. Tommission.	, or until other f se of the financi	inancial assurances are in pla al instrument, then the instru	ace and app ment compa	proved by the Commi	ssion. If the	he principal does not requirements or forfeit
North Dakota law governs this instrument.						
The Financial Instrument being selected to cove	er the carbon	dioxide storage facility be	low is (sele	ect only one):		
Surety Bond Insurance						
Carbon Dioxide Storage Facility Name and Nu	1	NorthSTAR	rthSTAR Facility Number NDIC Order Number			
This financial assurance covers the followi	ng costs, pu	rsuant to N.D.A.C § 43-	-05-01-09	.1(b) for the stor	age fac	cility listed above:
Corrective Action \$		Post-injection Site	e Care and	d Facility Closure	\$	
☐ Injection Well Plugging \$		☐ Emergency and R	Remedial R	esponse :	\$	
Instructions for signatures: If you are a corporation at least one general partner sign. If you are an indivicing signature state that you are the sole owner. Any othe lasurance companies shall attach certificate of insura	lual doing busir r person signing	ness under a business name, g on behalf of the principal or	state your r	name and your busin	ess' name	e and after your
Name of Principal of This Instrument (See othe	ary)			Telephone Number		
Address	City			State	ZIP Code	
Signature	e Title					
Name of Surety or Insurer (See other side for r	I			Telephone Number		
Address	City			State	ZIP Code	
Signature Printed Name		e Title				

Acknowledgment of Princip	oal		
State of	County of		
Signed and sworn to (or affirmed) before me this	Date		
Name(s) of Individual(s) Making	Statement	Affix Notary Stamp	
Signature of Notary Public or Ot	her Authorized Officer		
Date			
Acknowledgment of Surety State of	or Insurer County of		
Signed and sworn to (or affirmed) before me this	Date		
Name(s) of Individual(s) Making	Statement	Affix Notary Stamp	
Signature of Notary Public or O	her Authorized Officer		
Date			
Date			-

Instructions

- 1. Please refer to sections 43-02-03-15 and 43-05-01-09.1 of the North Dakota Administrative Code regarding carbon dioxide storage facility bond requirements.
- 2. Name of principal shall be the name of the operator and shall be the same as reported on the Organization Report Form 2 (SFN 5748).
- 3. The form and the notary page shall be printed or copied front to back before signing and notarizing.
- 4. The original of this report shall be filed with the Department of Mineral Resources, Oil and Gas Division, 600 E Boulevard ave, Dept 474, Bismarck ND 58505-0614.