

FILE NOTATIONS

Entered in NID File
Location Map Pinned
Card Indexed

Checked by Chief *PWB*
Approval Letter *2.8.72*
Disapproval Letter

COMPLETION DATA:

Well Completed

Location Inspected

... WW..... TA.....

Bond released

... OS..... PA.....

State or Fee Land

LOGS FILED

Driller's Log.....

Electric Logs (No.)

E..... I..... Dual I Lat..... GR-N..... Micro.....

MC Sonic GR..... Lat..... Mi-L..... Sonic.....

Log..... CCLog..... Others.....

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
 DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
 OIL WELL GAS WELL OTHER SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
 Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR
 P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
 At surface 665' FNL, 562' FWL NW NW
 At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 29 miles East of Manila, Utah

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) 562' -

16. NO. OF ACRES IN LEASE
 1900.74

17. NO. OF ACRES ASSIGNED TO THIS WELL
 -

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 2350'

19. PROPOSED DEPTH
 6300' ✓

20. ROTARY OR CABLE TOOLS
 Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
 GR 6756' as graded

22. APPROX. DATE WORK WILL START*
 February 14, 1972 ✓

23. PROPOSED CASING AND CEMENTING PROGRAM

| SIZE OF HOLE | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | QUANTITY OF CEMENT |
|--------------|----------------|-----------------|------------------|--------------------|
| 13-3/4 | 9-5/8 | 32.3 | 330' ✓ | 323 |
| 7-7/8 | 4-1/2 | 11.6 | to be determined | |

We would like permission to drill the subject well to an estimated depth of 6300'. Anticipated formation tops are as follows: Mancos at the surface, Frontier at 5725', Mowry at 5925', Dakota at 6125' and Morrison at 6250'. Mud will be adequate to contain formation fluids and blow out preventers will be checked daily.

The location requested does not comply with the State of Utah well location regulation. We request an exception as provided under Rule C-3 of the General Rules and Regulations covering well location based on topographical conditions.

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION
DATE 2-8-72
BY LB Feight

See Corrected Notes

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

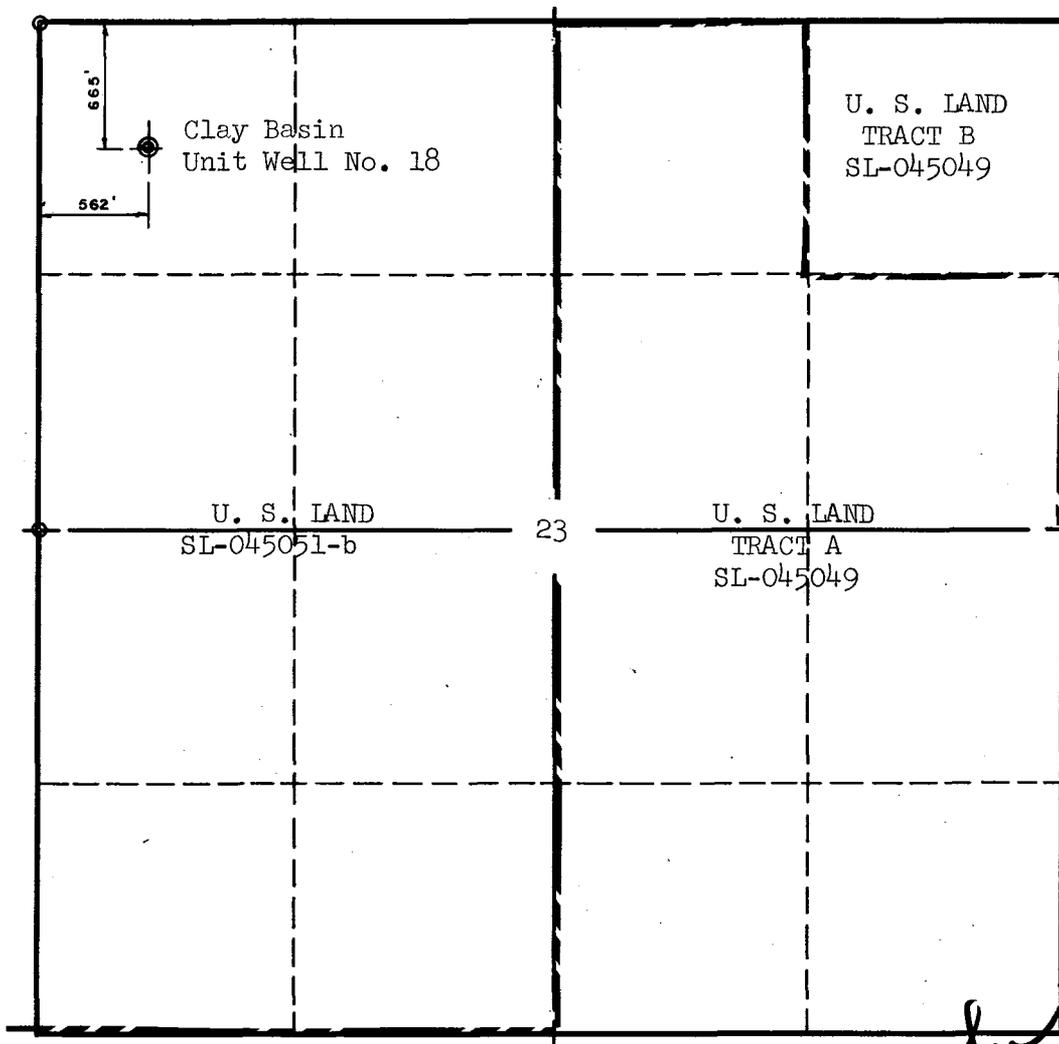
24. SIGNED B. W. Croft TITLE Vice President, Gas Supply Operations DATE Feb. 4, 1972

(This space for Federal or State office use)

PERMIT NO. 43-019-3006 APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:



- ⊕ = Well
- ⊕ = Stone Corner
- ⊕ = Pipe Corner

This is to certify that the above plat was prepared from field notes of actual surveys made under my supervision and that the same are true and correct to the best of my knowledge.

K. A. Loya

 Engineer/
 Utah Registration No. 2708

Elevation by spirit levels.
 Bench mark Clay Basin Unit Well No. 6.

| ENGINEERING RECORD | |
|--------------------|-----------------------------------|
| W.O. | 20631 |
| Surveyed by | J.B. Carricaburu 2/2/72 |
| Weather | Cold |
| References | G.L.O. Plat |
| LOCATION DATA | |
| Field | Clay Basin |
| Location | NW NW Sec.23, T.3N., R.24E., SIM. |
| County | Daggett |
| State | Utah |
| Well Elev. | 6756' (as graded) |

| | |
|---|---------------------------|
|  MOUNTAIN FUEL SUPPLY COMPANY ROCK SPRINGS, WYOMING | |
| WELL LOCATION | |
| Clay Basin Unit Well No. 18 | |
| DRAWN: 2/2/72 DGH | SCALE: 1 inch = 1000 feet |
| CHECKED: <i>Rum</i> | DRWG. NO. M-10488 |
| APPROVED: KAL | |

PI

INTEROFFICE COMMUNICATION

R. G. MYERS

FROM R. G. Myers

Rock Springs, Wyoming

CITY

STATE

TO B. W. Croft

DATE February 7, 1972

SUBJECT Tentative Plan to Drill
Unit Well No. 18
Clay Basin Field

Attached for your information and files is a tentative plan to drill the above-captioned well. This plan was written in accordance with the Geologic Prognosis dated January 21, 1972.

RGM/gm

Attachment

- cc: J. T. Simon
- L. A. Hale (6)
- J. E. Adney
- Geology (2)
- D. E. Dallas (4)
- C. F. Rosene
- E. J. Widic
- A. A. Pentila
- U.S.G.S.
- State
- Paul Zubatch
- P. E. Files (4)

From: T. M. Colson

Rock Springs, Wyoming

To: R. G. Myers

February 1, 1972

Tentative Plan to Drill
Unit Well No. 18
Clay Basin Field

This well will be drilled to total depth by _____ Drilling Company. One work order has been originated for the drilling and completion of this well, namely 20631. This well is located in NW NW Sec. 23, T. 3 N., R. 24 E., Daggett County, Utah. A 7-7/8-inch hole will be drilled to a total depth of 6300 feet and 4-1/2-inch O.D. casing run. It is anticipated the well will be completed as a gas well in the Frontier formation. Four drill stem tests are anticipated.

1. Drill 13-3/4-inch hole to approximately 330 feet KBM.
2. Run and cement approximately 300 feet of 9-5/8-inch O.D., 32.3-pound, H-40, 8 round thread, ST&C casing. The casing will be cemented with 323 sacks of regular Type "G" cement which represents theoretical requirements plus 100 percent excess cement for 9-5/8-inch O.D. casing in 13-3/4-inch hole with cement returned to surface. Cement will be treated with 1518 pounds of Dowell D43A. Plan on leaving a 10 foot cement plug in the bottom of the casing after displacement is completed. Floating equipment will consist of a Baker guide shoe. The top and bottom of all casing collars will be spot welded in the field and the guide shoe will be spot welded to the shoe joint in the Rock Springs Machine Shop. The bottom of the surface casing should be landed in such a manner that the top of the 10-inch 3000 pound casing flange will be at ground level. A cellar three feet deep will be required. Prior to cementing, circulate 50 barrels of mud. Capacity of the 9-5/8-inch O.D. casing is 26 barrels.
3. After a WOC time of 6 hours, remove the landing joint and wash off casing collar. Install a NSCo. Type "B" 10-inch 3000 pound regular duty casing flange tapped for 9-5/8-inch O.D. casing. Install a 2-inch extra heavy nipple, 6-inches long, and a Nordstrom Figure 824 (800 psi WOG, 1600 psi test)

valve on one side outlet of the casing flange and a 2-inch extra heavy bull plug in the opposite side. Install a 10-inch 3000 pound double gate hydraulically operated blowout preventer with blind rams in the bottom and 4-1/2-inch rams in the top and finish nipping up. After a WOC time of 12 hours, pressure test surface casing, all preventer rams, and Kelly-cock to 1000 psi for 15 minutes using rig pump and drilling mud. The burst pressure rating for 9-5/8-inch O.D., 32.3-pound, H-40, 8 round thread, ST&C casing is 2270 psi.

4. Drill 7-7/8-inch hole to the total depth of 6300 feet or to such depth as the Geological Department may recommend. A mud de-sander and de-silter will be used from under the surface casing to total depth to remove all undesirable solids from the mud system and to keep the mud weight to a minimum. A fully manned logging unit will be used from 5500 feet to total depth. A Company Geologist will be on location to check cutting samples; 10 foot samples from 5500 feet to total depth. The mud system will consist of properties adequate to allow the running of drill stem tests. The mud weight should be held as low as practical. Four drill stem tests are anticipated starting at a depth of approximately 5700 feet. Anticipated tops are as follows:

| | <u>Approximate Depth</u> <u>(Feet KBM)</u> |
|-------------|---|
| Mancos | Surface |
| Frontier | 5725 |
| Mowry | 5925 |
| Dakota | 6125 |
| Morrison | 6250 |
| Total Depth | 6300 |

5. Run a dual induction-laterolog from total depth to the bottom of the surface pipe (linear 2-inch, logarithmic 5-inch with RXO/Rt on 5-inch) and borehole compensated sonic gamma ray caliper log with "F" log overlay from total depth to 4900 feet.

6. Assume commercial quantities of gas and/or oil are present as indicated by open hole drill stem tests or log analysis. Go into hole with 7-7/8-inch bit and drill pipe to total depth to condition mud prior to running production casing. Pull bit laying down drill pipe and drill collars.
7. Run 4-1/2-inch O.D. casing as outlined in Item No. I, General Information, through the deepest producing zone as indicated by open hole drill stem tests or log analysis. This casing string is designed using 10 ppg drilling mud. A Baker 4-1/2-inch O.D., 8 round thread, Type G circulating differential fillup collar and a Baker guide shoe will be run as floating equipment. Cement casing with 50-50 Pozmix "A" cement. Bring cement top behind the 4-1/2-inch O.D. casing above the uppermost producing zone as indicated by drill stem test and log analysis. Circulate 150 barrels of drilling mud prior to beginning cementing operations. Capacity of the 4-1/2-inch O.D. casing is approximately 97 barrels. Cement requirements will be based on actual hole size as determined by the caliper portion of the formation density log. Rotate casing while circulating, mixing and displacing cement. Displace cement with water.
8. Immediately after cementing operations are completed, land the 4-1/2-inch O.D. casing with full weight of casing on slips in the 10-inch 3000 pound casing flange and record indicator weight. Install NSCo. Type B 10-inch 3000 pound by 6-inch 5000 pound tubing spool. Pressure test primary and secondary seals to 3000 psi for 5 minutes. Minimum collapse pressure for 4-1/2-inch O.D., 11.6-pound, N-80, 8 round thread, LT&C casing is 5950 psi. Install a steel plate on the 6-inch 5000 pound tubing spool flange.
9. Release drilling rig and move off location.
10. Move in and rig up a completion rig.
11. Install a 6-inch 5000 pound hydraulically operated double gate preventer with blind rams on bottom and 2-3/8-inch tubing rams on top.

12. After a WOC time of at least 50 hours, rig up Dresser Atlas and run bond log and perforating formation control log from plugged back depth to top of cement behind the 4-1/2-inch O.D. casing.
13. After a WOC time of at least 56 hours, pick up and run a 3-3/4-inch bit on 2-3/8-inch O.D., 4.6-pound, J-55 seal lock thread tubing to check plugged back depth.
14. Using Halliburton pump truck and water, pressure test casing and tubing rams to 4000 psi for 15 minutes. The minimum internal yield for 4-1/2-inch O.D., 11.6-pound, N-80 casing is 7780 psi and the wellhead has a working pressure of 5000 psi with a test pressure of 10,000 psi. Pull tubing and pressure test casing and blind rams to 4000 psi for 15 minutes. Pull bit, standing tubing in derrick.
15. A tentative plan to complete the well will be issued after results of the above items have been evaluated.

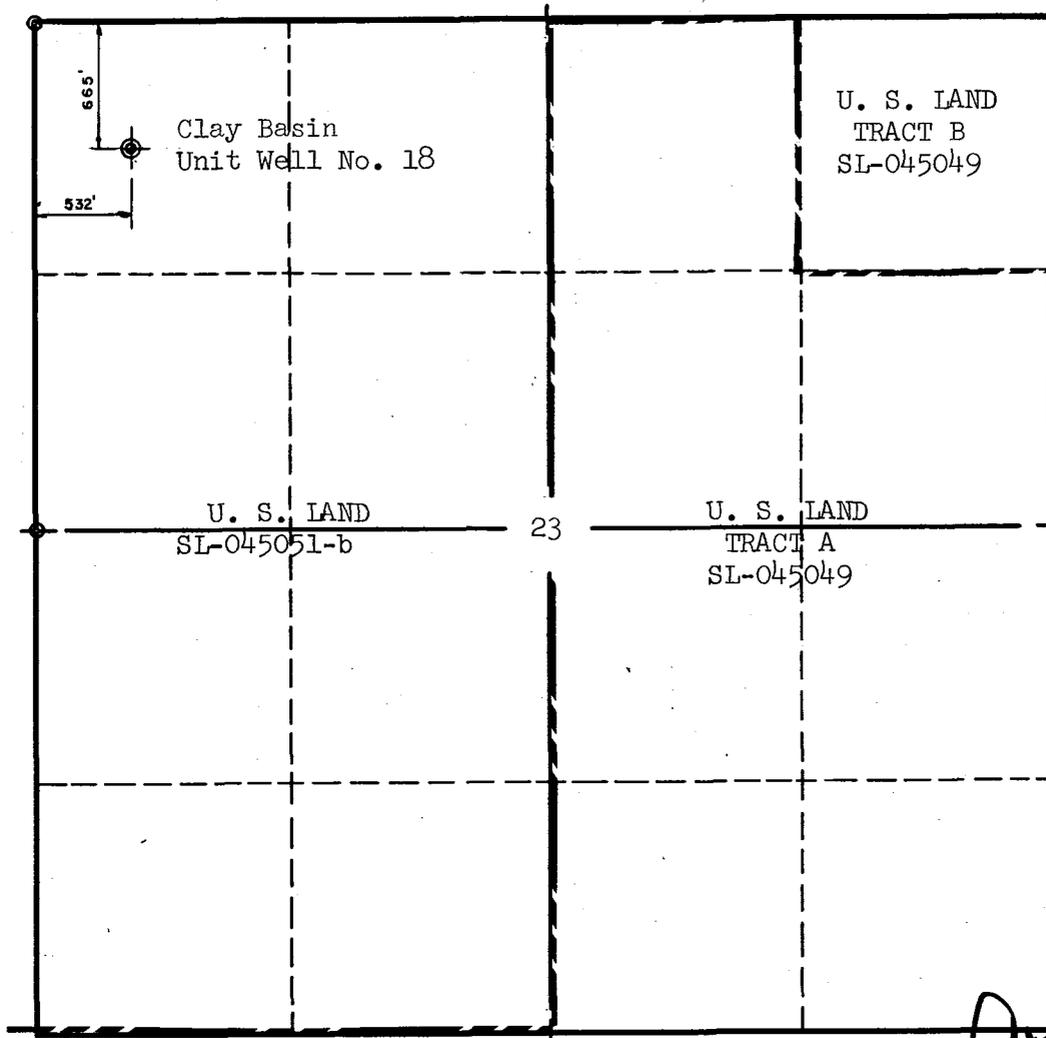
GENERAL INFORMATION

I. The following tubular goods have been assigned to the well.

| <u>Description</u> | <u>Approximate Gross Measurement (feet)</u> | <u>Availability</u> |
|--|---|---------------------|
| | <u>Surface Casing</u> | |
| 9-5/8-inch O.D., 32.3-pound, H-40, 8 round thread, ST&C casing | 330 | To be purchased |
| | <u>Production Casing</u> | |
| 4-1/2-inch O.D., 11.6-pound, N-80, 8 round thread, LT&C casing | 6,500 | Rock Springs Whse. |
| | <u>Production Tubing</u> | |
| 2-3/8-inch O.D., 4.6-pound, J-55, seal lock tubing | 6,500 | To be purchased |

II. All ram type preventers will have hand wheels installed and operative at the time the preventers are installed.

III Well responsibility - C. T. Colson



- ⊕ = Well
- ⊕ = Stone Corner
- ⊕ = Pipe Corner

This is to certify that the above plat was prepared from field notes of actual surveys made under my supervision and that the same are true and correct to the best of my knowledge.

K. A. Loya

 Engineer

Utah Registration No. 2708

Elevation by spirit levels.
 Bench mark Clay Basin Unit Well No. 6.

| ENGINEERING RECORD | |
|--------------------|--------------------------------------|
| W.O. | 20631 |
| Surveyed by | J.B. Carricaburu 2/2/72 |
| Weather | Cold |
| References | G.L.O. Plat |
| LOCATION DATA | |
| Field | Clay Basin |
| Location | NW NW Sec. 23, T. 3N., R. 24E., SIM. |
| County | Daggett |
| State | Utah |
| Well Elev. | 6756' (as graded) |

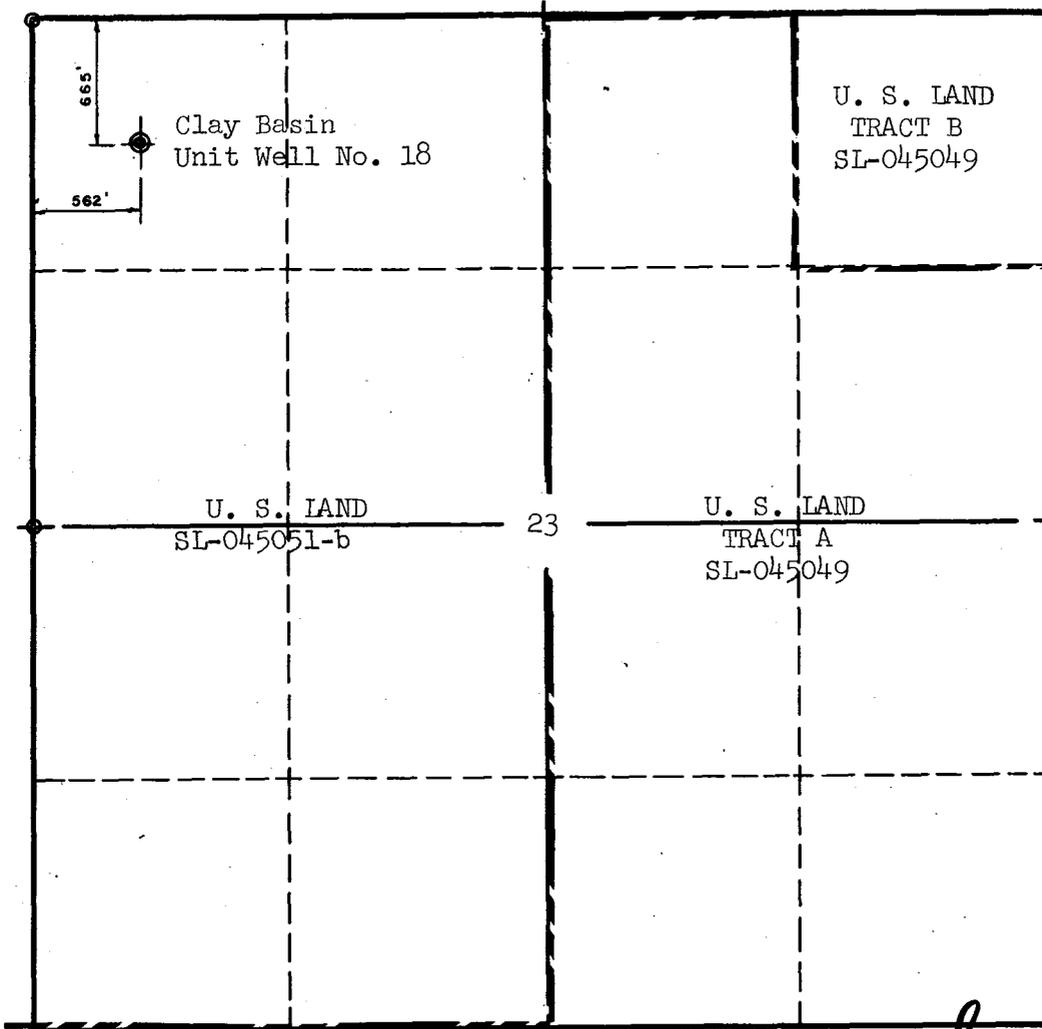


MOUNTAIN FUEL
 SUPPLY COMPANY
 ROCK SPRINGS, WYOMING

WELL LOCATION

Clay Basin Unit Well No. 18

| | |
|-------------------|---------------------------|
| DRAWN: 2/2/72 DGH | SCALE: 1 inch = 1000 feet |
| CHECKED: Rum | DRWG. NO. M-10488 |
| APPROVED: KAL | |



See Corrected Plat

- ⊕ = Well
- ⊕ = Stone Corner
- ⊕ = Pipe Corner

This is to certify that the above plat was prepared from field notes of actual surveys made under my supervision and that the same are true and correct to the best of my knowledge.

K. A. Loya

 Engineer

Utah Registration No. 2708

Elevation by spirit levels.
 Bench mark Clay Basin Unit Well No. 6.

| ENGINEERING RECORD | | |  MOUNTAIN FUEL SUPPLY COMPANY ROCK SPRINGS, WYOMING | | | |
|--------------------|--------------------------------------|--------|---|--|---|--|
| W.O. | 20631 | | | | WELL LOCATION Clay Basin Unit Well No. 18 | |
| Surveyed by | J.B. Carricaburu | 2/2/72 | | | | |
| Weather | Cold | | | | | |
| References | G.L.O. Plat | | DRAWN: 2/2/72 DGH SCALE: 1 inch = 1000 feet CHECKED: <i>Rum</i> DRWG. NO. M-10488 APPROVED: <i>KAL</i> | | | |
| LOCATION DATA | | | | | | |
| Field | Clay Basin | | | | | |
| Location | NW NW Sec. 23, T. 3N., R. 24E., S1M. | | | | | |
| County | Daggett | | | | | |
| State | Utah | | | | | |
| Well Elev. | 6756' (as graded) | | | | | |

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
 DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
 OIL WELL GAS WELL OTHER SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
 Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR
 P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
 At surface 665' FNL, 532' FWL NW NW
 At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 29 miles east of Manila, Utah

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) 532' -

16. NO. OF ACRES IN LEASE 1900.74

17. NO. OF ACRES ASSIGNED TO THIS WELL -

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 2350' -

19. PROPOSED DEPTH 6300'

20. ROTARY OR CABLE TOOLS Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
 GR 6756' as graded

22. APPROX. DATE WORK WILL START*
 February 21, 1972

5. LEASE DESIGNATION AND SERIAL NO.
 SL - 045051-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
 -

7. UNIT AGREEMENT NAME
 Clay Basin Unit

8. FARM OR LEASE NAME
 Unit Well

9. WELL NO.
 18

10. FIELD AND POOL, OR WILDCAT
 Clay Basin

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 NW NW 23-3N-24E., SLM

12. COUNTY OR PARISH 13. STATE
 Daggett Utah

23. PROPOSED CASING AND CEMENTING PROGRAM

| SIZE OF HOLE | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | QUANTITY OF CEMENT |
|--------------|----------------|-----------------|------------------|--------------------|
| 13-3/4 | 9-5/8 | 32.3 | 300 | 323 |
| 7-7/8 | 4-1/2 | 11.6 | To be determined | |

Attached are revised location well plats; the location was changed slightly to accommodate a larger rig.

We would like permission to drill the subject well to an estimated depth of 6300'. Anticipated formation tops are as follows: Mancos at the surface, Frontier at 5725', Mowry at 5925', Dakota at 6125', and Morrison at 6250'. Mud will be adequate to contain formation fluids and blow out preventers will be checked daily.

The location requested does not comply with the State of Utah well location regulation. We request an exception as provided under Rule C-3 of the General Rules and Regulations covering well location based on topographical conditions.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED B. H. Crofton TITLE Vice President, Gas Supply Operations DATE Feb. 21, 1972

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

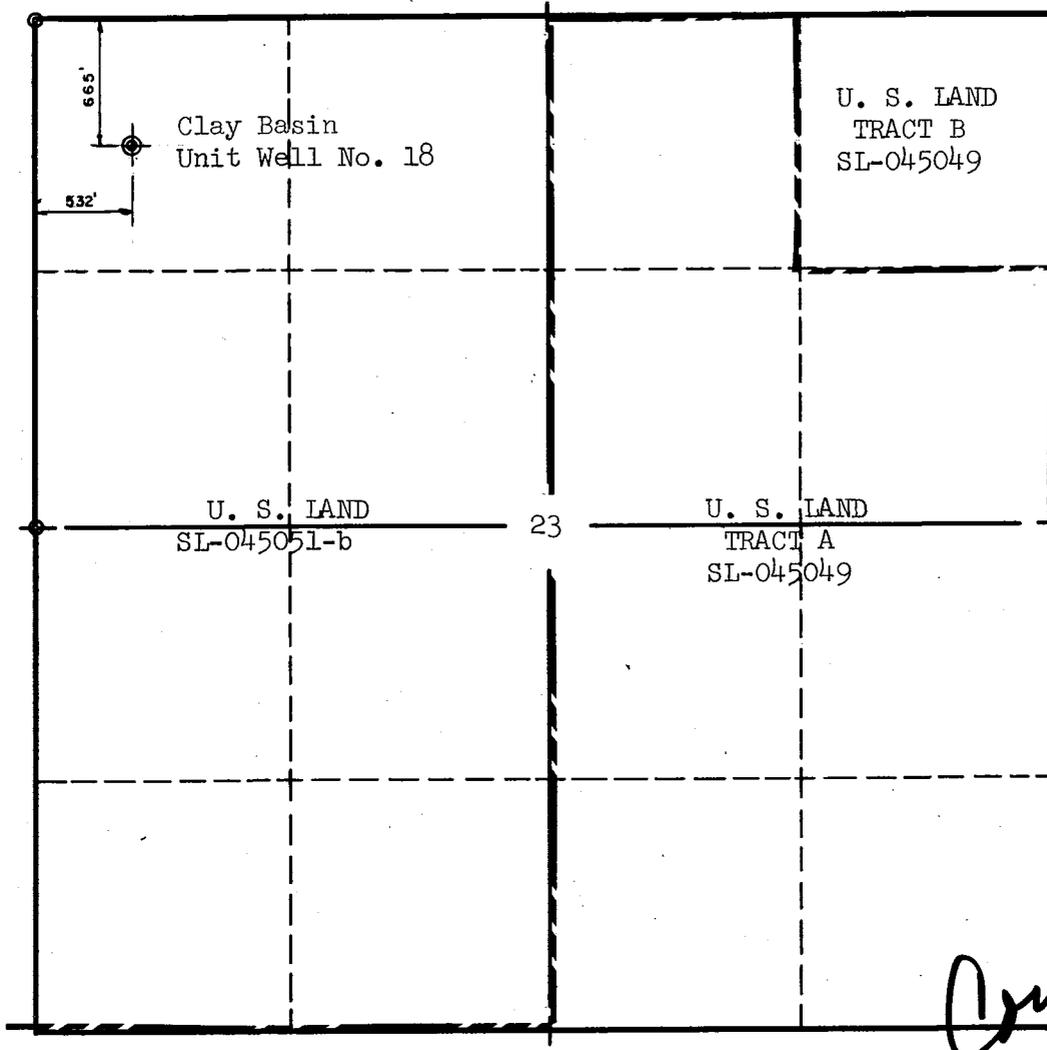
APPROVED BY DIVISION OF OIL & GAS CONSERVATION
 APPROVED BY _____ TITLE _____

DATE 2-23-72

BY [Signature]

Corrected

*See Instructions On Reverse Side



- ⊕ = Well
- ⊕ = Stone Corner
- ⊕ = Pipe Corner

This is to certify that the above plat was prepared from field notes of actual surveys made under my supervision and that the same are true and correct to the best of my knowledge.

K. A. Loya

 Engineer

Elevation by spirit levels.
 Bench mark Clay Basin Unit Well No. 6.

Utah Registration No. 2708

| ENGINEERING RECORD | |
|--------------------|--------------------------------------|
| W.O. | 20631 |
| Surveyed by | J.B. Carricaburu 2/2/72 |
| Weather | Cold |
| References | G.L.O. Plat |
| LOCATION DATA | |
| Field | Clay Basin |
| Location | NW NW Sec. 23, T. 3N., R. 24E., SIM. |
| County | Daggett |
| State | Utah |
| Well Elev. | 6756' (as graded) |



MOUNTAIN FUEL
 SUPPLY COMPANY
 ROCK SPRINGS, WYOMING

WELL LOCATION

Clay Basin Unit Well No. 18

| | |
|---------------------|---------------------------|
| DRAWN: 2/2/72 DGH | SCALE: 1 inch = 1000 feet |
| CHECKED: <i>Rum</i> | DRWG. NO. M-10488 |
| APPROVED: KAL | |

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPlicate*
(Other instructions on re-verse side)

Form approved.
Budget Bureau No. 42-R1424.

| |
|---|
| 5. LEASE DESIGNATION AND SERIAL NO. SL - 045051-b |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME - |
| 7. UNIT AGREEMENT NAME Clay Basin Unit |
| 8. FARM OR LEASE NAME Unit Well |
| 9. WELL NO. 18 |
| 10. FIELD AND POOL, OR WILDCAT Clay Basin |
| 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW NW 23-3N-24E., SLM |
| 12. COUNTY OR PARISH Daggett |
| 13. STATE Utah |

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| |
|---|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER |
| 2. NAME OF OPERATOR Mountain Fuel Supply Company |
| 3. ADDRESS OF OPERATOR P. O. Box 1129, Rock Springs, Wyoming 82901 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 665' FNL, 532' FWL NW NW |
| 14. PERMIT NO. 43-009-30006 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 6767.90' GR 6756' |

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

| | | | |
|--|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <u>Supplementary history</u> <input checked="" type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 3441', drilling.

Spudded February 21, 1972.

Landed 305.16' net, 307.96' gross of 9-5/8" OD, 32.3#, H-40, casing at 317.06' KBM and set with 323 sacks of cement, returned 25 barrels cement to surface.

18. I hereby certify that the foregoing is true and correct

SIGNED B. W. Croft TITLE Vice President,
Gas Supply Operations DATE Feb. 29, 1972

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

SL - 045051-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Clay Basin Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

18

10. FIELD AND POOL, OR WILDCAT

Clay Basin

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

NW NW 23-3N-24E., SLM

12. COUNTY OR PARISH

Daggett

13. STATE

Utah

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

665' FNL, 532' FWL NW NW

14. PERMIT NO.

43-009-30006

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 6767.90' GR 6756'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Supplementary history

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 5755', made DST #1.

DST #1: 5705-5755', Frontier, IO 1/2 hour, ISI 1 1/2 hours, FO 2 hours, FSI 5 hours, opened strong, gas in 1/4 hour, 1/2 hour 9 Mcf, reopened, 1/2 hour 80 Mcf, 1 hour 83 Mcf, 2 hours 104 Mcf, recovered 189' gas cut mud.

IHP 2721, IOFP's 105-120, ISIP 2138, FOFP's 136-136, FSIP 2138, FHP 2721.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. H. Craft

TITLE

Vice President,
Gas Supply Operations

DATE

March 6, 1972

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
 Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for
FEB 1972, 19.....

Agent's address P.O. Box 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

SALT LAKE CITY, UTAH 84111 Signed E. Murphy

Phone 328 - 8315 Agent's title CHIEF ACCOUNTANT

SLC 045051 B

State Lease No. Federal Lease No. Indian Lease No. Fee & Pat.

| Sec. & 1/4 of 1/4 | Twp. | Range | Well No. | *Status | Oil Bbls. | Water Bbls. | Gas MCF's | REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test) | |
|-------------------|------|-------|----------|---------|-----------|-------------|-----------|--|---|
| | | | | | | | | No. of Days Produced | |
| NW NW 23 | 3N | 24E | 18 | | 0 | 0 | 0 | 0 | Spud February 21, 1972 4,039' Drilling |

Note: There were NO runs or sales of oil; NO M cu. ft. of gas sold; NO runs or sales of gasoline during the month.

NOTE: Report on this form as provided for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
 SI-Shut In D-Dead
 GI-Gas Injection TA-Temp. Aban.
 W/I-Water Injection

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

FIELD OFFICE Salt Lake City
LEASE NUMBER Clay Basin Unit No. 18
UNIT

LESSEE'S MONTHLY REPORT OF OPERATIONS

State Utah County Daggett Field Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for the month of FEB 1972, 19

Agent's address P.O. Box 11368 Company MOUNTAIN FUEL SUPPLY COMPANY
Salt Lake City, Utah 84111 Signed E. Murphy

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

| SEC. AND 1/4 OF 1/4 | TWP. | RANGE | WELL NO. | Date Produced | BARRELS OF OIL | GRAVITY | CU. FT. OF GAS (In thousands) | GALLONS OF GASOLINE RECOVERED | BARRELS OF WATER (If none, so state) | REMARKS (If drilling, depth; if shut down, cause; date and result of test for gasoline content of gas) |
|---|------|-------|----------|---------------|----------------|---------|-------------------------------|-------------------------------|--------------------------------------|--|
| <u>SLG - 045051-B - R.D. Murphy - B - Clay Basin Unit Well No. 18</u> | | | | | | | | | | |
| NW NW 23 | 3N | 24E | 18 | | | | | | | Spud February 21, 1972 4039' - Drilling |

NOTE.—There were No runs or sales of oil; No M cu. ft. of gas sold;
No runs or sales of gasoline during the month. (Write "no" where applicable.)

NOTE.—Report on this form is required for each calendar month, regardless of the status of operations, and must be filed in duplicate with the supervisor by the 6th of the succeeding month, unless otherwise directed by the supervisor.

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SI - 045051-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

-

7. UNIT AGREEMENT NAME

Clay Basin Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

18

10. FIELD AND POOL, OR WILDCAT

Clay Basin

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

NW NW 23-3N-24E., S.L.M.

12. COUNTY OR PARISH

Daggett

13. STATE

Utah

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR
P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
665' FNL, 532' FWL NW NW

14. PERMIT NO.
43-009-30006

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
KB 6767.90' GR 6756'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| | | | |
|--|---|---|--|
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <u>Supplementary history</u> <input checked="" type="checkbox"/> | |
| (Other) | | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 6300', tripping out to log.

DST #2: 6025-6047', Dakota, IO 1/2 hour, ISI 1 hour, FO 2 hours, FSI 4 hours, opened weak increasing to strong, no gas, reopened strong, gas in 47 minutes, 1 hour 9 Mcf, 2 hours 21 Mcf, recovered 105' mud cut water.

IHP 2841, IOFP's 30-60, ISIP 513, FOFP's 60-60, FSIP 513, FHP 2841.

DST #3: 6264-6282', Morrison, mis-run, could not get to bottom with test tool.

DST #4: 6264-6282', Morrison, IO 1/2 hour, ISI 1 hour, FO 2 hours, FSI 3-3/4 hours, opened with weak blow on both openings, no gas, recovered 60' water cut mud and 1286' gas cut water. IHP 3005, IOFP's 30-271, ISIP 2183, FOFP's 287-662, FSIP 2138, FHP 3005.

18. I hereby certify that the foregoing is true and correct

SIGNED B. H. Craft, Jr.

TITLE Vice President,
Gas Supply Operations

DATE March 14, 1972

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-E1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|--|
| 1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. SL - 045051-b |
| 2. NAME OF OPERATOR Mountain Fuel Supply Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME - |
| 3. ADDRESS OF OPERATOR P. O. Box 1129, Rock Springs, Wyoming 82901 | | 7. UNIT AGREEMENT NAME Clay Basin Unit |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 665' FNL, 532' FWL NW NW | | 8. FARM OR LEASE NAME Unit Well |
| 14. PERMIT NO. 43-009-30006 | | 9. WELL NO. 18 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) KB 6767.90' GR 6756' | | 10. FIELD AND POOL, OR WILDCAT Clay Basin |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW NW 23-3N-24E., S.L.M. |
| | | 12. COUNTY OR PARISH 13. STATE Daggett Utah |

16. **Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <u>Supplementary history</u> <input checked="" type="checkbox"/> | |
| (Other) <input type="checkbox"/> | | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD 6300', ran 4 1/2" production casing, rig released 3-15-72, waiting on completion tools.

18. I hereby certify that the foregoing is true and correct

SIGNED B. H. Croft TITLE Vice President, Gas Supply Operations DATE March 20, 1972

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

March 27, 1972

MEMO FOR FILING

Re: Mountain Fuel Supply Company
Clay Basin Unit #18
Sec. 23, T. 3 N, R. 24 E,
Daggett County, Utah

On March 16, 1972, the above referred to well site was visited.

At the time of the visit the Loffland Brothers Drilling Company's crew was tearing down their rig #234 and moving associated equipment to the proposed #19 well location. The well was drilled 6,300' to the Morrison Formation and pipe was set at 6,129'. The operator proposes to complete in the Frontier Formation which had marginal gas recoveries on drill-stem tests.

PAUL W. BURCHELL
CHIEF PETROLEUM ENGINEER

PWB:ck

cc: U.S. Geological Survey

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SL - 045051-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Clay Basin Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

18

10. FIELD AND POOL, OR WILDCAT

Clay Basin

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

NW NW 23-3N-24E., S.L.M.

12. COUNTY OR PARISH

Daggett

13. STATE

Utah

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR
P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
665' FNL, 532' FWL NW NW

14. PERMIT NO.
43-009-30006

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
KB 6767.90' GR 6756'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) Supplementary history

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD 6300', waiting on completion tools.

Landed 6146.14' net, 6196.14' gross of 4 1/2" OD, 11.6#, N-80, LT&C casing at 6158.04' KBM and set with 563 sacks of cement, circulated and rotated casing throughout cementing operations.

18. I hereby certify that the foregoing is true and correct

SIGNED B. H. Craft

TITLE Vice President,
Gas Supply Operations

DATE March 28, 1972

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
 Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for

MAR 1972, 19

Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

SALT LAKE CITY, UTAH 84111 Signed J. Murphy

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

SLC 045051B

State Lease No. _____ Federal Lease No. _____ Indian Lease No. _____ Fee & Pat.

| Sec. & 1/4 of 1/4 | Twp. | Range | Well No. | *Status | Oil Bbls. | Water Bbls. | Gas MCF's | REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test) | |
|-------------------|------|-------|----------|---------|-----------|-------------|-----------|--|---|
| | | | | | | | | No. of Days Produced | |
| NW NW 23 | 3N | 24E | 18 | SI | 0 | 0 | 0 | 0 | Spud February 21, 1972 T.D. 6,300' Shut In Waiting on Completion Tools |

* Not Corrected for Temperature and Gravity or BS & W
 ** Flared to Atmosphere

Note: There were NO runs or sales of oil; NO M cu. ft. of gas sold; NO runs or sales of gasoline during the month.

NOTE: Report on this form as provided for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
 SI-Shut In D-Dead
 GI-Gas Injection TA-Temp. Aban.
 WI-Water Injection

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for
APR 1972, 19.....

Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

SALT LAKE CITY, UTAH 84111 Signed *E. Murphy*

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

SLC

State Lease No. _____ Federal Lease No. 045051 B Indian Lease No. _____ Fee & Pat.

| Sec. & 1/4 of 1/4 | Twp. | Range | Well No. | *Status | Oil Bbls. | Water Bbls. | Gas MCF's | REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test) | | |
|-------------------|------|-------|----------|---------|-----------|-------------|-----------|--|---|---|
| | | | | | | | | No. of Days Produced | | |
| NW NW 23 | 3N | 24E | 18 | SI | * | 0 | 0 | 0 | 0 | Spud February 21, 1972 T.D. 6,300' Shut In Waiting on Completion Tools |

* Not Corrected for Temperature and Gravity or BS & W
** Flared to Atmosphere

Note: There were No runs or sales of oil; No M cu. ft. of gas sold; No runs or sales of gasoline during the month.

NOTE: Report on this form as provided for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
SI-Shut In D-Dead
GI-Gas Injection TA-Temp. Aban.
WI-Water Injection

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LAND OFFICE Salt Lake City
LEASE NUMBER
UNIT Clay Basin

LESSEE'S MONTHLY REPORT OF OPERATIONS

State Utah County Degett Field Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for the month of MAY 1972, 19.....

Agent's address P.O. Box 11368 Company MOUNTAIN FUEL SUPPLY COMPANY
Salt Lake City, Utah 84111 Signed J. Murphy

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

| SEC. AND 1/4 OF 1/4 | TWP. | RANGE | WELL NO. | DATE PRODUCED | BARRELS OF OIL | GRAVITY | CU. FT. OF GAS (In thousands) | GALLONS OF GASOLINE RECOVERED | BARRELS OF WATER (If none, so state) | REMARKS (If drilling, depth; if shut down, cause; date and result of test for gasoline content of gas) |
|---|------|-------|----------|---------------|----------------|---------|-------------------------------|-------------------------------|--------------------------------------|--|
| <u>SLC - 045051-A - R.D. Murphy A - Clay Basin Unit Well No. 20</u> | | | | | | | | | | |
| NW NW 22 | 3N | 24E | 20 | | | | | | | Spud April 13, 1972 T.D. 5669' PBD 5628' Test: Well flowed 4300 MCF/D Shut In |

NOTE.—There were No runs or sales of oil; No M cu. ft. of gas sold; No runs or sales of gasoline during the month. (Write "no" where applicable.)

NOTE.—Report on this form is required for each calendar month, regardless of the status of operations, and must be filed in duplicate with the supervisor by the 6th of the succeeding month, unless otherwise directed by the supervisor.

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
 Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for
MAY 1972, 19.....

Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

SALT LAKE CITY, UTAH 84111 Signed J. Murphy

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

State Lease No. _____ Federal Lease No. S.L.C. 045051 Indian Lease No. _____ Fee & Pat.

| Sec. & 1/4 of 1/4 | Twp. | Range | Well No. | *Status | Oil Bbls. | Water Bbls. | Gas MCF's | REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test) | |
|-------------------|------|-------|----------|---------|-----------|-------------|-----------|--|---|
| | | | | | | | | No. of Days Produced | |
| NW NW 22 | 3N | 24E | 20 | SI | * | 0 | 0 | ** | Spud April 13, 1972 T.D. 5669' P.B.D. 5628' Test: Well Flowed 4300 MCF/D Shut In |

* Not Corrected for Temperature and Gravity or BS & W
 ** Flared to Atmosphere

Note: There were No runs or sales of oil; No M cu. ft. of gas sold; No runs or sales of gasoline during the month.

NOTE: Report on this form as provided for in Rule C-22. (See back of form.)
 FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
 SI-Shut In D-Dead
 GI-Gas Injection TA-Temp. Aban.
 WI-Water Injection

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SL - 045051-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

-

7. UNIT AGREEMENT NAME

Clay Basin Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

18

10. FIELD AND POOL, OR WILDCAT

Clay Basin

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

NW NW 23-3N-24E., S.L.M.

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR
P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
665' FNL, 532' FWL NW NW

14. PERMIT NO.
43-009-30006

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
KB 6767.90' GR 6756'

12. COUNTY OR PARISH
Daggett

13. STATE
Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Supplementary history

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD 6300', PBD 6117', perforated.

Rigged up work over unit on 6-5-72, perforated from 6100' to 6112' with 2 holes per foot.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. H. Craft

TITLE

Vice President,
Gas Supply Operations

DATE

June 7, 1972

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other _____

2. NAME OF OPERATOR
Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR
P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 665' FNL, 532' FWL NW NW
At top prod. interval reported below
At total depth

14. PERMIT NO. 43-009-30006 DATE ISSUED -

5. LEASE DESIGNATION AND SERIAL NO.
SL - 045051-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Clay Basin Unit

8. FARM OR LEASE NAME
Unit Well

9. WELL NO.
18

10. FIELD AND POOL, OR WILDCAT
Clay Basin - Frontier

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
NW NW 23-3N-24E., S.L.M.

12. COUNTY OR PARISH
Daggett

13. STATE
Utah

15. DATE SPUNDED 2-21-72 16. DATE T.D. REACHED 3-13-72 17. DATE COMPL. (Ready to prod.) 6-11-72 18. ELEVATIONS (DF, RKB, ET, GR, ETC.)* KB 6767.90' GR 6756' 19. ELEV. CASINGHEAD -

20. TOTAL DEPTH, MD & TVD 6300 21. PLUG, BACK T.D., MD & TVD 6075 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY -> 24. ROTARY TOOLS 0-6300' 25. CABLE TOOLS -

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
5708-5760' - Frontier 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN
Dual Induction Laterolog, Borehole Compensated Sonic-GR 27. WAS WELL CORED No

28. CASING RECORD (Report all strings set in well)

| CASING SIZE | WEIGHT, LB./FT. | DEPTH SET (MD) | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|-------------|-----------------|----------------|-----------|------------------|---------------|
| 9-5/8 | 32.3 | 317.06 | 13-3/4 | 323 | 0 |
| 4-1/2 | 11.6 | 6158.04 | 7-7/8 | 563 | 0 |

29. LINER RECORD

| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) |
|------|----------|-------------|---------------|-------------|
| | | | | |

30. TUBING RECORD

| SIZE | DEPTH SET (MD) | PACKER SET (MD) |
|-------|----------------|-----------------|
| 2-3/8 | 5662.88' | |

31. PERFORATION RECORD (Interval, size and number)

6100-6112', jet, 2 holes per foot
CIBP at 6075'
5708-5760', jet, 2 holes per foot

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

| DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED |
|---------------------|--|
| 5708-5760 | 48,100 gallons treated drip oil & 1/2 to 1 ppg 20-40 mesh sand |

33.* PRODUCTION

| DATE FIRST PRODUCTION | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) | WELL STATUS (Producing or shut-in) | | | | | |
|-----------------------|--|------------------------------------|-------------------------|----------|------------|-------------------------|---------------|
| Shut in | Flowing | Shut in | | | | | |
| DATE OF TEST | HOURS TESTED | CHOKE SIZE | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF. | WATER—BBL. | GAS-OIL RATIO |
| 6/10-11/72 | 19 1/2 | 32/64" | -> | | | | |
| FLOW. TUBING PRESS. | CASING PRESSURE | CALCULATED 24-HOUR RATE | OIL—BBL. | GAS—MCF. | WATER—BBL. | OIL GRAVITY-API (CORR.) | |
| 820 | 1100 | -> | | 3550 | | | |

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Vented while testing. TEST WITNESSED BY

35. LIST OF ATTACHMENTS
Logs as above, Well Completion to be sent at a later date.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED B. N. Cropper TITLE Vice President, Gas Supply Operations DATE June 12, 1972

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

| FORMATION | | GEOLOGIC MARKERS | |
|-----------|--------|------------------|------------------|
| TOP | BOTTOM | NAME | MEAS. DEPTH |
| | | | TOP |
| | | | TRUE VERT. DEPTH |
| | | Log tops: | |
| | | Mancos | 0' |
| | | Frontier | 5640' |
| | | Mowry | 5850' |
| | | Dakota | 6018' |
| | | Morrison | 6162' |

JUN 15 1972

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

OFFICE Salt Lake City
LEASE NUMBER
UNIT Clay Basin

LESSEE'S MONTHLY REPORT OF OPERATIONS

State Utah County Daggett Field Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for the month of JUN, 1972, 19

Agent's address P.O. Box 11368 Company MOUNTAIN FUEL SUPPLY COMPANY
Salt Lake City, Utah 84111 Signed E. Murphy

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

| SEC. AND 1/4 OF 1/4 | TWP. | RANGE | WELL NO. | DATE PRODUCED | BARRELS OF OIL | GRAVITY | CU. FT. OF GAS (In thousands) | GALLONS OF GASOLINE RECOVERED | BARRELS OF WATER (If none, so state) | REMARKS (If drilling, depth; if shut down, cause; date and result of test for gasoline content of gas) |
|---|------|-------|----------|---------------|----------------|---------|-------------------------------|-------------------------------|--------------------------------------|--|
| <u>SLC - 045051-B - R.D. Murphy-B - Clay Basin Unit Well No. 18</u> | | | | | | | | | | |
| NW NW 23 | 3N | 24E | 18 | | | | | | | Spud February 21, 1972 T. D. 6,300' PBD 6075' Shut in |

NOTE.—There were NO runs or sales of oil; NO M cu. ft. of gas sold; NO runs or sales of gasoline during the month. (Write "no" where applicable.)

NOTE.—Report on this form is required for each calendar month, regardless of the status of operations, and must be filed in duplicate with the supervisor by the 6th of the succeeding month, unless otherwise directed by the supervisor.

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
 Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for

JUN 1972, 19.....

Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

SALT LAKE CITY, UTAH 84111 Signed *E. Murphy*

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

SLC 045051B

State Lease No. _____ Federal Lease No. _____ Indian Lease No. _____ Fee & Pat.

| Sec. & 1/4 of 1/4 | Twp. | Range | Well No. | *Status | Oil Bbls. | Water Bbls. | Gas MCF's | REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test) | | |
|-------------------|------|-------|----------|---------|-----------|-------------|-----------|--|---|--|
| | | | | | | | | No. of Days Produced | | |
| NW NW 23 | 3N | 24E | 18 | SI | * | 0 | 0 | 0 | 0 | Spud, February 21, 1972 T.D. 6,300' P.B.D. 6,075' Shut in ✓ |

* Not Corrected for Temperature and Gravity or BS & W
 ** Flared to Atmosphere

Note: There were NO runs or sales of oil; NO M cu. ft. of gas sold; NO runs or sales of gasoline during the month.

NOTE: Report on this form as provided for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
 SI-Shut In D-Dead
 GI-Gas Injection TA-Temp. Aban.
 WI-Water Injection

OK

COMPLETION REPORT

Well: Clay Basin Unit #18 Date: June 28, 1972
Area: Clay Basin Field Lease No: SL-045051-b

New Field Wildcat Development Well Shallower Pool Test
 New Pool Wildcat Extension Deeper Pool Test

Location: 659 feet from North line, 562 feet from West line
NW $\frac{1}{4}$ NW $\frac{1}{4}$

Section 23, Township 3 North, Range 24 East

County: Daggett State: Utah

Operator: Mountain Fuel Supply Company

Elevation: KB 6768 Gr 6756 Total Depth: Driller 6301 Log 6299

Drilling Commenced: February 21, 1972 Drilling Completed: March 14, 1972

Rig Released: March 15, 1972 Well Completed: June 11, 1972

Sample Tops: (unadjusted)

Log Tops:

| | | | |
|----------|-------|----------|-------|
| Frontier | 5664' | Frontier | 5640' |
| Mowry | 5764' | Mowry | 5850' |
| Dakota | 5975' | Dakota | 6018' |
| Morrison | 6155' | Morrison | 6162' |

Sample Cuttings: 10-foot intervals 5500' to 6301'

Status:

Producing Formation: Frontier and Dakota Formations

Perforations: Perforated with 2 jets per foot from 5708'-5760' and 6100'-6112'

Stimulation: Fractured with 48,100 gallons drip oil and sand mixture.

Production: Initial production 3550 Mcf during 19 1/2 hours test
June 10th and 11th.

Plug Back Depth: 6075' PBD

Plugs: One at 6075' to TD

Hole Size: 13 3/4" to 330 feet, 7 7/8" to 6301 feet

Casing/Tubing: 9 5/8" to 317.06' with 323 sacks of cement, 4 1/2" casing at 6158' with
563 sacks of cement.

Logging - Mud: 10-foot intervals from 5500 feet to TD

Mechanical: DIL surface pipe to TD (linear 2" and logarithmic 5" with
Rxo/Rt) and BHC Sonic with GR caliper from 4900' to TD with

Contractor: Sonic "F" log overlay.
Loffland Brothers of Houston, Texas

Completion Report Prepared by: J. W. Langman

Remarks: The Dakota Formation pressure of 513 psi is extremely low as compared
to the Frontier Formation pressure of 2138 psi. The Dakota pressure has
been drawn down and depleted from prolonged production in the past.

pa

COMPLETION REPORT (cont.)

Well: Clay Basin Unit #18

Area: Clay Basin Field

Cored Intervals (recovery): None

Tabulation of Drill Stem Tests:

| No. | Interval | IHP | IFP (min.) | ISIP (min.) | FFP (min.) | FSIP (min.) | FHP | Samples Caught | Remarks |
|-----|-----------|------|-------------|-------------|---------------|-------------|------|------------------|--|
| 1 | 5705-5755 | 2721 | 105-120(30) | 2138 (90) | 136-136 (120) | 2138 (300) | 2721 | Gas at separator | 104 Mcf, Rec. 189' gas cut mud |
| 2 | 6025-6247 | 2841 | 30-60 (30) | 513 (60) | 60-60 (120) | 513 (240) | 2841 | Water | 105' mud cut water |
| 3 | Misrun | | | | | | | | 20' of fill up, did not reach test interval therefore no packer seat. |
| 4 | 6264-6282 | 3005 | 30-271 (30) | 2183 (60) | 287-662 (120) | 2138 (225) | 3005 | Water | 1286' gas cut water, wt. 8.4, Res. 0.50 at 68° F., 12,500 ppm Chl, 60' water cut mud |

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
 Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for
JUL 1972, 19.....

Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

SALT LAKE CITY, UTAH 84111 Signed *J. Murphy*

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

SLC 045051B

State Lease No. _____ Federal Lease No. _____ Indian Lease No. _____ Fee & Pat.

| Sec. & 1/4 of 1/4 | Twp. | Range | Well No. | *Status | Oil Bbls. | Water Bbls. | Gas MCF's | REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test) | | |
|-------------------|------|-------|----------|---------|-----------|-------------|-----------|--|---|---|
| | | | | | | | | No. of Days Produced | | |
| NW NW 23 | 3N | 24E | 18 | SI | * | 0 | 0 | 0 | 0 | Spud February 21, 1972 T D 6,300' PBD 6,075' Shut in |

* Not Corrected for Temperature and Gravity or BS & W
 ** Flared to Atmosphere

Note: There were NO runs or sales of oil; NO M cu. ft. of gas sold; NO runs or sales of gasoline during the month.

NOTE: Report on this form as provided for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
 SI-Shut In D-Dead
 GI-Gas Injection TA-Temp. Aban.
 WI-Water Injection

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
 Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State.....Utah..... County.....Daggett..... Field or LeaseClay Basin.....

The following is a correct report of operations and production (including drilling and producing wells) for
AUG 1972, 19.....

Agent's address P. O. BOX 11368..... Company MOUNTAIN FUEL SUPPLY COMPANY
SALT LAKE CITY, UTAH 84111..... Signed E. Murphy
 Phone 328-8315..... Agent's title CHIEF ACCOUNTANT

State Lease No. Federal Lease No. S.L.C. 045051B.. Indian Lease No. Fee & Pat.

| Sec. & 1/4 of 1/4 | Twp. | Range | Well No. | *Status | Oil Bbls. | Water Bbls. | Gas MCF's | REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test) | | |
|-------------------|------|-------|----------|---------|-----------|-------------|-----------|--|---|--|
| | | | | | | | | No. of Days Produced | | |
| NW NW 23 | 3N | 24E | 18 | SI | * | 0 | 0 | 0 | 0 | Spud February 21, 1972 T D. 6,300' P B D 6,075' Initial Production August 24, 1972 Final Report See Other Report |

* Not Corrected for Temperature and Gravity or BS & W
 ** Flared to Atmosphere

Note: There were No runs or sales of oil; No M cu. ft. of gas sold; No runs or sales of gasoline during the month.

NOTE: Report on this form as provided for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
 SI-Shut In D-Dead
 GI-Gas Injection TA-Temp. Aban.
 WI-Water Injection

Anal file



CHEM LAB

WATER ANALYSIS EXCHANGE REPORT

MEMBER Mountain Fuel Supply Company
 OPERATOR Mountain Fuel Supply Company
 WELL NO. Unit 18
 FIELD Clay Basin
 COUNTY Biggott
 STATE Utah

LAB NO. 7358-1 REPORT NO. _____
 LOCATION NW NW 23-3N-24E
 FORMATION Dakota
 INTERVAL 6025-6047
 SAMPLE FROM DST No. 2
 DATE March 21, 1972

REMARKS & CONCLUSIONS: Mud/ low water loss, with black cloudy filtrate.

| Cations | | | Anions | | |
|-------------------------------|--------|-------|------------------------------|--------|-------|
| | mg/l | meq/l | | mg/l | meq/l |
| Sodium | 1331 | 57.91 | Sulfate | 1090 | 22.66 |
| Potassium | 22 | 0.56 | Chloride | 310 | 8.74 |
| Lithium | -- | -- | Carbonate | 144 | 4.80 |
| Calcium | 29 | 1.47 | Bicarbonate | 1537 | 25.21 |
| Magnesium | 18 | 1.47 | Hydroxide | -- | -- |
| Iron | absent | -- | Hydrogen sulfide | absent | -- |
| Total Cations 61.41 | | | Total Anions 61.41 | | |

Total dissolved solids, mg/l 3701
 NaCl equivalent, mg/l 2868
 Observed pH 8.7

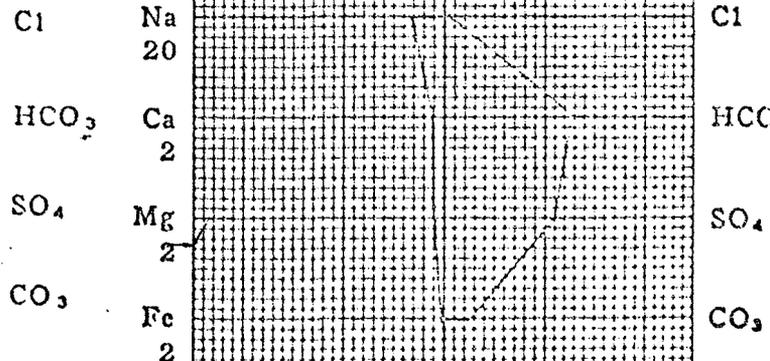
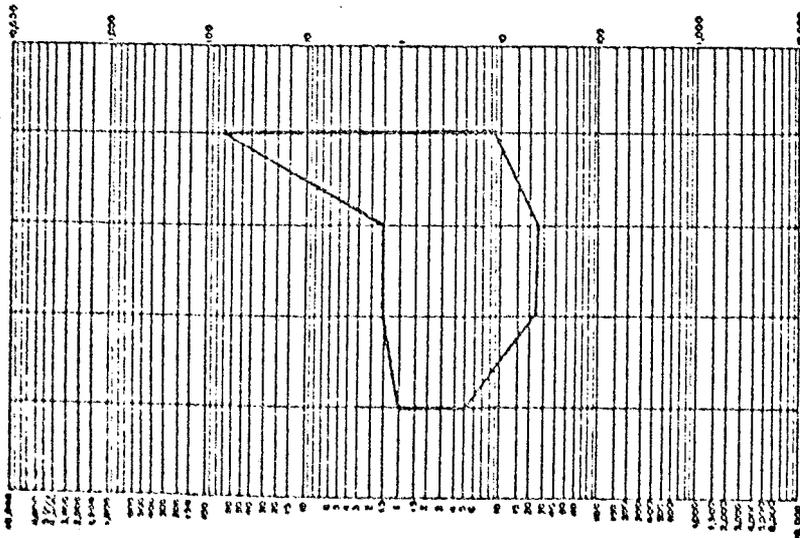
Specific resistance @ 68° F.:
 Observed 2.65 ohm-meters
 Calculated 2.20 ohm-meters

WATER ANALYSIS PATTERNS

MEQ per unit

LOGARITHMIC

STANDARD



(Na value in above graphs includes Na, K, and Li)
 NOTE: Mg/l = Milligrams per liter. Meq/l = Milligram equivalents per liter
 Sodium chloride equivalent by Dunlop & Hawthorne calculation from components



MOUNTAIN FUEL SUPPLY COMPANY
TRANSMISSION AND PRODUCTION
MEASUREMENT EQUIPMENT INSPECTION REPORT

ROCK SPRINGS, WYOMING

3N 24E 03

LOCATION: **Clay BASIN m.s. # 7** COUNTY **DAGGETT** STATE **UTAH** DATE **10-20-82**

STATION OR CUSTOMER **Clay BASIN # 18** TIME OF TEST AM **2:30** PM

ORIFICE METER MAKE **Foxboro** SERIAL NO. **2508039** TYPE **37** CHART NO. **89N418L** STATIC CON. **D.S.** PEN ARC **OK** CLOCK ROT. **31 DAY**
METER RANGE INCHES **100** POUNDS **1000** ATMOS. PRESS. **11.6** IS ATMOS SET ON CHART? Yes No TYPE OF CHART USED Sq. Root Linear

METER READING DEAD WEIGHT CHECK STATIC FOUND **6.90** STATIC LEFT **6.90** Diff. Found **0** Diff. Left **0** Temp. Found **54°** Temp. Left **54°** Time Lag **6 hrs**
D. W. Press **465**
Atmos. Press **11.6**
Static Pen Set **476.6**

DIFFERENTIAL TEST

STATIC TEST

| AS FOUND | | | | AS LEFT | | | | AS FOUND | | AS LEFT | | SQ. RT. VALUE, AS LEFT $\sqrt{\frac{476.6 \times 100}{1000}} = 6.90$ |
|------------|------------|------------|------------|------------|------------|------------|------------|----------------------------|------------|---------------------------|------------|---|
| UP | | DOWN | | UP | | DOWN | | D. W. Meter | | D. W. Meter | | |
| Man. | Meter | Man. | Meter | Man. | Meter | Man. | Meter | | | | | |
| 0 | 0 | 80 | 80 | 0 | | 80 | | | | | | |
| 10 | 10 | 60 | 60 | 10 | | 60 | | | | | | |
| 30 | 30 | 40 | 40 | 30 | SAME | 40 | | | | | | |
| 50 | 50 | 20 | 20 | 50 | | 20 | | | | | | |
| 70 | 70 | 0 | 0 | 70 | | 0 | | | | | | |
| 90 | 90 | | | 90 | | | | | | | | |
| | | | | | | | | THERMOMETER | | MAKE - Foxboro | | |
| | | | | | | | | RANGE 0° To +150° F | | SERIAL NO. 2508039 | | |
| | | | | | | | | AS FOUND | | AS LEFT | | |
| UP | | DOWN | | UP | | DOWN | | UP | DOWN | UP | DOWN | |
| Test Therm | Rec. Therm | Test Therm | Rec. Therm | Test Therm | Rec. Therm | |

ORIFICE PLATE

ORIFICE FITTING OR UNION

Size **3" x 1.500"** Make **DANIEL** Type **Simplex**
Edges Sharp? Orifice Condition Damaged? Dirty? Serial No. **ASA 600** Line Size **3.068** I.D.
Micro Horizontal Micro Vertical Meter Tube Upstream ID Downstream ID

TELEMETERING

GRAVITY: ATMOS. TEMP:

DIFFERENTIAL

PRESSURE

REMARKS:

| FOUND | | | | LEFT | | | | FOUND | | | | LEFT | | | |
|-------|-------|------|-------|------|-------|------|-------|-------|-------|------|-------|------|-------|------|-------|
| UP | | DOWN | | UP | | DOWN | | UP | | DOWN | | UP | | DOWN | |
| TEST | TRANS | TEST | TRANS | TEST | TRANS | TEST | TRANS | TEST | TRANS | TEST | TRANS | TEST | TRANS | TEST | TRANS |
| 0% | | 100% | | 0% | | 100% | | 0% | | 100% | | 0% | | 100% | |
| 25% | | 75% | | 25% | | 75% | | 25% | | 75% | | 25% | | 75% | |
| 50% | | 50% | | 50% | | 50% | | 50% | | 50% | | 50% | | 50% | |
| 75% | | 25% | | 75% | | 25% | | 75% | | 25% | | 75% | | 25% | |
| 100% | | 0% | | 100% | | 0% | | 100% | | 0% | | 100% | | 0% | |

M.F.S. CO. TESTER: **Doug Walters**
WITNESS:

PLACE LEFT INSIDE EDGE OF ORIFICE PLATE ON ARROW AND MARK BOTH INSIDE EDGES ON SCALE



MOUNTAIN FUEL SUPPLY COMPANY

180 EAST FIRST SOUTH • P. O. BOX 11368 • SALT LAKE CITY, UTAH 84139 • PHONE (801) 534-5555

April 10, 1984

Working Interest Owners
Clay Basin Unit
Daggett County, Utah and
Sweetwater County, Wyoming

Gentlemen:

Mountain Fuel Supply Company, as designated operator of the Clay Basin Unit, hereby resigns as Unit Operator under the provisions of Section 4 of the Unit Agreement subject to: WEXPRO Company being designated successor Unit Operator by the committed working interest owners and approval by the Bureau of Land Management.

WEXPRO Company, a wholly owned second tier subsidiary company of Mountain Fuel Supply Company, has assumed all of the development and producing operations of Mountain Fuel. Office and operating personnel have been transferred to WEXPRO so there will be no physical change in operations.

MOUNTAIN FUEL SUPPLY COMPANY

BY:

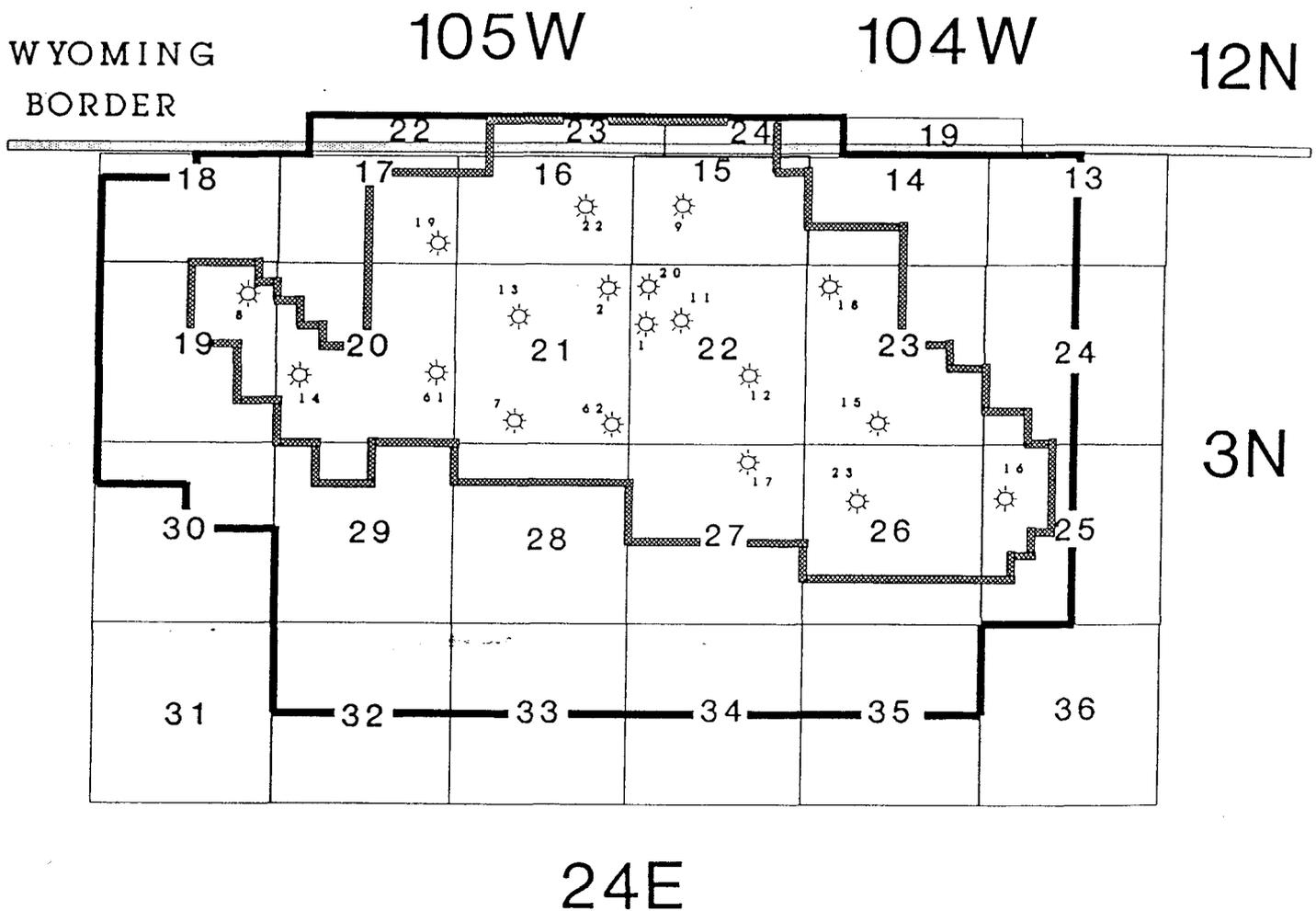


W. F. Edwards
Vice President

cc: Mr. E. W. Gynn
Chief, Branch of Fluid Minerals
Bureau of Land Management
136 East South Temple
University Club Building, 11th Floor
Salt Lake City, UT 84111

CLAY BASIN UNIT

Daggett County, Utah



 UNIT OUTLINE (UTU63009X)
 FRONTIER PA

11,162.43 ACRES

| FRONTIER PA ALLOCATION | |
|------------------------|-----------|
| FEDERAL | 82.17194% |
| STATE | 9.63096% |
| FEE | 8.19710% |
| 4,765.64 Acres | |



IN REPLY REFER TO

United States Department of the Interior

BUREAU OF LAND MANAGEMENT
UTAH STATE OFFICE
136 E. SOUTH TEMPLE
SALT LAKE CITY, UTAH 84111

April 26, 1984

WEXPRO Company
P.O. Box 11368
Salt Lake City, Utah 84139

Re: Successor Unit Operator
Clay Basin Unit
Daggett County, Utah and
Sweetwater County, Wyoming

Gentlemen:

On April 26, 1984, we received an indenture dated April 10, 1984, whereby Mountain Fuel Supply Company resigned as Unit Operator and WEXPRO Company is accepted as Successor of Unit Operator for the Clay Basin Unit Agreement, Daggett County, Utah and Sweetwater County, Wyoming.

The indenture was executed by both parties. The signatory parties have complied with Section 6 of the unit agreement. The instrument is hereby accepted effective as of April 26, 1984. Please advise all interested parties of the change in unit operator.

Sincerely,

E. W. Guynn
Chief, Branch of Fluid Minerals

Enclosure

RECEIVED
APR 30 1984

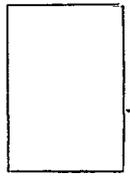
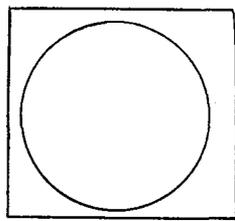
WEXPRO COMPANY
LANDS & LEASING

42.381 50 SHEETS 5 SQUARE
42.382 100 SHEETS 5 SQUARE
42.383 200 SHEETS 5 SQUARE
NATIONAL

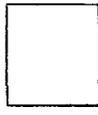


access road.

tank w/
prowall

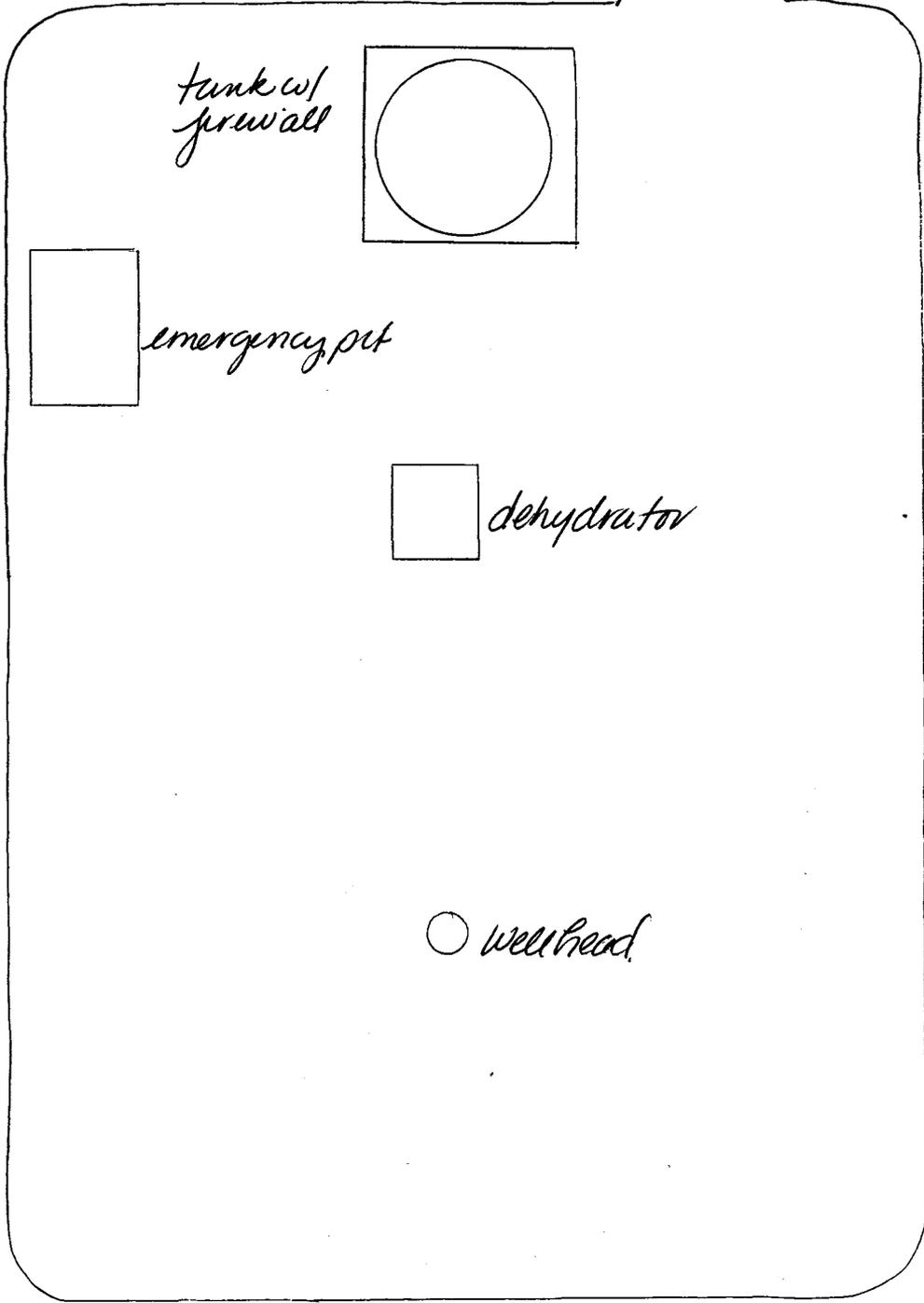


emergency pit



dehydrator

○ wellhead



MONTHLY OIL AND GAS PRODUCTION REPORT

OPERATOR NAME AND ADDRESS:

JOHN JOOSTEN
 WEXPRO COMPANY
 PO BOX 11070
 SALT LAKE CITY UT 84147

UTAH ACCOUNT NUMBER: N1070

REPORT PERIOD (MONTH/YEAR): 9 / 96

AMENDED REPORT (Highlight Changes)

| Well Name | | | Producing Zone | Well Status | Days Oper | Production Volumes | | |
|---------------|-------------------------|------------|----------------|-------------|-----------|--------------------|----------|------------|
| API Number | Entity | Location | | | | OIL(BBL) | GAS(MCF) | WATER(BBL) |
| ✓ | CLAY BASIN UNIT 14 | | | | | | | |
| 4300915638 | 01025 | 03N 24E 20 | FRTR | | | | | |
| ✓ | CLAY BASIN UNIT 15 | | | | | | | |
| 4300915639 | 01025 | 03N 24E 23 | FRTR | | | | | |
| ✓ | CLAY BASIN UNIT #16 | | | | | | | |
| 4300930003 | 01025 | 03N 24E 25 | FRTR | | | | | |
| ✓ | CLAY BASIN UNIT #17 | | | | | | | |
| 4300930004 | 01025 | 03N 24E 27 | FRTR | | | | | |
| → | CLAY BASIN UNIT #18 ← | | | | | | | |
| 4300930006 | 01025 | 03N 24E 23 | FRTR | | | | | |
| ✓ | CLAY BASIN UNIT #20 | | | | | | | |
| 4300930007 | 01025 | 03N 24E 22 | FRTR | | | | | |
| ✓ | CLAY BASIN UNIT #19 | | | | | | | |
| 4300930008 | 01025 | 03N 24E 17 | FRTR | | | | | |
| ✓ | CLAY BASIN UNIT #23 | | | | | | | |
| 4300930009 | 01025 | 03N 24E 26 | FRTR | | | | | |
| ✓ | CLAY BASIN UNIT #22 | | | | | | | |
| 4300930010 | 01025 | 03N 24E 16 | FRTR | | | | ML-807 | |
| ✓ | CLAY BASIN UNIT #61 | | | | | | | |
| 4300930060 | 01025 | 03N 24E 20 | FRTR | | | | | |
| ✓ | CLAY BASIN UNIT #62 | | | | | | | |
| 4300930061 | 01025 | 03N 24E 21 | FRTR | | | | | |
| | CARTER-LEVERTON STATE 1 | | | | | | | |
| 4303710529 | 01031 | 33S 26E 32 | ISMY | | | | | |
| | PIUTE KNOLL #1 | | | | | | | |
| 4303730097 | 01032 | 33S 25E 26 | ISMY | | | | | |
| TOTALS | | | | | | | | |

COMMENTS: _____

I hereby certify that this report is true and complete to the best of my knowledge.

Date: _____

Name and Signature: _____

Telephone Number: _____

OPERATOR CHANGE WORKSHEET

| | |
|-------|--------|
| 1-LEC | 6-DEC |
| 2-GLH | 7-KDR |
| 3-DTS | 8-SJ |
| 4-VLD | 9-FILE |
| 5-RJF | |

Attach all documentation received by the division regarding this change.
Initial each listed item when completed. Write N/A if item is not applicable.

- Change of Operator (well sold) Designation of Agent
 Designation of Operator Operator Name Change Only

The operator of the well(s) listed below has changed, effective: 4-26-84

TO: (new operator) WEXPRO COMPANY
(address) PO BOX 11070
SALT LAKE CITY UT 84147
Phone: (801)530-2586
Account no. N1070

FROM: (old operator) MOUNTAIN FUEL SUPPLY CO
(address) 180 E 100 S
SALT LAKE CITY UT 84139
Phone: (801)534-5267
Account no. N0680

WELL(S) attach additional page if needed:

***CLAY BASIN UNIT**

| | | | | | | |
|-------------------------------|------------|---------------|---------|---------|---------|--------------|
| Name: **SEE ATTACHED** | API: _____ | Entity: _____ | S _____ | T _____ | R _____ | Lease: _____ |
| Name: _____ | API: _____ | Entity: _____ | S _____ | T _____ | R _____ | Lease: _____ |
| Name: _____ | API: _____ | Entity: _____ | S _____ | T _____ | R _____ | Lease: _____ |
| Name: _____ | API: _____ | Entity: _____ | S _____ | T _____ | R _____ | Lease: _____ |
| Name: _____ | API: _____ | Entity: _____ | S _____ | T _____ | R _____ | Lease: _____ |
| Name: _____ | API: _____ | Entity: _____ | S _____ | T _____ | R _____ | Lease: _____ |

OPERATOR CHANGE DOCUMENTATION

- N/A 1. (r649-8-10) Sundry or other legal documentation has been received from the **FORMER** operator (attach to this form). ** See Comments.*
- N/A 2. (r649-8-10) Sundry or other legal documentation has been received from the **NEW** operator (Attach to this form). ** See Comments.*
- N/A 3. The Department of Commerce has been contacted if the new operator above is not currently operating any wells in Utah. Is the company registered with the state? (yes/no) _____ If yes, show company file number: _____.
- Yes 4. **FOR INDIAN AND FEDERAL WELLS ONLY.** The BLM has been contacted regarding this change. Make note of BLM status in comments section of this form. BLM approval of Federal and Indian well operator changes should ordinarily take place prior to the division's approval, and before the completion of steps 5 through 9 below.
- N/A 5. Changes have been entered in the Oil and Gas Information System (3270) for each well listed above. ** See Comments.*
- N/A 6. Cardex file has been updated for each well listed above. ** See Comments.*
- Yes 7. Well file labels have been updated for each well listed above. (11-6-96)
- N/A 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to Trust Lands, Sovereign Lands, UGS, Tax Commission, etc. ** See Comments.*
- Yes 9. A folder has been set up for the Operator Change file, and a copy of this page has been placed there for reference during routing and processing of the original documents.

ENTITY REVIEW

- Lic 1. (r649-8-7) Entity assignments have been reviewed for all wells listed above. Were entity changes made? (yes/no) (no) ____ If entity assignments were changed, attach copies of Form 6, Entity Action Form.
- N/A 2. Trust Lands, Sovereign Lands, Tax Commission, etc., have been notified through normal procedures of entity changes.

BOND VERIFICATION - (FEE WELLS ONLY)

- N/A Lic 1. (r649-3-1) The NEW operator of any fee lease well listed above has furnished a proper bond.
- ____ 2. A copy of this form has been placed in the new and former operator's bond files.
- ____ 3. The FORMER operator has requested a release of liability from their bond (yes/no) _____, as of today's date _____. If yes, division response was made to this request by letter dated _____.

LEASE INTEREST OWNER NOTIFICATION OF RESPONSIBILITY

- N/A 1. Copies of documents have been sent on _____ to _____ at Trust Lands for changes involving State leases, in order to remind that agency of their responsibility to review for proper bonding.

FILMING

- ✓ 1. All attachments to this form have been microfilmed. Today's date: _____.

FILING

- ____ 1. Copies of all attachments to this form have been filed in each well file.
- ____ 2. The original of this form, and the original attachments are now being filed in the Operator Change file.

COMMENTS

9/6/11/06 DoGen Computer & Cardex updated 4/84.
Labels & well files being updated now; error caught by "Well Records".

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

5. LEASE DESIGNATION AND SERIAL NO.

SEE ATTACHED SHEET

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NA

7. IF UNIT OR CA, AGREEMENT DESIGNATION

CLAY BASIN
UNIT AGREEMENT # 892000323B

8. WELL NAME AND NO.

SEE ATTACHED SHEET

9. API WELL NO.

SEE ATTACHED SHEET

10. FIELD AND POOL, OR EXPLORATORY AREA

CLAY BASIN

11. COUNTY OR PARISH, STATE

DAGGET COUNTY UTAH

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE ATTACHED SHEET

Handwritten notes:
1-CHD
~~2-Platts~~
3-OK
Copy for file
well on
back of Sundry

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF N

TYPE OF SUBMISSION

Notice of Intent
 Subsequent Report
 Final Abandonment Notice

Abandonment
 Recompletion
 Plugging Back
 Casing Repair
 Altering Casing
 Other VARIANCE

ER DATA

Change in Plans
 New Construction
 Non-Routine Fracturing
 Water Shut-Off
 Conversion to Injection
 Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Wexpro Company is requesting a variance from the requirement to install Enardo vent stack valves on the storage tanks for the wells listed on the attached sheet. This request is due to the potential freezing problems encountered with the Enardo vent stack valves. In the past storage tanks have been over pressured, as they could not vent, and once over pressured ruptured causing the top of the tank to be thrown from the tank. The potential tank damage, loss of fluids, fire and ground contamination are our primary safety and environmental concerns for this request.

RECEIVED

OCT 28 2002

DIVISION OF
OIL, GAS AND MINING

Accepted by the
Utah Division
Oil, Gas and

Date:

By:

Handwritten: List of wells on back.

Federal Approval Of This
Action Is Necessary

Stamp: COPY SENT TO OPERATOR
DATE: 10-29-02
BY: CHD

14. I hereby certify that the foregoing is true.

Signed *[Signature]*

Title Title G. T. Nimmo, Operations Manager

Date October 21, 2002

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____

Title 18 U.S. C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

| <u>WELL NAME</u> | <u>API NUMBER</u> | <u>LEGAL DESCRIPTION</u> | <u>COUNTY, STATE</u> | <u>UNIT CAPA NUMBER</u> | <u>LEASE NUMBER</u> |
|-------------------------------------|-------------------|--------------------------|----------------------|-------------------------|---------------------|
| <u>CLAY BASIN FIELD UNIT</u> | | | | 892000323B | |
| UNIT NO. 1 | 4300915625 | SW NW 22-3N-24E | DAGGETT, UT | | SL-045051-a |
| UNIT NO. 7 | 4300915631 | SE SW 21-3N-24E | DAGGETT, UT | | SL-045051-b |
| UNIT NO. 8 | 4300915632 | NE NE 19-3N-24E | DAGGETT, UT | | SL-062508 |
| UNIT NO. 9 | 4300915633 | NE SW 15-3N-24E | DAGGETT, UT | | SL-045051-b |
| UNIT NO. 12 | 4300915636 | NW SE 22-3N-24E | DAGGETT, UT | | SL-045051-a |
| UNIT NO. 13 | 4300915637 | SE NW 21-3N-24E | DAGGETT, UT | | SL-045051-a |
| UNIT NO. 14 | 4300915638 | NW SW 20-3N-24E | DAGGETT, UT | | SL-062508 |
| UNIT NO. 15 | 4300915639 | SE SW 23-3N-24E | DAGGETT, UT | | SL-045051-b |
| UNIT NO. 16 | 4300930003 | SW NW 25-3N-24E | DAGGETT, UT | | SL-045049 |
| UNIT NO. 17 | 4300930004 | NW NE 27-3N-24E | DAGGETT, UT | | SL-045053-a |
| UNIT NO. 18 | 4300930006 | NW NW 23-3N-24E | DAGGETT, UT | | SL-045051-b |
| UNIT NO. 19 | 4300930008 | SE SE 17-3N-24E | DAGGETT, UT | | SL-045051-b |
| UNIT NO. 20 | 4300930007 | NW NW 22-3N-24E | DAGGETT, UT | | SL-045051-a |
| UNIT NO. 22 | 4300930001 | NW SE 16-3N-24E | DAGGETT, UT | | ML-807 |
| UNIT NO. 23 | 4300930009 | SE NW 26-3N-24E | DAGGETT, UT | | SL-045053-b |
| UNIT NO. 61 | 4300930060 | NE SE 20-3N-24E | DAGGETT, UT | | SL-045051-b |
| UNIT NO. 62 | 4300930061 | SE SE 21-3N-24E | DAGGETT, UT | | SL-045051-b |

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on page 2.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Wexpro Company

3a. Address
 P.O. Box 458
 Rock Springs, WY 82902

3b. Phone No. (include area code)
 307.382.9791

4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Lat. 40.98813
 665' FNL 532' FWL NW NW 23-3N-24E Long. -109.18056

5. Lease Serial No.
 SL-045051-a

6. If Indian, Allottee, or Tribe Name
 N/A

7. If Unit or CA. Agreement Name and/or No.
 Clay Basin Unit

8. Well Name and No.
 Clay Basin Unit 18

9. API Well No.
 43009-30006

10. Field and Pool, or Exploratory Area
 Frontier

11. County or Parish, State
 Daggett Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | | TYPE OF ACTION | | | |
|---|---|---|---|---|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input checked="" type="checkbox"/> Production (Start/ Resume) | <input type="checkbox"/> Water Shut-off | |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity | |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other _____ | |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and abandon | <input type="checkbox"/> Temporarily Abandon | | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug back | <input type="checkbox"/> Water Disposal | | |

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

The above well resumed production on December 6, 2007 after being off more than 90 days.

14. I hereby certify that the foregoing is true and correct.

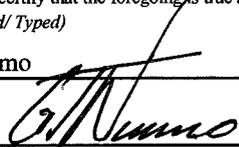
Name (Printed/ Typed)

G.T. Nimmo

Title

Operations Manager

Signature



Date

December 12, 2007

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

DEC 14 2007

DIV. OF OIL, GAS & MINING

**Federal Approval of this
Action is Necessary**

API Well No: 43009300060000

| | |
|---|--|
| <p>STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING</p> | <p>FORM 9</p> |
| <p>SUNDRY NOTICES AND REPORTS ON WELLS</p> <p>Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.</p> | <p>5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051B</p> |
| <p>1. TYPE OF WELL Gas Well</p> | <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</p> |
| <p>2. NAME OF OPERATOR: WEXPRO COMPANY</p> | <p>7. UNIT or CA AGREEMENT NAME: CLAY BASIN</p> |
| <p>3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902</p> | <p>8. WELL NAME and NUMBER: CLAY BASIN UNIT 18</p> |
| <p>4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 0532 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 23 Township: 03.0N Range: 24.0E Meridian: S</p> | <p>9. API NUMBER: 43009300060000</p> |
| <p>PHONE NUMBER: 307 922-5612 Ext</p> | <p>9. FIELD and POOL or WILDCAT: CLAY BASIN</p> |
| <p>COUNTY: DAGGETT</p> | <p>STATE: UTAH</p> |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|--|--|---|
| <p><input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 11/6/2009</p> <p><input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:</p> <p><input type="checkbox"/> SPUD REPORT Date of Spud:</p> <p><input type="checkbox"/> DRILLING REPORT Report Date:</p> | <p><input type="checkbox"/> ACIDIZE</p> <p><input type="checkbox"/> CHANGE TO PREVIOUS PLANS</p> <p><input type="checkbox"/> CHANGE WELL STATUS</p> <p><input type="checkbox"/> DEEPEN</p> <p><input type="checkbox"/> OPERATOR CHANGE</p> <p><input type="checkbox"/> PRODUCTION START OR RESUME</p> <p><input type="checkbox"/> REPERFORATE CURRENT FORMATION</p> <p><input type="checkbox"/> TUBING REPAIR</p> <p><input type="checkbox"/> WATER SHUTOFF</p> <p><input type="checkbox"/> WILDCAT WELL DETERMINATION</p> | <p><input type="checkbox"/> ALTER CASING</p> <p><input type="checkbox"/> CHANGE TUBING</p> <p><input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS</p> <p><input type="checkbox"/> FRACTURE TREAT</p> <p><input type="checkbox"/> PLUG AND ABANDON</p> <p><input type="checkbox"/> RECLAMATION OF WELL SITE</p> <p><input type="checkbox"/> SIDETRACK TO REPAIR WELL</p> <p><input type="checkbox"/> VENT OR FLARE</p> <p><input type="checkbox"/> SI TA STATUS EXTENSION</p> <p><input type="checkbox"/> OTHER</p> | <p><input type="checkbox"/> CASING REPAIR</p> <p><input type="checkbox"/> CHANGE WELL NAME</p> <p><input type="checkbox"/> CONVERT WELL TYPE</p> <p><input checked="" type="checkbox"/> NEW CONSTRUCTION</p> <p><input type="checkbox"/> PLUG BACK</p> <p><input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION</p> <p><input type="checkbox"/> TEMPORARY ABANDON</p> <p><input type="checkbox"/> WATER DISPOSAL</p> <p><input type="checkbox"/> APD EXTENSION</p> <p>OTHER: _____</p> |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Wexpro Company and Questar Gas Management intend to upgrade the existing gas metering equipment. The upgrade will consist of the installation of towers and antennas for radio communications. The Rohn tower will be approximately 20 feet high. The cement base will be buried. The base is 2 feet in diameter and 3 feet in height. The Rohn tower will be used to mount the new flow computer and communication equipment needed to communicate volume data from the well sites to a central SCADA computer located at Red Wash. Questar Gas Management will also be replacing the existing EFM and installing a Fisher FB 107, Fisher 205P MVS and a PGI Temperature Element and any other associated equipment. Please see attached diagrams for placement of the Rohn tower and Specification sheets.

**Approved by the
Utah Division of
Oil, Gas and Mining**

Date: November 02, 2009

By: *Derek DeWitt*

| | | |
|---|-------------------------------------|--|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 922-5647 | TITLE Associate Permit Agent |
| SIGNATURE N/A | | DATE 11/2/2009 |

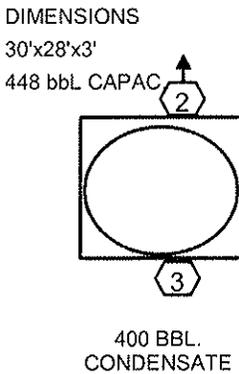
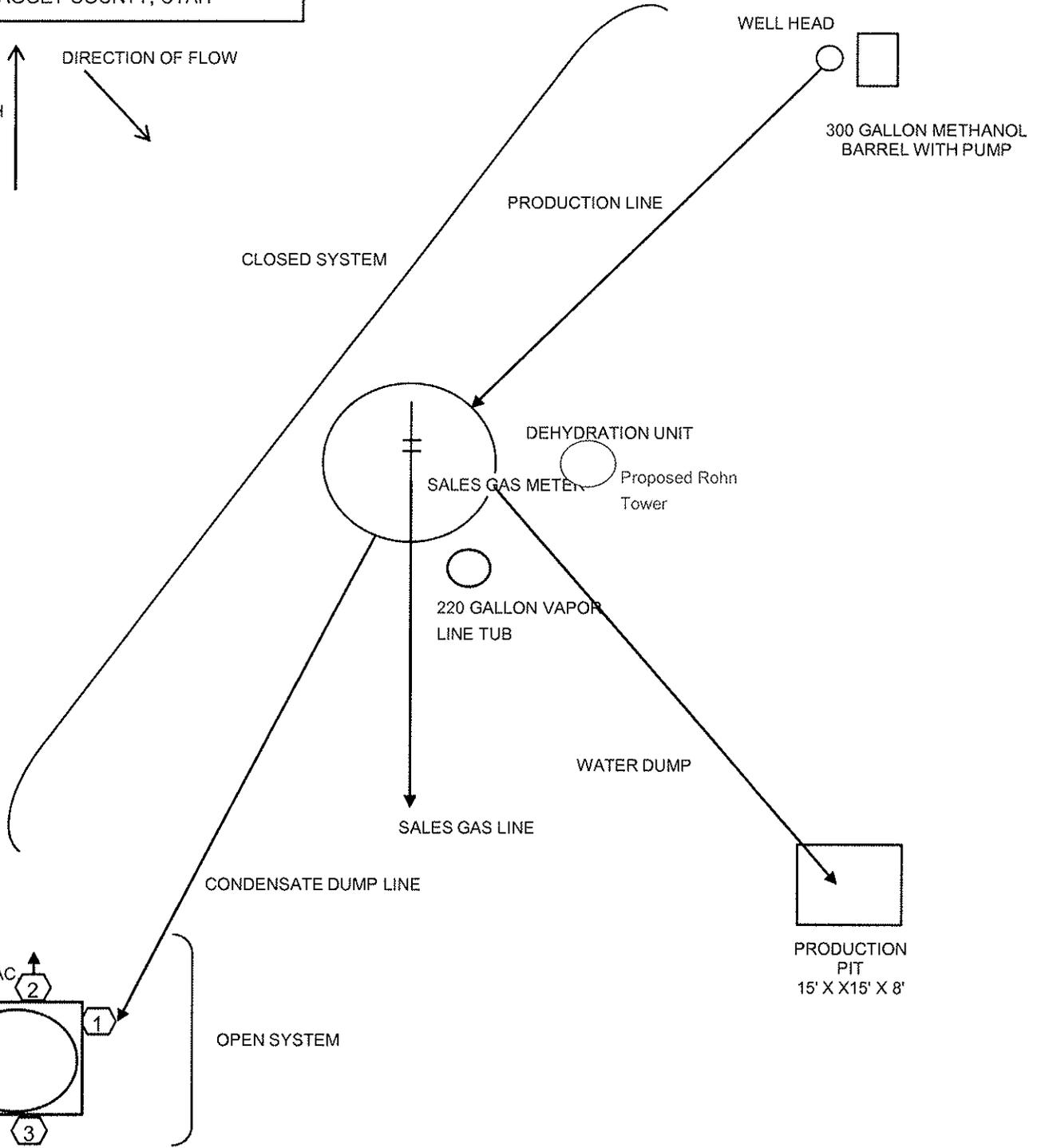
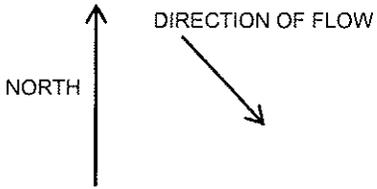
RECEIVED November 02, 2009

WEXPRO COMPANY
P.O. BOX 458
ROCK SPRINGS, WY 82902

CLAY BASIN UNIT WELL 18
 NWNW 23-3N-24E
 LEASE NO. SL-045051-b
 UNIT NO. 892000323B
 DAGGET COUNTY, UTAH

NOTE: THIS LEASE FALLS UNDER THE SITE & SECURITY PLAN ESTABLISHED BY WEXPRO COMPANY. THE PLAN CAN BE REVIEWED AT THE WEXPRO OFFICE IN ROCK SPRINGS WYOMING WEEKDAYS BETWEEN 7:00 AM AND 5:00 PM

| VALVE LEGEND | |
|--------------|---|
| TANK # 308 | |
| VALVE # 1 -- | OPEN DURING PRODUCTION, SEALED CLOSED DURING SALES |
| VALVE # 2 -- | OPEN DURING SALES, SEALED CLOSED DURING PRODUCTION |
| VALVE # 3 -- | OPEN ONLY TO DRAIN WATER, SEALED CLOSED DURING PRODUCTION |



| REVISIONS: |
|--|
| 03/25/2003 ADDED METHANOL BARREL AND PUMP |
| 03/25/2003 ADDED PRODUCTION PIT DIMENSIONS |
| 12/11/2008 ADDED TANK INFORMATION |
| 5/29/2009 ADDED VAPOR TUB, LRGR METH TANK |

FloBoss™ 107 Flow Manager.

The FloBoss™ 107 Flow Manager introduces a new technology platform to the FloBoss family of flow computers that raises the bar for modularity, versatility, performance, and ease of use. Whether you need a single or multi-run flow computer or few or many I/O points, the new FloBoss 107 can accommodate your needs. The FloBoss 107 is the ideal measurement solution for many natural gas applications. These include, but are not limited to:

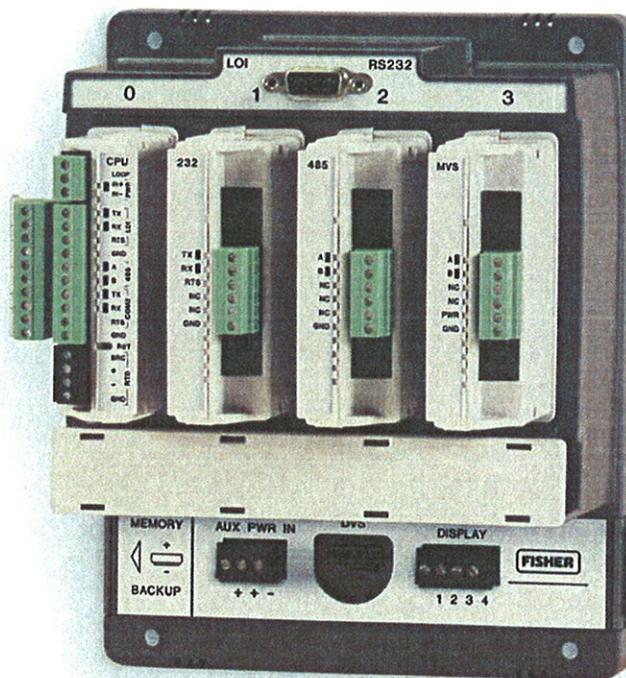
- Custody Transfer
- Wellhead Measurement and Control
- Well Injection Pressure
- Compressor Fuel Gas
- Industrial Gas Usage
- Commercial Gas Usage

The new FloBoss 107 offers you benefits that research has shown flow computer users request. You also get all of the tried and true features of previous FloBoss units such as accurate AGA calculations, data archival, broad communications support, low power consumption, PID loop control, FST control, and operation over extreme temperatures.

API/AGA/ISO Compliant Flow Measurement. The FloBoss 107 maintains API Chapter 21.1 compliant historical archives for measured and calculated values, as well as events and alarms. The firmware has the capability to perform AGA3 orifice flow calculations or AGA7 pulse flow calculations using AGA8 compressibility. It also performs ISO 5167 flow calculations. Other gas flow or properties calculations can be implemented using User C programs.

One to Four Meter Runs. The FloBoss 107 features a built-in dual-variable sensor (DVS) port and RTD input for handling a single meter run. For multiple runs, an optional multi-variable sensor (MVS) module supports up to four remote MVS units.

Scalable and Configurable I/O. You can add a configurable I/O board to the CPU module and up to three configurable I/O modules to the base FloBoss 107. For even more capacity, add an expansion rack to house up to three additional I/O modules.



FloBoss 107 Base Unit

Local or Host Operation. The FloBoss 107 is configured and operated on-site using our Windows® based ROCLINK™ 800 Configuration Software. The FloBoss 107 can also be configured and operated from a computer running popular host software packages. Modbus ASCII and RTU slave or host protocols, as well as native ROC protocol, are supported.

More Communication Choices. The FloBoss 107 comes standard with 3 ports: local operator interface, RS-232, and RS-485. One additional port is supported using an expansion communication module.

Built-in Control Capability. The FloBoss 107 can perform PID control on 8 loops using analog or discrete outputs. A wide range of control problems can be solved easily and quickly with outstanding results. It can also perform logic and sequencing control by means of Function Sequence Tables (FSTs).

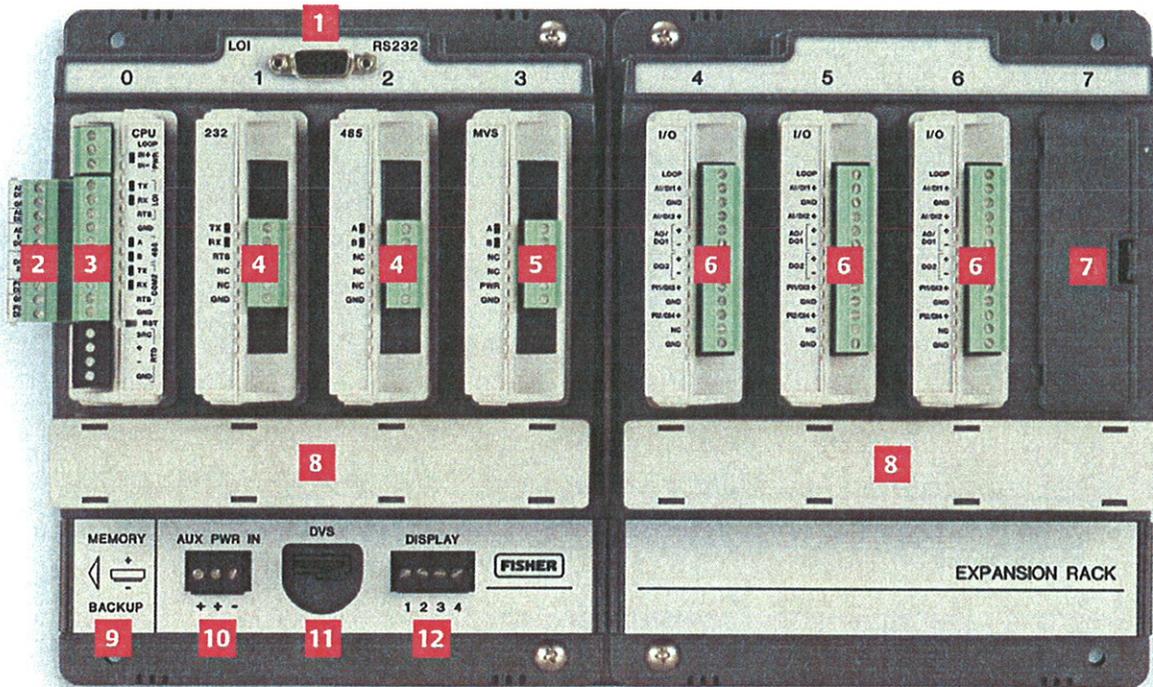
Remote Automation Solutions

Phone (641) 754-3449 Toll Free (800) 807-0730 (US & Canada only)

FAX (641) 754-3630

Website: www.EmersonProcess.com/flow





Base unit (left) provides the backplane, module slots, ports, and electrical interconnections for the FloBoss 107. Dimensions are 204 mm H by 153 mm W by 140 mm D (8 in. H by 6 in. W by 5.5 in. D). Expansion rack (right) plugs into base unit and provides backplane and slots for additional modules. (Same dimensions as base unit).

- 1 Local operator interface port (RS-232) communicates to a laptop or similar PC device for local configuration and data retrieval.
- 2 I/O card is available for the CPU module. Five of the six I/O points are configurable by type (AI/DI, AI/DO, AO/DO, DI/PI, DI/PI) and the sixth is a DO.
- 3 CPU module contains the main processing unit, memory, operational firmware, RS-232 port, RS-485 port, and RTD input.
- 4 Communication modules are available for a second RS-232 port or RS-485 port.
- 5 MVS module supports up to six multi-variable sensor units for differential pressure flow measurement. One MVS module can be used in either slot 4 of the base unit or expansion rack.

- 6 I/O modules provide six I/O points (same as I/O card). Up to six I/O modules can be plugged into the FloBoss 107. 24 Vdc loop power is provided.
- 7 Module slots accommodate I/O and communication modules and are protected by removable covers when not used.
- 8 Covered wiring tray neatly routes field wiring to and from modules.
- 9 Battery compartment uses lithium battery to backup RAM in the CPU.
- 10 Input power range for the FloBoss 107 and I/O is 8 to 30 Vdc.
- 11 DVS port provides a serial data link to a dual-variable sensor (DVS) unit.
- 12 Display port connects a keypad / display unit to the FloBoss 107. Supports ROC and Modbus slave protocols.

©2006 Fisher Controls International, LLC.

FloBoss and ROCLINK are marks of one of the Emerson Process Management companies. All other marks are the property of their respective owners.

This publication is presented for informational purposes only, and while every effort has been made to ensure its accuracy, its content is not to be construed as a warranty or guarantee, expressed or implied, regarding the products described herein or their use or applicability.

ISO 9001:2000



Certificate No. 004372
Certificate No. 005912

MVS205 Multi-Variable Sensor

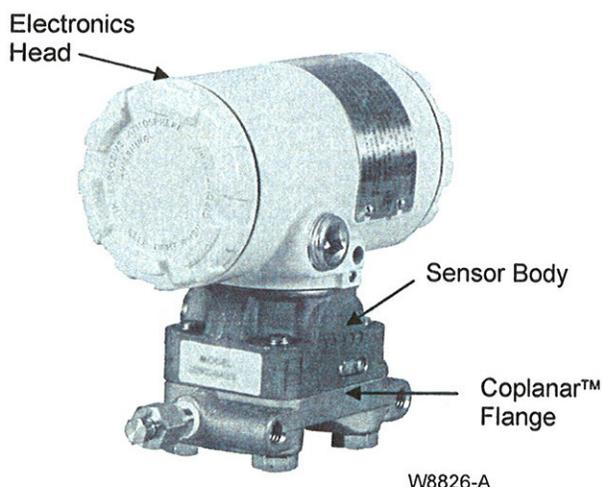
The MVS205 Multi-Variable Sensor (version 1.12 or greater) provides static pressure, differential pressure, and process temperature inputs directly to a ROC 300/800 Series Remote Operations Controller or FloBoss™ 407/500 Series Flow Manager. The inputs from an MVS sensor are used in performing differential pressure type calculations. The MVS205 typically operates as a remote unit that communicates via a serial format.

FloBoss 407 units may use a remote or integral MVS205 sensor. ROC300-Series controllers must be equipped with a Remote MVS Interface (CMA8H). FloBoss 500-Series units must be equipped with a Remote MVS Interface (CR1).

Variables

Functionally, the MVS is a sensor device that measures three flow-related variables simultaneously: differential pressure, static pressure, and temperature. These variables are continuously available to the FloBoss or ROC unit that polls the MVS.

An external three or four-wire RTD is used to sense the process temperature. **The RTD sensor is connected directly to the interface circuit board in the MVS sensor housing.** User-supplied RTD field wiring is required for the connection.



MVS205 Multi-Variable Sensor

Transducer and Interface Circuit

The MVS consists of a transducer and an interface circuit. The transducer, contained in the sensor body, uses capacitance-cell technology to sense differential pressure and piezoresistive technology to sense the static (absolute or gauge) pressure.

The transducer electronics convert the pressure variables directly into a digital format, allowing accurate correction and compensation. The raw temperature is converted by the interface board into digital format. A microprocessor linearizes and corrects the raw pressure signals (from the sensor) using characterization data stored in non-volatile memory.

The interface circuit allows the MVS to connect to and communicate with a ROC or FloBoss using a serial EIA-485 (RS-485) connection. In a Remote MVS, this interface circuit board is enclosed in an explosion-proof electronics head.

Accuracy

Two versions of the MVS sensor are available: MVS205P with reference accuracy of 0.075% and MVS205E with reference accuracy of 0.10%.

Mounting

Attached to the bottom of the sensor body is a Coplanar™ flange. This flange, which provides drain/vent valves, allows the MVS to be mounted on a pipestand, on a wall or panel, or on an integral orifice assembly or manifold valve.

Approvals

A list of North American approvals can be found in the Specifications table on page 2. For information on the European ATEX approved version, please refer to Specification Sheet 2.5:MVSCE.

Specifications

DIFFERENTIAL PRESSURE INPUT

Range: 0 to 6.22 kPa (0 to 25" H₂O),
0 to 62.2 kPa (0 to 250" H₂O), or
0 to 248.8 kPa (0 to 1000" H₂O).

Reference Accuracy:

±0.075% of URL (upper range limit) (for MVS205P)

±0.10% of URL (for MVS205E).

Includes linearity, hysteresis, and repeatability effects for spans up to 10:1 turndown.

Stability: ±0.1% of URL for 12 months.

Over Pressure Limit: 250 bar (3626 psi) Applied on either or both sides without damage to the sensor.

STATIC PRESSURE INPUT

Range: Either Absolute or Gauge:

0 to 5516 kPa (0 to 800 psia/psig)

0 to 25,000 kPa (0 to 3626 psia/psig)

Reference Accuracy:

±0.075% of URL (for MVS205P)

±0.10% of URL (for MVS205E).

Includes linearity, hysteresis, and repeatability effects for spans up to 6:1 turndown.

Stability: ±0.1% of URL for 12 months.

Over Pressure Limit: Same as URL.

PROCESS TEMPERATURE INPUT (MVS205 REMOTE ONLY)

Type: For 3 or 4-wire platinum 100-ohm RTD (conforming to IEC 751 Class B), with $\alpha = 0.00385$.

Range: -40 to 400°C (-40 to 752°F).

Reference Accuracy: ±0.28°C (±0.5°F), exclusive of RTD sensor error. Specification includes linearity, hysteresis, and repeatability effects.

Excitation Current: 1.24 mA.

OUTPUT (MVS205 REMOTE ONLY)

EIA-485 (RS-485) asynchronous serial communication using Modbus protocol for up to 605 m (2000 ft) distance.

POWER

Input at 0 to 75°C: 8 to 30 V dc, 245 mW average.

Input at -40 to 0°C: 8.5 to 30 V dc, 245 mW average.

Supplied by ROC, FloBoss, or Remote MVS Interface.

WEIGHT

Including head, 3.0 kg (6.7 lb).

ENVIRONMENTAL

Operating Temperature: -40 to 75°C (-40 to 167°F).

Storage Temperature: -50 to 100°C (-58 to 230°F).

Operating Humidity: 0 to 99%, non-condensing.

DIMENSIONS

147 mm H by 163 mm W by 84 mm D (5.8 in. H by 6.4 in. W by 3.3 in. D).

VIBRATION EFFECT

Sensor outputs shall not shift more than +0.1% of upper range limit per g from 5 to 2000 Hz in any axis when tested per IEC 770, Section 6.2.14.

CONSTRUCTION

Sensor Body and Coplanar Flange: 316 SST.

Wetted Parts: 316 SST is standard; Hastelloy C (NACE compliant) is available. Wetted O-rings are glass-filled TFE.

Electronics Head (MVS205 Remote): Urethane-painted die-cast aluminum alloy, rated Type 4X.

MOUNTING (MVS205 REMOTE ONLY)

Pipestand: Mounts on 50 mm (2 in.) pipe with U-bolt and optional flange bracket.

Wall/panel: Mounts with optional flange bracket, bolted on 71 mm (2.8 in.) centers.

CONNECTIONS

Conduit: Head has two 1/2-inch NPT connections.

Process: 1/4-18 NPT on 2-1/8 inch centers.

APPROVALS (MVS205 REMOTE ONLY)

Evaluated per the Following Standards:

CSA C22.2 No. 30.

CSA C22.2 No. 213.

UL 1203, UL 1604.

Certified by CSA as: MVS205R Models RSE or RSP Series.

Product Markings for Hazardous Locations:

Class I, Division 1, Groups C and D.

Class I, Division 2, Groups A, B, C, and D, T5

(T_{amb}=70°C), T4 (T_{amb}=75°C).

Approved by Industry Canada for use with approved flow computers. Approved as MVS205R Series Remote Sensors (Measurement Canada approval # AG-0412).

Approved by the Alberta Boilers Safety

Association: Approval # 0F0792.2

FloBoss is a mark of one of the Emerson Process Management companies. The Emerson logo is a trademark and service mark of Emerson Electric Co. All other marks are the property of their respective owners. The contents of this publication are presented for informational purposes only. While every effort has been made to ensure informational accuracy, they are not to be construed as warranties or guarantees, express or implied, regarding the products or services described herein or their use or applicability. Fisher Controls reserves the right to modify or improve the designs or specifications of such products at any time without notice.

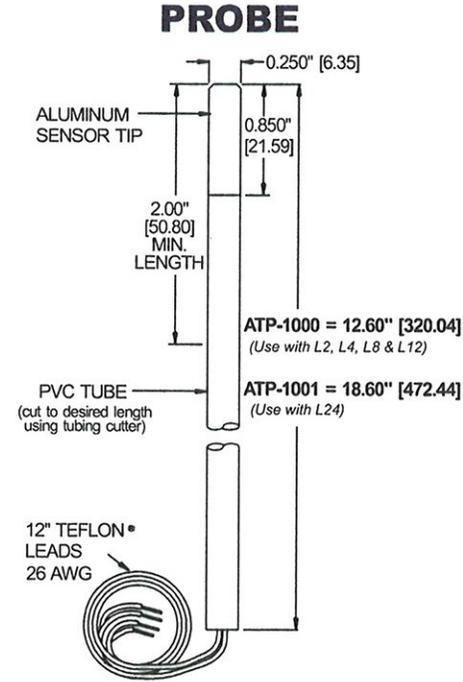
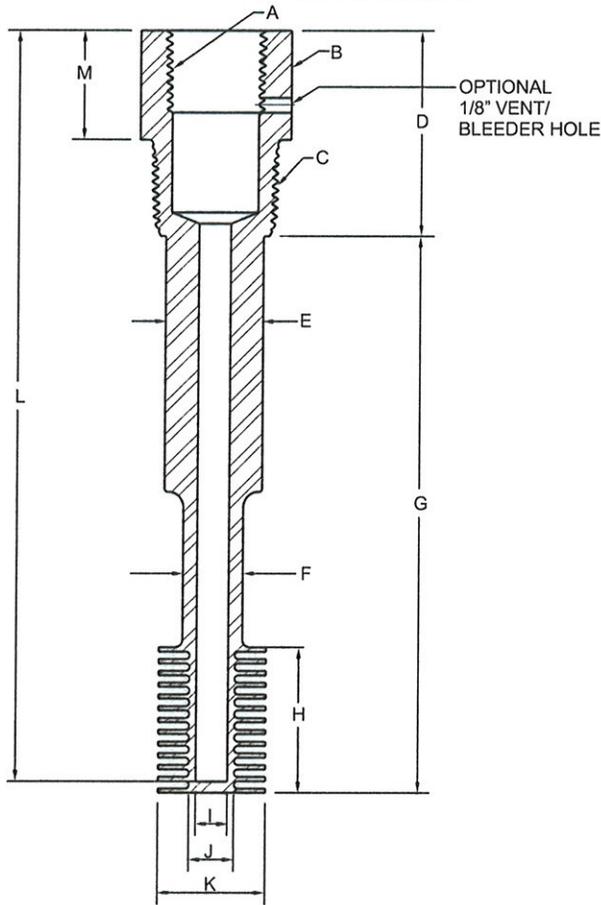
Emerson Process Management
Flow Computer Division
Marshalltown, IA 50158 U.S.A.
Houston, TX 77041 U.S.A.
Pickering, North Yorkshire UK Y018 7JA

© Fisher Controls International, LLC. 1995-2005. All Rights Reserved.



Thermosync Specifications

THERMOSYNC MODEL NO. DIMENSIONS



ATP-1000 & ATP-1001 Probe Specifications:
Type: 4-Wire Platinum Wire-Wound RTD Element
Resistance: 100 Ohms at 0°C (IEC 751)
Alpha Coefficient: .00385
Accuracy: ±0.05°C
Temp. Range: -40°C to +60°C
 -40°F to +140°F
Calibration/Accuracy Certification Service Available.

| Part Number | PROCESS CONN. | | | | | | | | | | | | |
|--------------|---------------|--------|----------|-------|-------|-------|-------|-------|-------|------|-------|--------|------|
| | A | B | C | D | E | F | G | H | I | J | K | L | M |
| TAN-12C0-L2 | 1/2" NPT | 1.25" | 1/2" NPT | 1.69" | 0.633 | .495" | 2.22" | 1.20" | .260" | .37" | .645" | 3.88" | .90" |
| TAN-12C0-L4 | 1/2" NPT | 1.25" | 1/2" NPT | 1.69" | 0.633 | .495" | 2.98" | 1.20" | .260" | .37" | .645" | 4.75" | .90" |
| TAN-12C0-L8 | 1/2" NPT | 1.25" | 1/2" NPT | 1.69" | 0.633 | .495" | 4.59" | 1.20" | .260" | .37" | .645" | 6.37" | .90" |
| TAN-12C0-L12 | 1/2" NPT | 1.25" | 1/2" NPT | 1.69" | 0.633 | N/A | 6.66" | 1.20" | .260" | .37" | .645" | 8.45" | .90" |
| TAN-12C0-L24 | 1/2" NPT | 1.25" | 1/2" NPT | 1.69" | 0.633 | N/A | 9.89" | 1.20" | .260" | .37" | .645" | 11.67" | .90" |
| TAN-34C0-L2 | 1/2" NPT | 1.25" | 3/4" NPT | 1.69" | 0.808 | .495" | 2.22" | 1.20" | .260" | .37" | .85" | 3.82" | .90" |
| TAN-34C0-L4 | 1/2" NPT | 1.25" | 3/4" NPT | 1.69" | 0.808 | .495" | 2.98" | 1.20" | .260" | .37" | .85" | 4.56" | .90" |
| TAN-34C0-L8 | 1/2" NPT | 1.25" | 3/4" NPT | 1.69" | 0.808 | .495" | 4.59" | 1.20" | .260" | .37" | .85" | 6.20" | .90" |
| TAN-34C0-L12 | 1/2" NPT | 1.25" | 3/4" NPT | 1.69" | 0.808 | N/A | 6.66" | 1.20" | .260" | .37" | .85" | 8.26" | .90" |
| TAN-34C0-L24 | 1/2" NPT | 1.25" | 3/4" NPT | 1.69" | 0.808 | N/A | 9.89" | 1.20" | .260" | .37" | .85" | 11.48" | .90" |
| TAN-10C0-L4 | 1/2" NPT | 1.375" | 1" NPT | 1.69" | 0.808 | .495" | 2.98" | 1.20" | .260" | .37" | .85" | 4.75" | .90" |
| TAN-10C0-L8 | 1/2" NPT | 1.375" | 1" NPT | 1.69" | 0.808 | .495" | 4.59" | 1.20" | .260" | .37" | .85" | 6.37" | .90" |
| TAN-10C0-L12 | 1/2" NPT | 1.375" | 1" NPT | 1.69" | 0.808 | N/A | 6.66" | 1.20" | .260" | .37" | .85" | 8.45" | .90" |
| TAN-10C0-L24 | 1/2" NPT | 1.375" | 1" NPT | 1.69" | 0.808 | N/A | 9.89" | 1.20" | .260" | .37" | .85" | 11.67" | .90" |

All Thermowells:
Material: 316L SS
Press/Temp: 4900 PSI Max @ 330° F
Flow: 100 FPS (L2, L4, L8, L12) or 50 FPS (L24) max in 1000 PSI Natural Gas
Optional Vent/Bleeder Hole Available
Additional Plug & Chain Assembly Available

NOTE: Use a thermal coupling paste or fluid to couple the probe to the well ONLY in the lower .5 inches of the well. DO NOT fill the well with thermal coupling fluid. Spring load the probe to contact the bottom of the well.

U.S. PATENTED - FOREIGN PATENTS PENDING TDOC-4 REV.11 1-21-03

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051B |
| | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 1. TYPE OF WELL Gas Well | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 8. WELL NAME and NUMBER: CLAY BASIN UNIT 18 |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 9. API NUMBER: 43009300060000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 0532 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 23 Township: 03.0N Range: 24.0E Meridian: S | | COUNTY: DAGGETT |
| | | STATE: UTAH |

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|---|--|---|---|
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | <input type="checkbox"/> ALTER CASING | <input type="checkbox"/> CASING REPAIR |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/18/2012 | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | <input type="checkbox"/> CHANGE TUBING | <input type="checkbox"/> CHANGE WELL NAME |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CHANGE WELL STATUS | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> DEEPEN | <input type="checkbox"/> FRACTURE TREAT | <input type="checkbox"/> NEW CONSTRUCTION |
| | <input type="checkbox"/> OPERATOR CHANGE | <input type="checkbox"/> PLUG AND ABANDON | <input type="checkbox"/> PLUG BACK |
| | <input checked="" type="checkbox"/> PRODUCTION START OR RESUME | <input type="checkbox"/> RECLAMATION OF WELL SITE | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | <input type="checkbox"/> TEMPORARY ABANDON |
| | <input type="checkbox"/> TUBING REPAIR | <input type="checkbox"/> VENT OR FLARE | <input type="checkbox"/> WATER DISPOSAL |
| | <input type="checkbox"/> WATER SHUTOFF | <input type="checkbox"/> SI TA STATUS EXTENSION | <input type="checkbox"/> APD EXTENSION |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> OTHER | OTHER: <input type="text"/> |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well Resumed Production on October 18, 2012 at 12:00 PM,
after being off for more than 90 days.

**Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
October 19, 2012**

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 10/18/2012 | |

| | |
|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | FORM 9 5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051B |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 1. TYPE OF WELL Gas Well | 8. WELL NAME and NUMBER: CLAY BASIN UNIT 18 |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | 9. API NUMBER: 43009300060000 |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | PHONE NUMBER: 307 922-5612 Ext |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 0532 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 23 Township: 03.0N Range: 24.0E Meridian: S | 9. FIELD and POOL or WILDCAT: CLAY BASIN COUNTY: DAGGETT STATE: UTAH |

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 3/15/2013 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="Production Equipment"/> |

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Wexpro Company, requests approval to upgrade the existing production equipment on the above mentioned well location. The dehy will be removed and replaced with a ProPack. Also, a new meter run and meter building will be installed. All new equipment will be installed on existing disturbance and there will be no new additional surface disturbance. The new equipment will be painted the approved BLM color to match the existing production equipment on location. Upon completion of the new production equipment installation an updated Site Facility Diagram will be submitted to the Vernal BLM Field Office.

**Accepted by the
 Utah Division of
 Oil, Gas and Mining**

Date: February 25, 2013

By: *Derek Quist*

| | | |
|---|-------------------------------------|------------------------------|
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 2/20/2013 | |

| | | |
|--|---|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN UNIT 18 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 0532 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 23 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300060000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> WILDCAT WELL DETERMINATION <input type="checkbox"/> OTHER | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 12/23/2013 | <input type="checkbox"/> APD EXTENSION | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | OTHER: <input style="width: 100px;" type="text"/> | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The above well Resumed Production on December 23, 2013, after being off for more than 90 days. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY January 09, 2014 | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent |
| SIGNATURE N/A | DATE 12/26/2013 | |

| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 | |
|--|--|---|---|
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051B | |
| | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: | |
| 1. TYPE OF WELL Gas Well | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN | |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 8. WELL NAME and NUMBER: CLAY BASIN UNIT 18 | |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 9. API NUMBER: 43009300060000 | |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN | |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 0532 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 23 Township: 03.0N Range: 24.0E Meridian: S | | COUNTY: DAGGETT | |
| | | STATE: UTAH | |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/25/2014 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION | <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER | <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. | | | |
| <p>The above well resumed production on October 25, 2014; after being off more than 90 days.</p> | | | |
| <p>Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY October 31, 2014</p> | | | |
| NAME (PLEASE PRINT) Paul Jibson | PHONE NUMBER 307 352-7561 | TITLE Permit Agent | |
| SIGNATURE N/A | | DATE 10/28/2014 | |

| | | |
|--|--|--|
| STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING | | FORM 9 |
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals. | | 5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051B |
| 1. TYPE OF WELL Gas Well | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME: |
| 2. NAME OF OPERATOR: WEXPRO COMPANY | | 7. UNIT or CA AGREEMENT NAME: CLAY BASIN |
| 3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902 | | 8. WELL NAME and NUMBER: CLAY BASIN UNIT 18 |
| 4. LOCATION OF WELL FOOTAGES AT SURFACE: 0665 FNL 0532 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 23 Township: 03.0N Range: 24.0E Meridian: S | | 9. API NUMBER: 43009300060000 |
| PHONE NUMBER: 307 922-5612 Ext | | 9. FIELD and POOL or WILDCAT: CLAY BASIN |
| COUNTY: DAGGETT | | STATE: UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: | <input type="checkbox"/> ACIDIZE | |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/30/2015 | <input type="checkbox"/> ALTER CASING | |
| <input type="checkbox"/> SPUD REPORT Date of Spud: | <input type="checkbox"/> CASING REPAIR | |
| <input type="checkbox"/> DRILLING REPORT Report Date: | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS | |
| | <input type="checkbox"/> CHANGE TUBING | |
| | <input type="checkbox"/> CHANGE WELL STATUS | |
| | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | |
| | <input type="checkbox"/> CONVERT WELL TYPE | |
| | <input type="checkbox"/> DEEPEN | |
| | <input type="checkbox"/> FRACTURE TREAT | |
| | <input type="checkbox"/> NEW CONSTRUCTION | |
| | <input type="checkbox"/> OPERATOR CHANGE | |
| | <input type="checkbox"/> PLUG AND ABANDON | |
| | <input type="checkbox"/> PLUG BACK | |
| | <input checked="" type="checkbox"/> PRODUCTION START OR RESUME | |
| | <input type="checkbox"/> RECLAMATION OF WELL SITE | |
| | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION | |
| | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | |
| | <input type="checkbox"/> SIDETRACK TO REPAIR WELL | |
| | <input type="checkbox"/> TEMPORARY ABANDON | |
| | <input type="checkbox"/> TUBING REPAIR | |
| | <input type="checkbox"/> VENT OR FLARE | |
| | <input type="checkbox"/> WATER DISPOSAL | |
| | <input type="checkbox"/> WATER SHUTOFF | |
| | <input type="checkbox"/> SI TA STATUS EXTENSION | |
| | <input type="checkbox"/> WILDCAT WELL DETERMINATION | |
| | <input type="checkbox"/> OTHER: <input style="width: 100px;" type="text"/> | |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. This well resumed production on October 30, 2015 after being off more than 90 days. | | |
| Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY November 06, 2015 | | |
| NAME (PLEASE PRINT) Tammy Fredrickson | PHONE NUMBER 307 352-7514 | TITLE Senior Permit Agent |
| SIGNATURE N/A | DATE 11/5/2015 | |