

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

2. NAME OF OPERATOR
 Wexpro Company

3. ADDRESS OF OPERATOR
 P. O. Box 458, Rock Springs, Wyoming 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
 At surface 54' FSL, 751' FEL, SE SE
 At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 Approximatley 60 miles south of Rock Springs, Wyoming

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
 54'

16. NO. OF ACRES IN LEASE
 1900.74

17. NO. OF ACRES ASSIGNED TO THIS WELL
 NA

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
 Appx 1650'

19. PROPOSED DEPTH
 5495' *fracture*

20. ROTARY OR CABLE TOOLS
 Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
 6362' as graded

22. APPROX. DATE WORK WILL START*
 June 15, 1985

RECEIVED

APR 29 1985

DIVISION OF OIL
GAS & MINING

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

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
 --

7. UNIT AGREEMENT NAME
 Clay Basin

8. FARM OR LEASE NAME
 Unit

9. WELL NO.
 62

10. FIELD AND POOL, OR WILDCAT
 ✓ Clay Basin

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 21-3N-24E

12. COUNTY OR PARISH
 Daggett

13. STATE
 Utah

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4	9-5/8	43.5	300'	180 sacks Regular Type G with 3% CaCl and 1/4# flocele/sack Amount of 50-50 Pozmix to be determined.
7-7/8	5-1/2	20	5495'	

See attached drilling plan.

APPROVED BY THE STATE
 OF THE DIVISION OF
 OIL, GAS, AND MINING
 DATE 5/8/85
 BY John R. Bay
 WELL SPACING: A-3 Unit well

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.

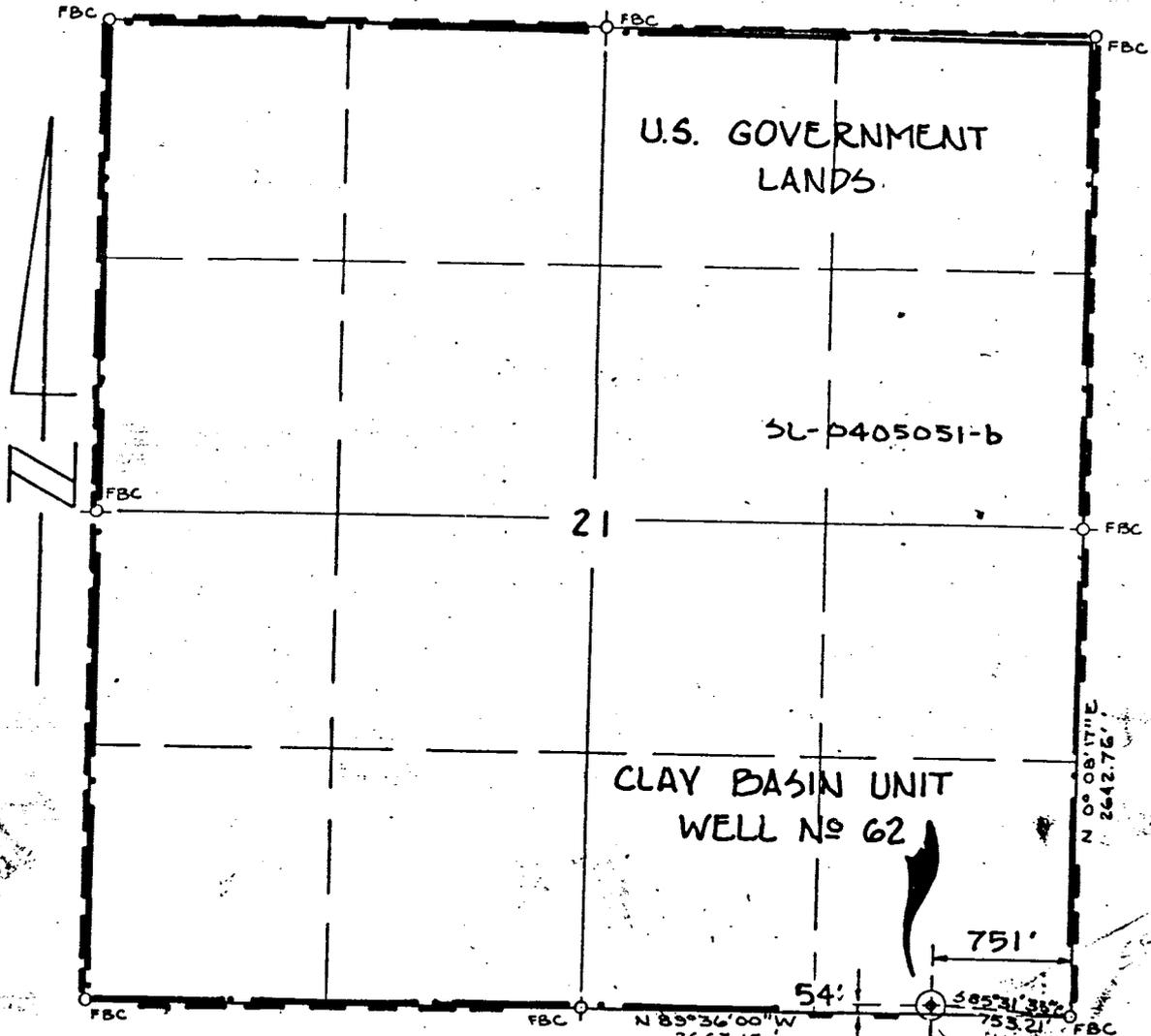
24. SIGNED A. J. Maser TITLE Drilling Superintendent DATE April 19, 1985

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

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

SE 1/4, SE 1/4, SEC 21, T. 3 N., R. 24 E.
 SLB & M
 DAGGETT COUNTY, UTAH



LOCATION PLAN
 SCALE 1" = 1000'

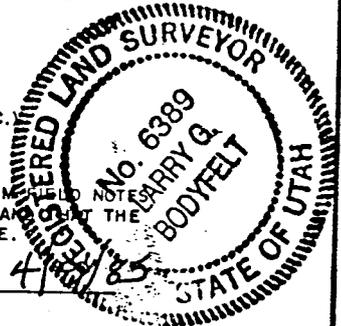
LEGEND

- SURFACE OWNER BOUNDARY
- - - MINERAL LEASE BOUNDARY
- ⊕ WELL LOCATION
- ⊕ FD. BRASS CAP
- ⊕ FD. STONE

NOTE: FOR SURFACE INFORMATION (ROADS, TOPO, DRAINAGE, ETC.)
 SEE AREA MAP.

THIS IS TO CERTIFY THAT THE ABOVE PLAT WAS PREPARED FROM FIELD NOTES
 OF ACTUAL SURVEYS MADE BY ME OR UNDER MY SUPERVISION AND THAT THE
 SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Larry G. Bodyfelt
 LARRY G. BODYFELT, UTAH REG. L.S. NO 6389



ENGINEERING RECORD	
SURVEYED: NPR 3/26/85	FIELD: CLAY BASIN
BASIS OF BEARING: CLAY BASIN TRIANGULATION AND CONTROL MAP	
SURFACE OWNER: U.S. GOVERNMENT LANDS	
MINERAL LEASE: SL-045051-b	
LOCATION: SE 1/4, SE 1/4, SEC 21, T. 3 N., R 24 E SLB & M, 54' F.S.L., 751' FEL	
COUNTY: DAGGETT	STATE: UTAH
ELEVATION AS GRADED: 6362' A.L. GRADED BY	

CERTIFIED
 WELL LOCATION PLAT
 FOR
 CLAY BASIN UNIT
 WELL NO 62
 DRAWN: DER 4/4/85 SCALE: 1" = 1000'

Drilling Plan
Wexpro Company
Clay Basin Unit Well No. 62
Daggett County, Utah

1 & 2. SURFACE FORMATION, ESTIMATED TOPS AND WATER, OIL, GAS OR MINERAL BEARING FORMATIONS:

Mancos	-	Surface
Frontier	-	5245', objective, gas
Mowry	-	5445'
Dakota	-	5610'
Morrison	-	5805'
Total Depth	-	5495'

All fresh water and prospectively valuable minerals (as described by BLM at onsite) encountered during drilling, will be recorded by depth and adequately protected. All oil and gas shows will be tested to determine commercial potential.

3. PRESSURE CONTROL EQUIPMENT: (See attached diagram)
Operator's minimum specifications for pressure control equipment requires an 11-inch 3000 psi double gate hydraulically operated blowout preventer and an 11-inch 3000 psi annular preventer. Surface casing and all preventer rams will be pressure tested to 1000 psi for 15 minutes using rig pump and mud. NOTE: The surface casing will be pressure tested to a minimum of 1000 psi; or one psi per foot; or 70 percent of the internal yield of the casing, whichever is applicable. BOP's will be checked daily as to mechanical operating condition and will be tested by rig equipment after each string of casing is run. All ram type preventers will have hand wheels which will be operative at the time the preventers are installed.

BOP systems will be consistent with API RP53. Pressure tests will be conducted before drilling out from under casing strings which have been set and cemented in place. Blowout preventer controls will be installed prior to drilling the surface casing plug and will remain in use until the well is completed or abandoned. Preventers will be inspected and operated at least daily to ensure good mechanical working order, and this inspection will be recorded on the daily drilling report. Preventers will be pressure tested before drilling casing cement plugs.

The District Office will be notified, with sufficient lead time, in order to have a BLM representative on location during pressure testing.

4. CASING PROGRAM:

<u>Footage</u>	<u>Size</u>	<u>Grade</u>	<u>Wt.</u>	<u>Condition</u>	<u>Thread</u>	<u>Cement</u>
300	9-5/8	J&L95	43.5	New	8 rd LT&C	180 sx Regular w/3% CaCl and 1/4# flocele/sx.
5495	5-1/2	AR-95	20	New	8 rd LT&C	Tops will be determined from logs; information will be submitted via Sundry Notice.

AUXILIARY EQUIPMENT:

- a) Manually operated kelly cock
- b) No floats at bit
- c) Monitoring of mud system will be visual
- d) Full opening floor valve manually operated

Anticipated cement tops will be reported as to depth; not the expected number of sacks of cement to be used. The District Office will be notified, with sufficient lead time, in order to have a BLM representative on location while running all casing strings and cementing.

5. MUD PROGRAM: Gel chemical water base mud from surface to total depth.

Sufficient mud materials to maintain mud properties, control lost circulation and to contain blowout will be available at the wellsite.

No chromate additives will be used in the mud system on Federal and Indian lands without prior BLM approval to ensure adequate protection of fresh water aquifers.

6. LOGGING: DIL-SFL-GR - surface casing to total depth
CNL-FDC-GR - 5000 feet to total depth

TESTING: Two DST's in Frontier at 5245 feet

CORING: None.

Whether the well is completed as a dry hole or as a producer, "Well Completion and Recompletion Report and Log" (Form 3160-4) will be submitted not later than 30 days after completion of the well or after completion of operations being performed, in accordance with 43 CFR 3164. Two copies of all logs, core descriptions, core analyses, well-test data, geologic summaries, sample description, and all other surveys or data obtained and compiled during the drilling, workover, and/or completion operations, will be filed with form 3160-4. Samples (cuttings, fluids, and/or gases) will be submitted when requested by the authorized officer (AO).

7. ABNORMAL PRESSURE AND TEMPERATURE: BHT of 130°F expected. No abnormal pressures anticipated.

8. ANTICIPATED STARTING DATE: June 15, 1985.

DURATION OF OPERATION: 11 days drilling.

No location will be constructed or moved, no well will be plugged, and no drilling or workover equipment will be removed from a well to be placed in a suspended status without prior approval of the AO. If operations are to be suspended, prior approval of the AO will be obtained and notifications given before resumption of operations.

The spud date will be reported orally to the AO within 48 hours after spudding. If the spudding occurs on a weekend or holiday, the report will be submitted on the following regular work day. The oral report will be followed up with a Sundry Notice.

In accordance with Onshore Oil and Gas Order No. 1, this well will be reported on Form 3160-6 "Monthly Report of Operations", starting with the month in which operations commence and continue each month until the well is physically plugged and abandoned. This report will be filed with the Vernal BLM District Office, 170 South 500 East, Vernal, UT 84078.

Immediate Report: Spills, blowouts, fires, leaks, accidents, or any other unusual occurrences shall be promptly reported in accordance with the requirements of NTL-3A or its revision.

- If a replacement rig is contemplated for completion operations, a "Sundry Notice" (Form 3160-5) to that effect will be filed, for prior approval of the AO, and all conditions of this approved plan are applicable during all operations conducted with the replacement rig.

If the well is successfully completed for production, the AO will be notified when the well is placed in a producing status. Such notification will be sent by telegram or other written communication, not later than five days following the date on which the well is placed on production.

Pursuant to NTL-2B, with the approval of the District Engineer, produced water may be temporarily disposed of into unlined pits for a period of up to 90 days. During the period so authorized, an application for approval of permanent disposal method, along with the required water analysis and other information, will be submitted to the District Engineer.

Pursuant to NTL-4A, lessees or operators are authorized to vent/flare gas during initial well evaluation tests, not

exceeding a period of 30 days or the production of 50 MMCF of gas, whichever occurs first. An application will be filed with the District Engineer and approval received, for any venting/flaring of gas beyond the initial 30 day or authorized test period.

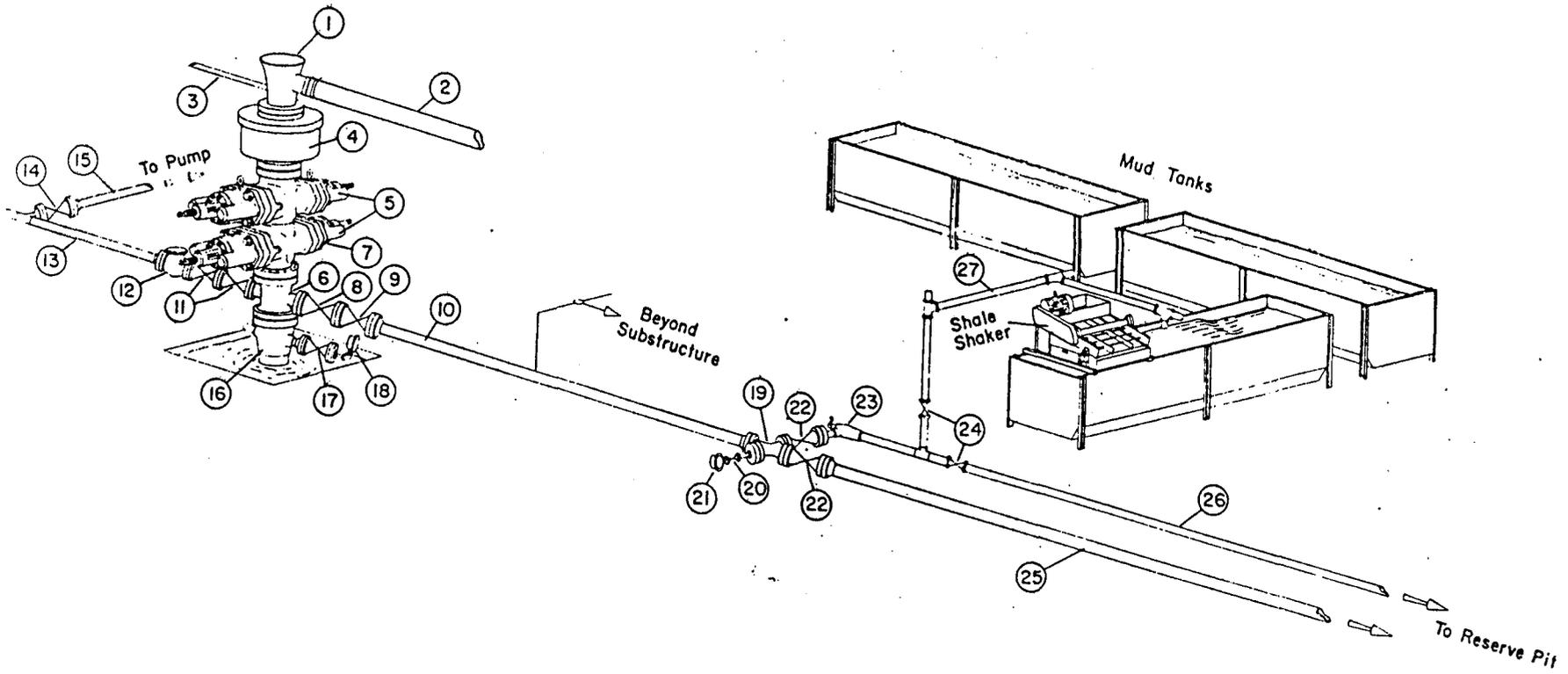
A schematic facilities diagram as required by 43 CFR 3162.7-2, 3162.7-3, and 3162.7-4 shall be submitted to the appropriate District Office within 30 days of installation or first production, whichever occurs first. All site security regulations as specified in 43 CFR 3162.7 shall be adhered to. All product lines entering and leaving hydrocarbon storage tanks will be effectively sealed in accordance with 43 CFR 3162.7-4.

A first production conference will be scheduled within 15 days after receipt of the first production notice.

No well abandonment operations will be commenced without the prior approval of the AO. In the case of newly drilled or dry holes or failures, and in emergency situations, oral approval will be obtained from the AO. A "Subsequent Report of Abandonment" Form 3160-5, will be filed with the AO within 30 days following completion of the well for abandonment. This report will indicate where plugs were placed and the current status of the surface restoration. Final abandonment will not be approved until the surface reclamation work required by the approved APD or approved abandonment notice has been completed to the satisfaction of the AO or his representative, or the appropriate Surface Managing Agency.

Pursuant to Onshore Oil and Gas Order No. 1, lessees and operators have the responsibility to see that their exploration, development, production, and construction operations are conducted in a manner which conforms with applicable Federal laws and regulations to the extent that such State and local laws are applicable to operations on Federal or Indian lands.

CELSIUS/WEXPRO 3000 psi BLOWOUT PREVENTION EQUIPMENT



STANDARD STACK REQUIREMENTS

NO	ITEM	NOMINAL	ID	TYPE	FURNISHED BY	
					OPER.	CONTR.
1	Drilling Nipple (Rotating Head when air drilling)					
2	Flowline					
3	Fill up Line (eliminated for air drilling)	2"				
4	Annular Preventer			Hydril Cameron Shaffer		
5	Two Single or One dual Hydril oper rams.			H. ORC; F. LWS; R. F		
6	Drilling spool with 3" and 2" outlets			Forged		
7	As Alternate to (6) Run & Kill and Choke lines from outlets in this ram					
8	Gate Valve		3-1/8			
9	Valve-hydraulically operated (Gate)		3-1/8			
10	Choke Line	3"				
11	Gate Valves		2-1/16			
12	Check Valve		2-1/16			
13	Kill Line	2"				
14	Gate Valve		2-1/16			
15	Kill Line to Pumps	2"				
16	Casing Head					
17	Valve Gate _____ Plug _____		1-13/16			
18	Compound Pressure Cage					
	Wear Bushing					

OPERATOR Weppers Company DATE 5-3-85
WELL NAME Clay Basin Unit 62
SEC SESE 21 T 3N R 24E COUNTY Daggett

43-009-30061
API NUMBER

Fed
TYPE OF LEASE

CHECK OFF:

- | | | |
|---|--------------------------------|--|
| <input checked="" type="checkbox"/> PLAT | <input type="checkbox"/> BOND | <input checked="" type="checkbox"/> NEAREST WELL |
| <input checked="" type="checkbox"/> LEASE | <input type="checkbox"/> FIELD | <input type="checkbox"/> POTASH OR OIL SHALE |

PROCESSING COMMENTS:

Unit Well - Vertical & by Screen (SKN)
Need water permit

APPROVAL LETTER:

SPACING: A-3 Clay Basin c-3-a _____
UNIT CAUSE NO. & DATE
 c-3-b c-3-c

STIPULATIONS:

1-Water



STATE OF UTAH
NATURAL RESOURCES
Water Rights

Scott M. Matheson, Governor
Temple A. Reynolds, Executive Director
Dee C. Hansen, State Engineer

23 East Main Street • P.O. Box 879 • Vernal, UT 84078 • 801-789-3714

May 7, 1985

Wyp pro

Mr. William Allen
C/O D. E. Casada
Box K
Vernal, Utah 84078

RE: Temporary Change 85-41-28

Dear Mr. Allen:

The above numbered Temporary Change Application has been approved, subject to prior rights,

A copy is herewith returned to you for your records and future reference.

Sincerely yours,

G. Blake Wahlen

G. Blake Wahlen
for Robert L. Morgan, P. E.
State Engineer

RLM:GBW/ln

Enclosure

APPLICATION NO. 85-41-28
DISTRIBUTION SYSTEM

Application For Temporary Change of Point of Diversion, Place or Purpose of Use STATE OF UTAH

081872

N 1070 (To Be Filed in Duplicate)

Vernal, Utah Place Apr. 25 Date 19 85

For the purpose of obtaining permission to temporarily change the point of diversion, place or purpose of use
(Strike out written matter not needed)

of water, the right to the use of which was acquired by 41-578 (Diligence)
(Give No. of application, title and date of Decree and Award No.)

to that hereinafter described, application is hereby made to the State Engineer, based upon the following showing of facts, submitted in accordance with the requirements of the Laws of Utah.

- The owner of right or application is William Allen
- The name of the person making this application is William Allen
- The post office address of the applicant is C/O D. E. Casada, Box K, Vernal, Utah 84078

PAST USE OF WATER

- The flow of water which has been used in second feet is 2.0
- The quantity of water which has been used in acre feet is
- The water has been used each year from March 1 (Month) to Dec. 1 (Month) incl. (Day) (Day)
- The water has been stored each year from to incl. (Month) (Day) (Month) (Day)
- The direct source of supply is Red Creek in Daggett County.
- The water has been diverted into Ditch ditch canal at a point located North 1040 ft. West 890 ft. from the E 1/2 Cor. Sec. 8, T2N, R24E, SLB&M
- The water involved has been used for the following purpose: Irrigation & Stockwatering

Total _____ acres.
NOTE: If for irrigation, give legal subdivisions of land and total acreage which has been irrigated. If for other purposes, give place and purpose of use.

THE FOLLOWING TEMPORARY CHANGES ARE PROPOSED

- The flow of water to be changed in cubic feet per second is
- The quantity of water to be changed in acre-feet is 12 ac.-ft.
- The water will be diverted into the tank trucks ditch canal at a point located North 100ft. West 2100 ft. from the E 1/2 Cor. Sec. 8, T2N, R24E, SLB&M (Crossing of the Road at Red Creek in Clay Basin)
- The change will be made from Apr. 25, 19 85 to Apr. 25 19 86
(Period must not exceed one year)
- The reasons for the change are Oil well drilling & completion of Clay Basin # 61, Sec. 20, T2N, R24E, Clay Basin #62, Sec. 21, T2N, R24E, Clay Basin 63, Sec. 23, T3N, R24E, Clay Basin #64, T3N, R24E, all SLB&M
- The water involved herein has heretofore been temporarily changed _____ years prior to this application.
(List years change has been made)
- The water involved is to be used for the following purpose: Oil Well Drilling & Completion

Total _____ acres.
NOTE: If for irrigation, give legal subdivisions of land to be irrigated. If for other purposes, give place and purpose of proposed use.

EXPLANATORY

- (#61 43-009-30060 3N 24E Sec. 20 SLB&M)
- (#62 43-009-30061 3N 24E Sec. 21 SLB&M)
- (#64 43-009-30062 3N 24E Sec. 15 LA)
- (#63 no well)

A filing fee in the sum of \$5.00 is submitted herewith. I agree to pay an additional fee for either investigating or advertising this change, or both, upon the request of the State Engineer.

William Allen
Signature of Applicant

RULES AND REGULATIONS

(Read Carefully)

This application blank is to be used only for temporary change of point of diversion, place or nature of use for a definitely fixed period not to exceed one year. If a permanent change is desired, request proper application blanks from the State Engineer.

Application for temporary change must be filed in duplicate, accompanied by a filing fee of \$7.50. Where the water affected is under supervision of a Water Commissioner, appointed by the State Engineer, time will be saved if the Application is filed with the Commissioner, who will promptly investigate the proposed change and forward both copies with filing fee and his report to the State Engineer. Applications filed directly with the State Engineer will be mailed to the Water Commissioner for investigation and report. If there be no Water Commissioner on the source, the Application must be filed with the State Engineer.

When the State Engineer finds that the change will not impair the rights of others he will authorize the change to be made. If he shall find, either by his own investigation or otherwise, that the change sought might impair existing rights he shall give notice to persons whose rights might be affected and shall give them opportunity to be heard before acting upon the Application. Such notice shall be given five days before the hearing either by regular mail or by one publication in a newspaper. Before making an investigation or giving notice the State Engineer will require the applicant to deposit a sum of money sufficient to pay the expenses thereof.

Address all communications to:

State Engineer
State Capitol Building
Salt Lake City, Utah

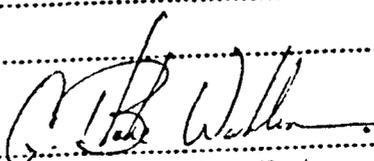
STATE ENGINEER'S ENDORSEMENTS

(Not to be filled in by applicant)

- Change Application No. (River System)
1. Application received by Water Commissioner (Name of Commissioner)
2. 4/26/85 Recommendation of Commissioner
Application received over counter in State Engineer's Office by J. N.
by mail
3. Fee for filing application, \$7.50 received by ; Rec. No.
4. Application returned, with letter, to for correction.
5. Corrected application resubmitted over counter to State Engineer's Office.
by mail
6. Fee for investigation requested \$.....
7. Fee for investigation \$....., received by ; Rec. No.
8. Investigation made by ; Recommendations:
9. Fee for giving notice requested \$.....
10. Fee for giving notice \$....., received by ; Rec. No.
11. Application approved for advertising by publication by
mail
12. Notice published in.....
13. Notice of pending change application mailed to interested parties by as follows:
.....
.....
14. Change application protested by (Date Received and Name)
15. Hearing set for at
16. Application recommended for rejection approval by
17. 5/1/85 Change Application rejected and returned to OBW
approved

THIS APPLICATION IS APPROVED SUBJECT TO THE FOLLOWING CONDITIONS:

1.
2.
3.


For
Robert L. Morgan P.E. State Engineer



STATE OF UTAH
NATURAL RESOURCES
Oil, Gas & Mining

Norman H. Bangerter, Governor
Dee C. Hansen, Executive Director
Dianne R. Nielson, Ph.D., Division Director

355 W. North Temple • 3 Triad Center • Suite 350 • Salt Lake City, UT 84180-1203 • 801-538-5340

May 8, 1985

Wexpro Company
P. O. Box 458
Rock Springs, Wyoming 82902

Gentlemen:

Re: Well No. Clay Basin Unit 62 - SE SE Sec. 21, T. 3N, R. 24E
54' FSL, 751' FEL - Daggett County, Utah

Approval to drill the above referenced gas well is hereby granted in accordance with Section 40-6-18, Utah Code Annotated, as amended 1983; and predicated on Rule A-3, General Rules and Regulations and Rules of Practice and Procedure, subject to the following stipulations:

1. Prior to commencement of drilling, receipt by the Division of evidence providing assurance of an adequate and approved supply of water.

In addition, the following actions are necessary to fully comply with this approval:

1. Spudding notification to the Division within 24 hours after drilling operations commence.
2. Submittal to the Division of completed Form OGC-8-X, Report of Water Encountered During Drilling.
3. Prompt notification to the Division should you determine that it is necessary to plug and abandon this well. Notify John R. Baza, Petroleum Engineer, (Office) (801) 538-5340, (Home) 298-7695 or R. J. Firth, Associate Director, (Home) 571-6068.

Page 2
Wexpro Company
Well No. Clay Basin Unit 62
May 8, 1985

4. This approval shall expire one (1) year after date of issuance unless substantial and continuous operation is underway or an application for an extension is made prior to the approval expiration date.

The API number assigned to this well is 43-009-30061.

Sincerely,



R. J. BIRTH
Associate Director, Oil & Gas

as
Enclosures
cc: Branch of Fluid Minerals

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(Other instructions reverse side)

Expires August 31, 1985

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

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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

7. UNIT AGREEMENT NAME
Clay Basin

2. NAME OF OPERATOR
Wexpro Company

8. FARM OR LEASE NAME
Unit

3. ADDRESS OF OPERATOR
P. O. Box 458, Rock Springs, Wyoming 82902

9. WELL NO.
62

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

10. FIELD AND POOL, OR WILDCAT
Clay Basin

54' FSL, 741' FEL, SE SE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
21-3N-24E

14. PERMIT NO.

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

GG 6362'

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
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other) Amendment to Drilling Plan

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

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

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.)*

Request permission to alter the drilling plan of the Application for Permit to Drill the above well as follows:

1 & 2. SURFACE FORMATION, ESTIMATED TOPS AND WATER, OIL, GAS OR MINERAL BEARING FORMATIONS:

Mancos - Surface
Frontier - 5,355', objective, gas
Mowry - 5,555'
Total Depth - 5605'

4. CASING PROGRAM:

300' 9-5/8-inch O.D., J&L-95, 43.5#, New, 8 round thread, LT&C casing
(Cementing program remains unchanged)
5605' 5-1/2-inch AR-95, 20#, New, 8 round thread, LT&C casing
(Cementing program remains unchanged)

6. TESTING: Two DST's in Frontier at 5355'

An anticipated bottom hole pressure of 2400 psi is expected.

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

SIGNED A. J. Maser TITLE Drilling Superintendent DATE May 9, 1985

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

Federal approval of this action is required before commencing operations.

*See Instructions on Reverse Side

ACCEPTED BY THE STATE OF UTAH DIVISION OF OIL, GAS, AND MINING
DATE 5/20/85

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0136
Expires August 31, 1985

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
Wexpro Company

3. ADDRESS OF OPERATOR
P. O. Box 458, Rock Springs, Wyoming 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements*)
At surface 54' FSL, 751' FEL, SE SE
At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
Approximatley 60 miles south of Rock Springs, Wyoming

10. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drig. unit line, if any)
54'

16. NO. OF ACRES IN LEASE
1900.74

17. NO. OF ACRES ASSIGNED TO THIS WELL
NA

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
Appx 1650'

19. PROPOSED DEPTH
5495'

20. ROTARY OR CABLE TOOLS
Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
6362' as graded

22. APPROX. DATE WORK WILL START*
June 15, 1985

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4	9-5/8	43.5	300'	180 sacks Regular Type G with 3% CaCl and 1/4# flocele/sack
7-7/8	5-1/2	20	5495'	Amount of 50-50 Pozmix to be determined.

See attached drilling plan.

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 C. J. Maser TITLE Drilling Superintendent DATE April 19, 1985

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY David W. Moore TITLE Acting District Mgr DATE 5/14/85

CONDITIONS OF APPROVAL, IF ANY:

NOTICE OF APPROVAL

CONDITIONS OF APPROVAL ATTACHED TO OPERATOR'S COPY

RECEIVED

MAY 21 1985

DIVISION OF OIL GAS & MINING

APR 1985

CONDITIONS OF APPROVAL FOR NOTICE TO DRILL

Company Wexpro Company Well No. 62
Location Sec. 21 T3N R24E Lease No. SL-045051-b
Onsite Inspection Date 04-18-85

All lease and/or unit operations will be conducted in such a manner that full compliance is made with applicable laws, regulations (43 CFR 3100), Onshore Oil and Gas Order No. 1, and the approved plan of operations. The operator is fully responsible for the actions of his subcontractors. A copy of these conditions will be furnished the field representative to insure compliance.

A. DRILLING PROGRAM

1. Pressure Control Equipment

Prior to drilling out the surface casing shoe, the ram-type preventer shall be tested to 2,000 psi, and the annular-type preventer shall be tested to 1,500 psi.

BOP and choke manifold system will be consistent with API RP 53.

2. Casing Program and Auxiliary Equipment

The cementing program for the long string shall adequately protect any fresh water or hydrocarbon zones encountered while drilling.

3. Coring, Logging and Testing Program

Daily drilling and completion progress reports shall be submitted to this office on a weekly basis.

DIVISION OF OIL, GAS AND MINING

SPUDDING INFORMATION

43-009-30061

NAME OF COMPANY: WEXPROWELL NAME: CLAY BASIN UNIT #62SECTION SE SE 21 TOWNSHIP 3N RANGE 24E COUNTY DAGGETTDRILLING CONTRACTOR Ram Air DrillingRIG # SPUDDED: DATE 7-13-85TIME 8:00 AMHOW Dry Hole SpudDRILLING WILL COMMENCE Approx. 8-10-85 - Olsen DrillingREPORTED BY ShirleyTELEPHONE # 307-382-9791DATE 7-15-85 SIGNED AS

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

S6-045051-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

RECEIVED

7. UNIT AGREEMENT NAME

Clay Basin

8. FARM OR LEASE NAME

Unit

9. WELL NO.

62

10. FIELD AND POOL, OR WILDCAT

Clay Basin

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

21-3N-24E

12. COUNTY OR PARISH | 13. STATE

Daggett

Utah

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P.O. Box 458, Rock Springs, Wyoming 82902

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

54' FS6, 751' FE6, SE SE

14. PERMIT NO.

43-009-30061

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

6362' as graded

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) Supplemental

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.)*

Spudded 7/13/85 at 8:00 a.m. (dry hole)

We'll be moving Olsen Drilling Company on location after drilling Clay Basin #65 and 61.

Drilled to approx. 312'

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

SIGNED

R. Martin

TITLE Asst. Drilling Supt.

DATE 7/15/85

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Olsen 5

COMPANY

LEASE AND WELL NAME #

DATE OF TEST

RIG # AND NAME

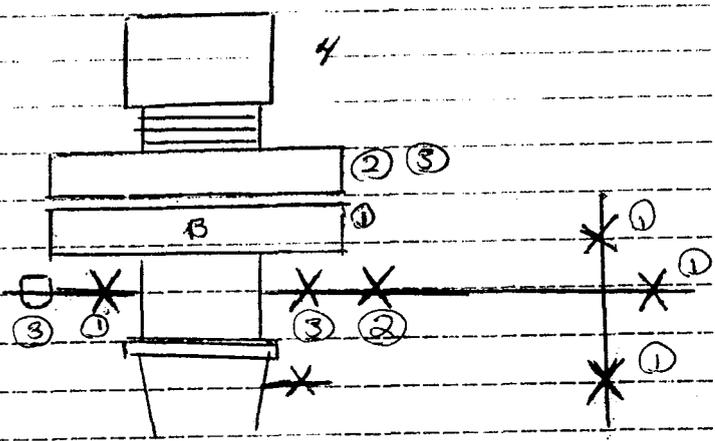
Calxpro

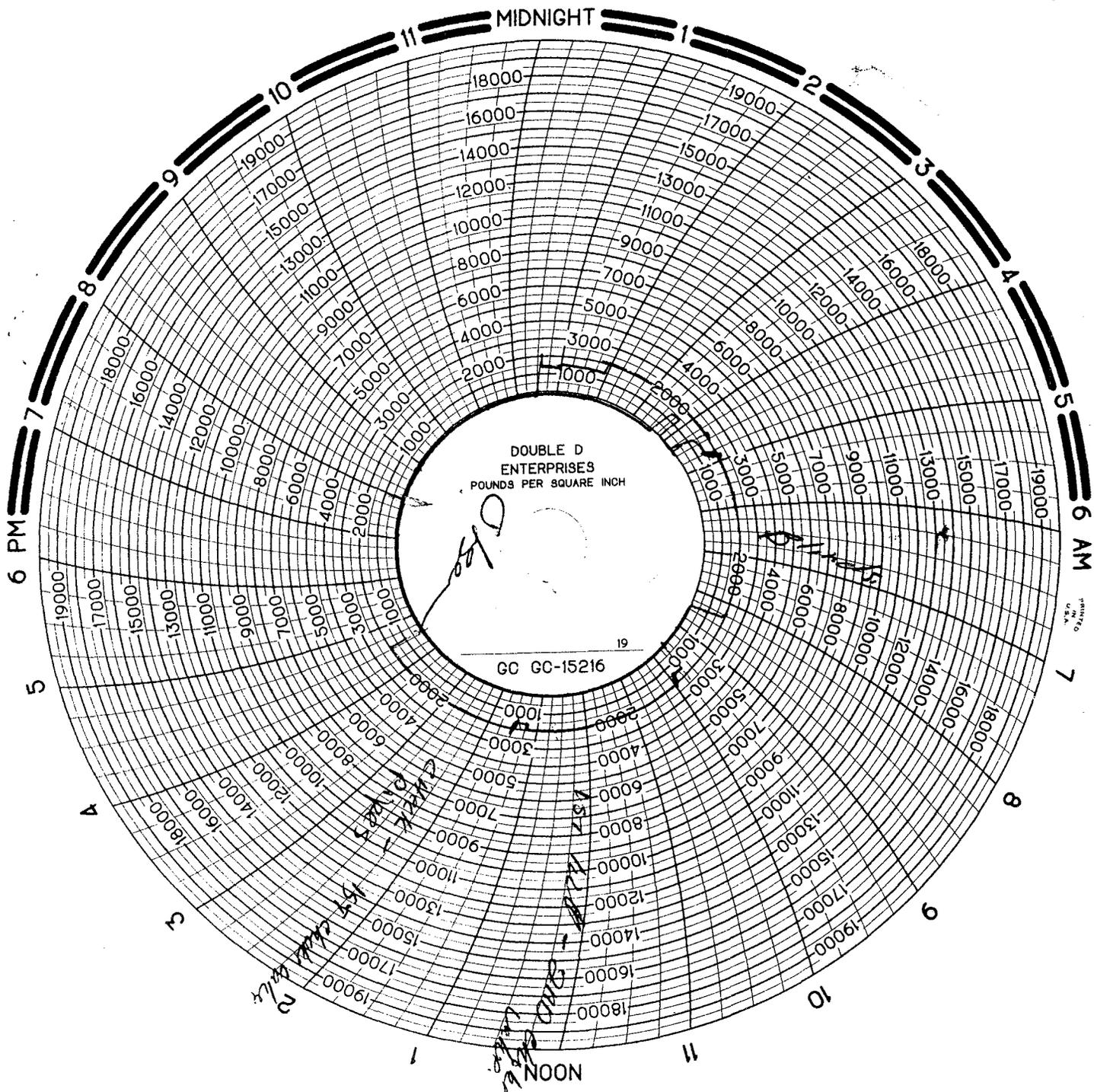
Clay Basin 602

7-30-85

Olsen 5

ST#	TIME	DESCRIPTION
	1:45	ARRIVED AT SHOP LOADED TRUCK and waited on change over
	3:15	left for location
①	7:13	Blinds outside manifold - 1st well
		Rig is running collars in hole
②	8:50	SB 1 can TEST pipes + HYDRILL Pipes - 1st well - 2nd choke valve.
③	9:17	Surged check - shut 1st choke valve, opened second choke valve. - Still on pipe RAMS.
④	9:55	HYDRILL Rig up to belly
	10:16	T IW water.
	10:34	Open belly.





DOUBLE D
ENTERPRISES
POUNDS PER SQUARE INCH

GC GC-15216

PRINTED
IN
U.S.A.

NOON

11

10

9

8

7

6 AM

5

4

3

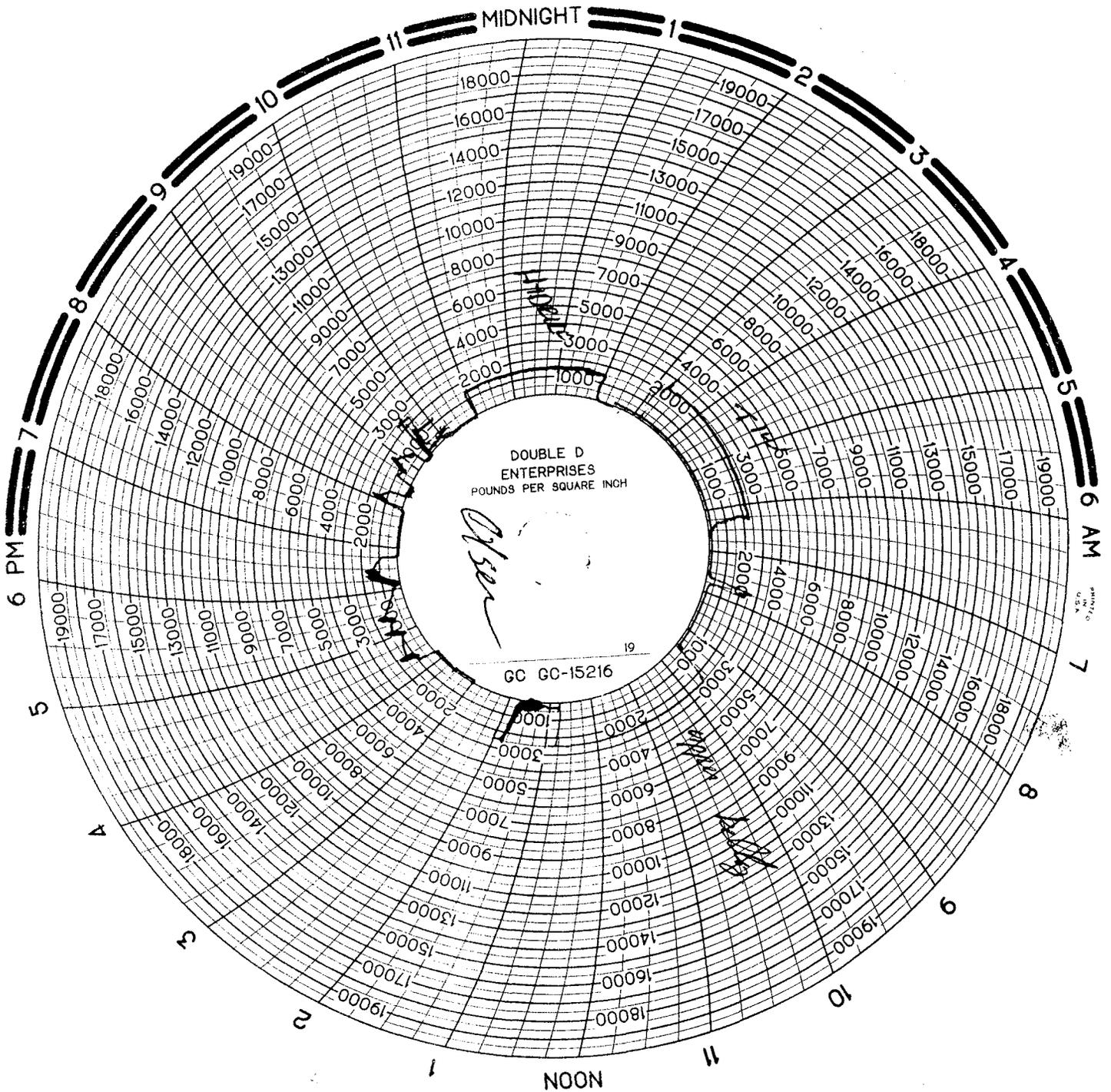
2

1

MIDNIGHT

11

151
152
153
154
155
156
157
158
159
160
161
162
163
164
165
166
167
168
169
170
171
172
173
174
175
176
177
178
179
180
181
182
183
184
185
186
187
188
189
190
191
192
193
194
195
196
197
198
199
200



MIDNIGHT

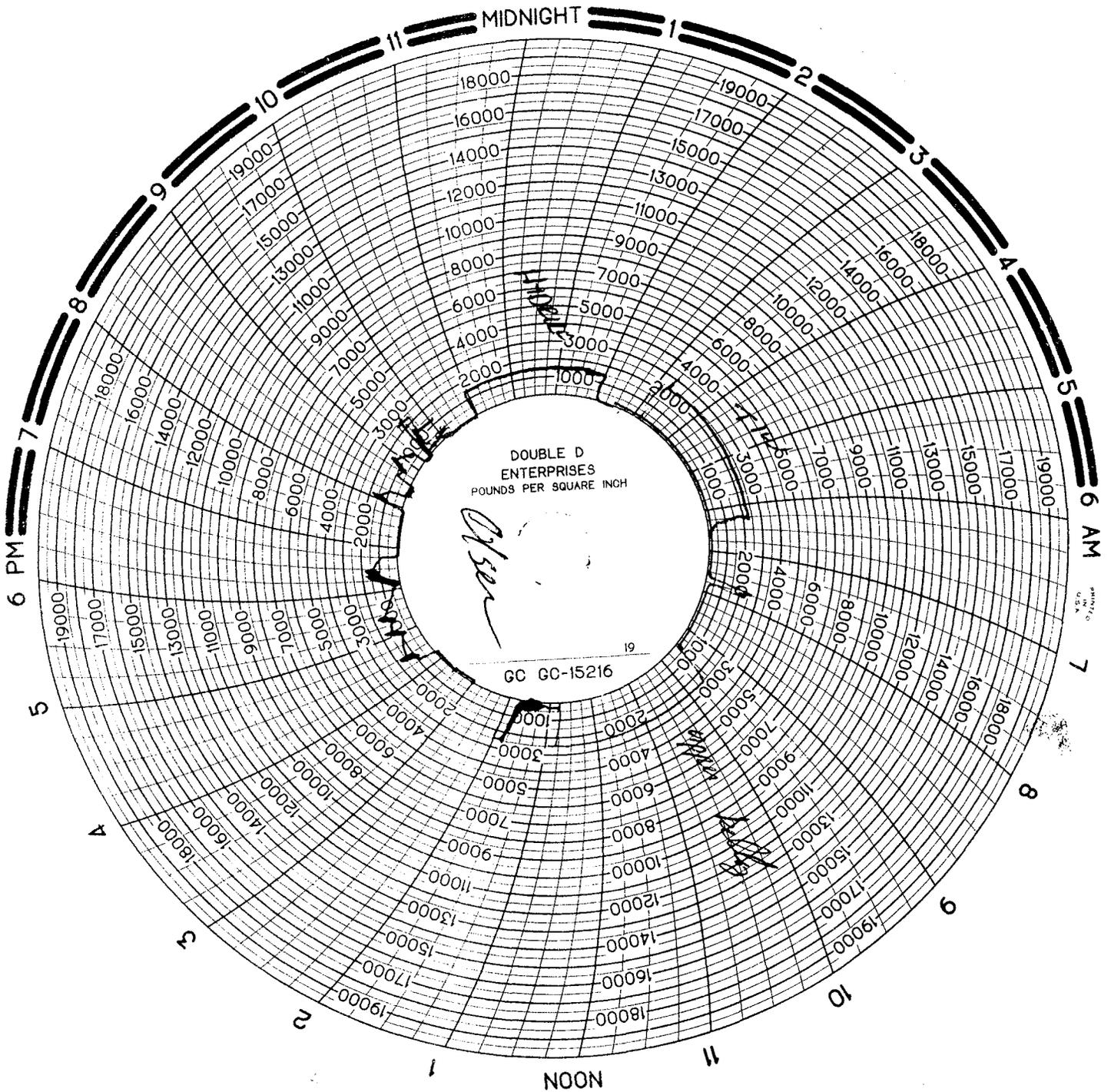
DOUBLE D
ENTERPRISES
POUNDS PER SQUARE INCH

GC GC-15216

NOON

6 PM

6 AM



creat
A

DOUBLE "D" ENTERPRISES

B.O.P. Test Report

B.O.P. TEST PERFORMED ON (DATE)..... 8-02-85

OIL CO.: *Wexpro*

WELL NAME & NUMBER..... *Clay Basin #62*

SECTION..... *21*

TOWNSHIP..... *24E*

RANGE..... *3N*

COUNTY..... *Daggett, Utah*

DRILLING CONTRACTOR..... *Olsen #5*

INVOICES BILLED FROM: **DOUBLE "D" ENTERPRISES, INC.**
213 Pine Street - Box 560
Shoshoni, Wyoming 82649
Phone: (307) 876-2308 or (307) 876-2234

TESTED BY: **DOUBLE "D" ENTERPRISES, INC.**
Box 2097
Evanston, Wyoming 82930
Phone: (307) 789-9213 or (307) 789-9214

OIL CO. SITE REPRESENTATIVE..... *Lloyd Welty*

RIG TOOL PUSHER.....

TESTED OUT OF..... *Evanston, Wyoming*

NOTIFIED PRIOR TO TEST:

COPIES OF THIS TEST REPORT SENT COPIES TO: *Wexpro*

..... *State*

..... *B.L.M.*

ORIGINAL CHART & TEST REPORT ON FILE AT: *Evanston* OFFICE

DOUBLE D TESTING

P.O. Box 560
Shoshoni, Wyoming 82649
307-876-2308

DELIVERY TICKET

EW 19546
Nº 2531

RENTED TO WE xprio NO. Obs 5

ORDERED BY Lloyd Welty DATE 8-2-85
LEASE PLYBASIN WELL NO. 62

Rental begins when tools leave our waref... Rental day starts at midnight and part day shall be charged as full day.

TRANSPORTATION - TO AND FROM

DOUBLE D Portable BLOWOUT PREVI

First eight hour test period
Additional eight hours or fraction.

Items Tested:

<u>Pipes</u> rams to <u>2000</u> #	Csg. to _____ #	Choke Manifold <u>2000</u> #
<u>Blinds</u> rams to <u>2000</u> #	Hydril B O P to <u>1500</u> #	Kelly Cock <u>2000</u> #
_____ rams to _____ #	Choke Line <u>2000</u> #	Safety Valve <u>2000</u> #
_____ rams to _____ #	_____ #	_____ #

TEST SUBS _____ S

OTHER Shut casing valve
Everything held good
45XQ subs

We Appreciate Your Business

TERMS NET CASH - NO DISCOUNT. (PRICES SUBJECT TO CHANGE WITHOUT NOTICE): Terms and Conditions Under Which Tools and Other Equipment Are Rented: Lessor exercises precautions to keep its tools and other equipment in good condition, but does not guarantee its condition. All tools and other equipment rented from Lessor is used at Lessee's sole risk. Lessee agrees that Lessor shall not be liable for any damages for personal injuries to any persons or for any damage to Lessor's property or the property of other persons that may be caused by any of such tools or other equipment, or that may be caused by its failure during use, and Lessee hereby agrees to hold harmless and indemnify Lessor against all persons for all personal injuries and/or property damage. Well conditions which prevent satisfactory operation of equipment do not relieve Lessee of his responsibility for rental charges. Lessee assumes all responsibility for equipment while out of possession of the Lessor and promises to return such equipment to the Lessor in as good condition as it was at the effective date of the lease, natural wear and tear from reasonable use thereof excepted. All equipment lost or damaged beyond repair will be paid for by the Lessee at the market price and all damaged equipment which can be repaired will be repaired and the repairs paid for by the Lessee. Accrued rental charges cannot be applied against the purchase price or cost of repairs of such damaged or lost equipment. All transportation charges must be borne by the Lessee. Rental begins when equipment leaves Lessor's yard and continues until returned thereto. ALL TOOLS AND EQUIPMENT SHALL REMAIN the sole property of Lessor. This lease is made and shall be effective when the equipment is delivered to the carrier selected by the Lessee.

TERMS: Net Cash - No Discount. All charges are due and payable at the office of Lessor in Shoshoni, Wyoming on the 20th of the month following date of invoice. Interest will be charged at the rate of 8%. Interest charged after 60 days from date of invoice.

Delivered By: _____ OWNER OR OWNER'S REPRESENTATIVE
By: _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

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		RECEIVED SEP 20 1985	5. LEASE DESIGNATION AND SERIAL NO. <u>SL-04051-B</u>
2. NAME OF OPERATOR <u>Wexpro Company</u>			6. IF INDIAN, ALLOTTEE OR TRIBE NAME -
3. ADDRESS OF OPERATOR <u>P. O. Box 458, Rock Springs, WY 82902</u>		DIVISION OF UT GAS & MINING	7. UNIT AGREEMENT NAME <u>Clay Basin</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <u>At surface</u>			8. FARM OR LEASE NAME <u>Unit</u>
14. PERMIT NO. <u>43-009-30061</u>		15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>6362' as graded</u>	9. WELL NO. <u>62</u>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT <u>Clay Basin</u>	
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.)*		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>21-3N-24E</u>	
		12. COUNTY OR PARISH <u>Daggett</u>	13. STATE <u>Utah</u>

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>Supplemental</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.)*

Landed 9-5/8", 36#, K-55, 8rd ST&C at 304.25 feet KBM or 15.00 feet below KB. Circulated hole with Halliburton using 85 barrels of water prior to cementing. Cemented with 180 sacks Regualr Class H cement treated with 3-percent CaCl and 1/4# flocele per sack. Bumped plug at 1000 psi. Released pressure. Insert held okay. Circulated water to top of conductor at 2.00 feet below ground level. Water would not come to surface above conductor. Returned 5 barrels of slurry to top of conductor. Cement in place at 2:45 p.m., 7-14-85.

Landed 5-1/2", 20#, AR-95, 8rd LT&C at 5601.33 feet KBM or 15.00 feet below KB in NSCo. casing slips. Circulated casing 1 hour 20 minutes prior to cementing. Ran three centralizers across producing zone- 2 joints, 5 joints, and 8 joints off bottom. Cemented with 350 sacks 50-50 Pozmix A cement (Class H) with 2-percent gel treated with 1/4-pound per sack Cello-Seal. Good returns while mixing and displacing. Reciprocated pipe. Bumped plug at 1:48 a.m., 8/6/85.

Depth 4735'
In process of completion.

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

SIGNED Lee Martin TITLE Drilling Supt. DATE 9-6-85

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other In-
structions on
reverse side)

Form approved.
Budget Bureau No. 1004-01
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SL-04051-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Clay Basin

8. FARM OR LEASE NAME

Unit

9. WELL NO.

62

10. FIELD AND POOL, OR WILDCAT

Clay Basin

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

21-3N-24E

12. COUNTY OR PARISH

Daggett

13. STATE

Utah

19. ELEV. CASINGHEAD

6362'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

DATE ISSUED

15-8-85

15. DATE SPUDDED

7/13/85

16. DATE T.D. REACHED

8/6/85

17. DATE COMPL. (Ready to prod.)

8/18/85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 6362', KB 6374'

20. TOTAL DEPTH, MD & TVD

5620'

21. PLUG BACK T.D., MD & TVD

5541'

14. PERMIT NO.

43-009-30061

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, flowing and shut-in pressures, and recoveries):

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				Mancos Frontier Mowry	Surface 5323 5520	



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:

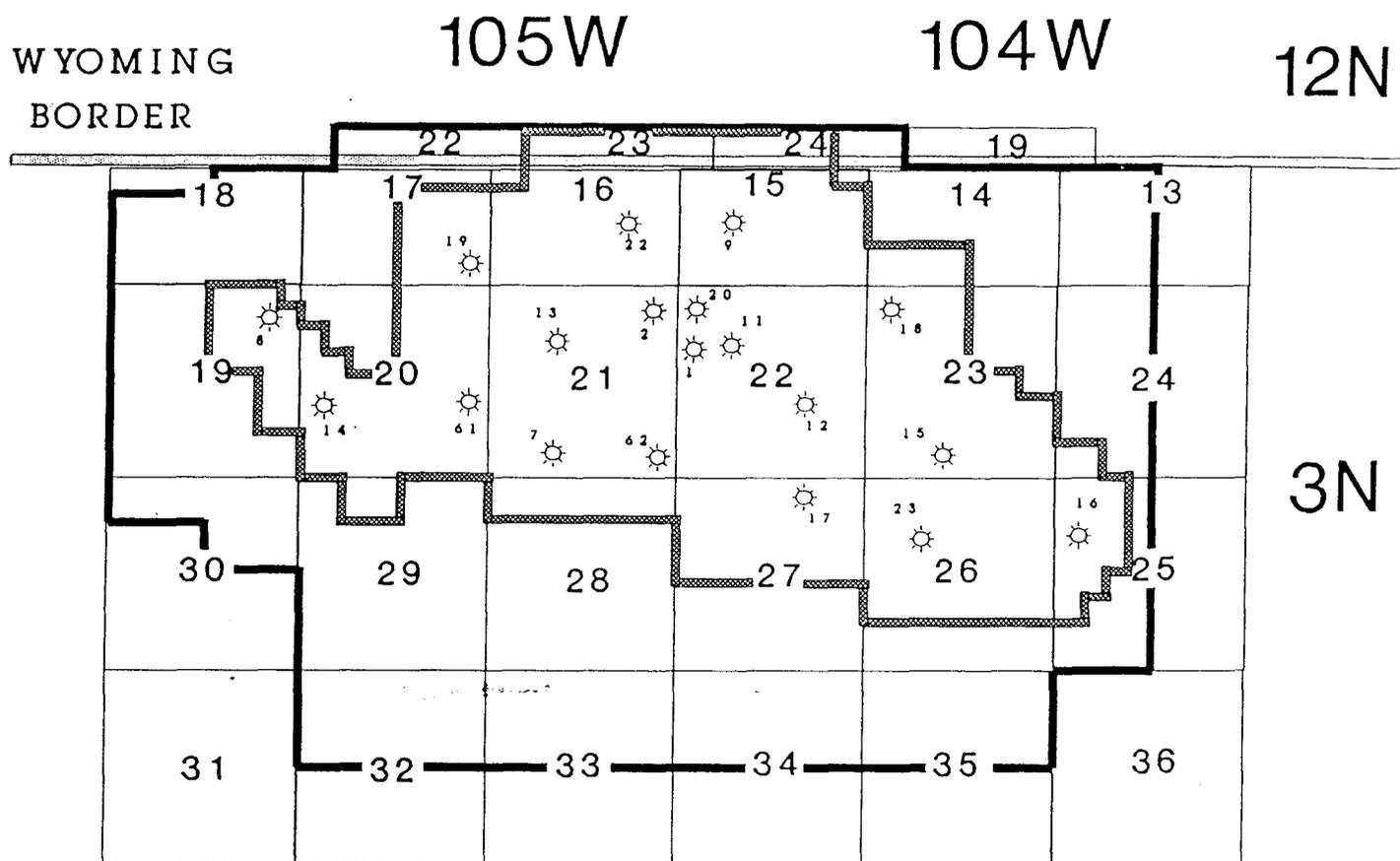


W. F. Edwards
Vice President

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

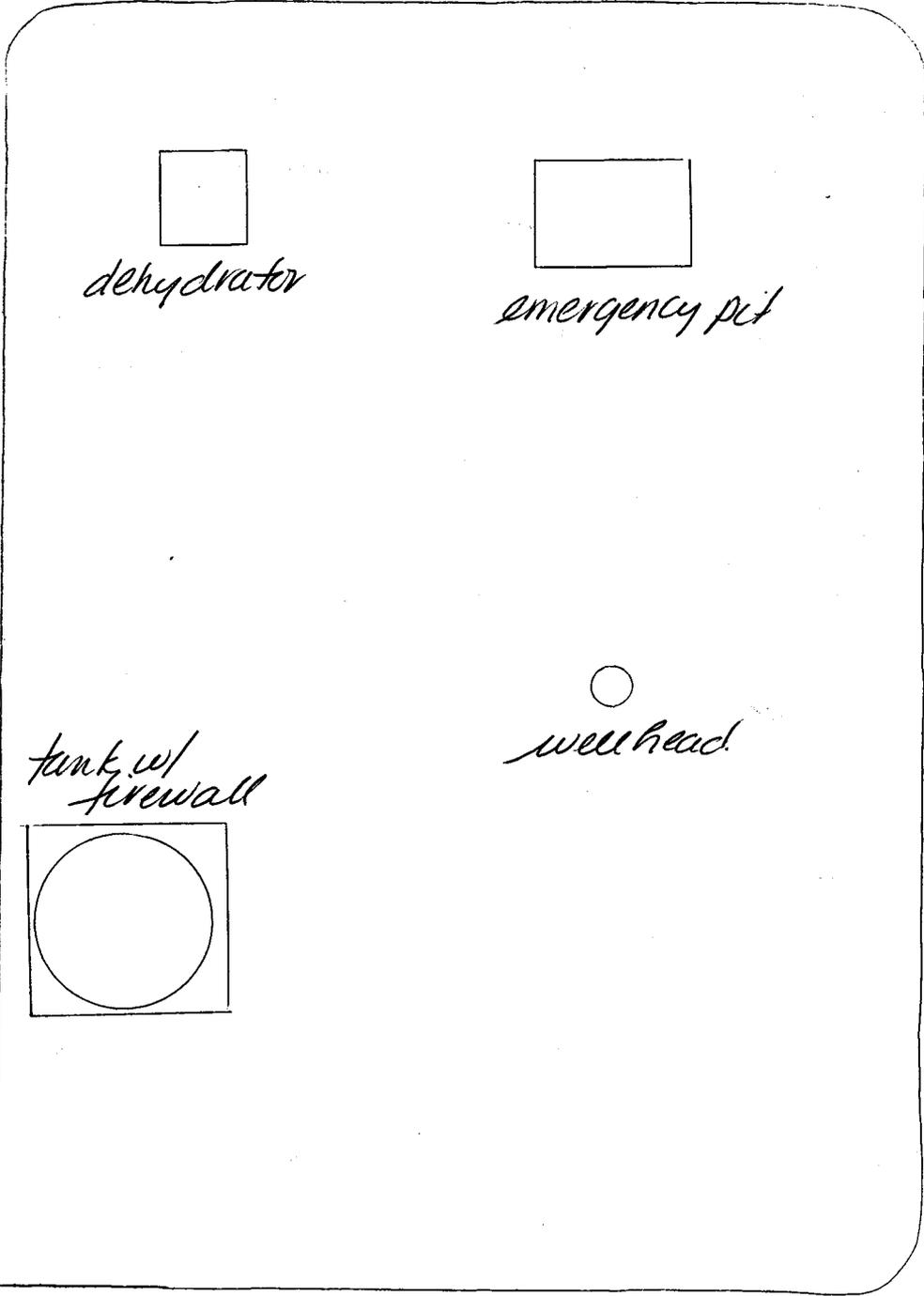
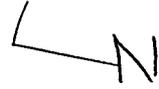
Enclosure

RECEIVED
APR 30 1984

WEXPRO COMPANY
LANDS & LEASING

Clay Basin U# 62 Sec 21, 3N, 24E

Ch. 14 June 89



dehydrator

emergency pit

well head

tank w/
firewall

access
road

42-381 50 SHEETS 5 SQUARE
42-382 100 SHEETS 5 SQUARE
42-389 200 SHEETS 5 SQUARE
MADE IN U.S.A.



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

Routing	
1-LEC ✓	6-LEC ✓
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: _____.
- Y 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.*
- Y 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.*
- Y 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

- Yes 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 1. (r649-3-1) The NEW operator of any fee lease well listed above has furnished a proper bond.
- Yes 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

- Yes 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

961106 Dogon 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

8. WELL NAME AND NO.
UNIT AGREEMENT # 892000323B

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

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"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>VARIANCE</u>
	<input type="checkbox"/> Change in Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> 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 of
Oil, Gas and Mining**

Federal Approval Of This
Action Is Necessary

Date: 10/28/02
By: [Signature]
** No Attached Sheet*

COPY SENT TO OPERATOR
Date: 10-29-02
Initial: UHO

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

Signed [Signature] 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.

<u>WELL NAME</u>	<u>API NUMBER</u>	<u>LEGAL DESCRIPTION</u>	<u>COUNTY, STATE</u>	<u>UNIT CA PA NUMBER</u>	<u>LEASE NUMBER</u>
CLAY BASIN FIELD UNIT				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. Long.
54' FSL 751' FEL SE SE 21-3N-24E 40.97546 -109.2047

5. Lease Serial No.
SL-045051-b

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 62

9. API Well No.
43-~~009~~-30061

10. Field and Pool, or Exploratory Area
Frontier

11. County or Parish, State
Daggett Utah

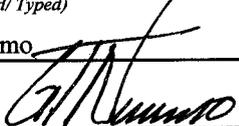
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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 recomplete horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will be 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 recompletion 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 reclamation, 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.	Office	

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: 43009300610000

<p>STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING</p>	<p align="right">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 62</p>
<p>4. LOCATION OF WELL FOOTAGES AT SURFACE: 0054 FSL 0751 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 21 Township: 03.0N Range: 24.0E Meridian: S</p>	<p>9. API NUMBER: 43009300610000</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 03, 2009

By: *Derek Duff*

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

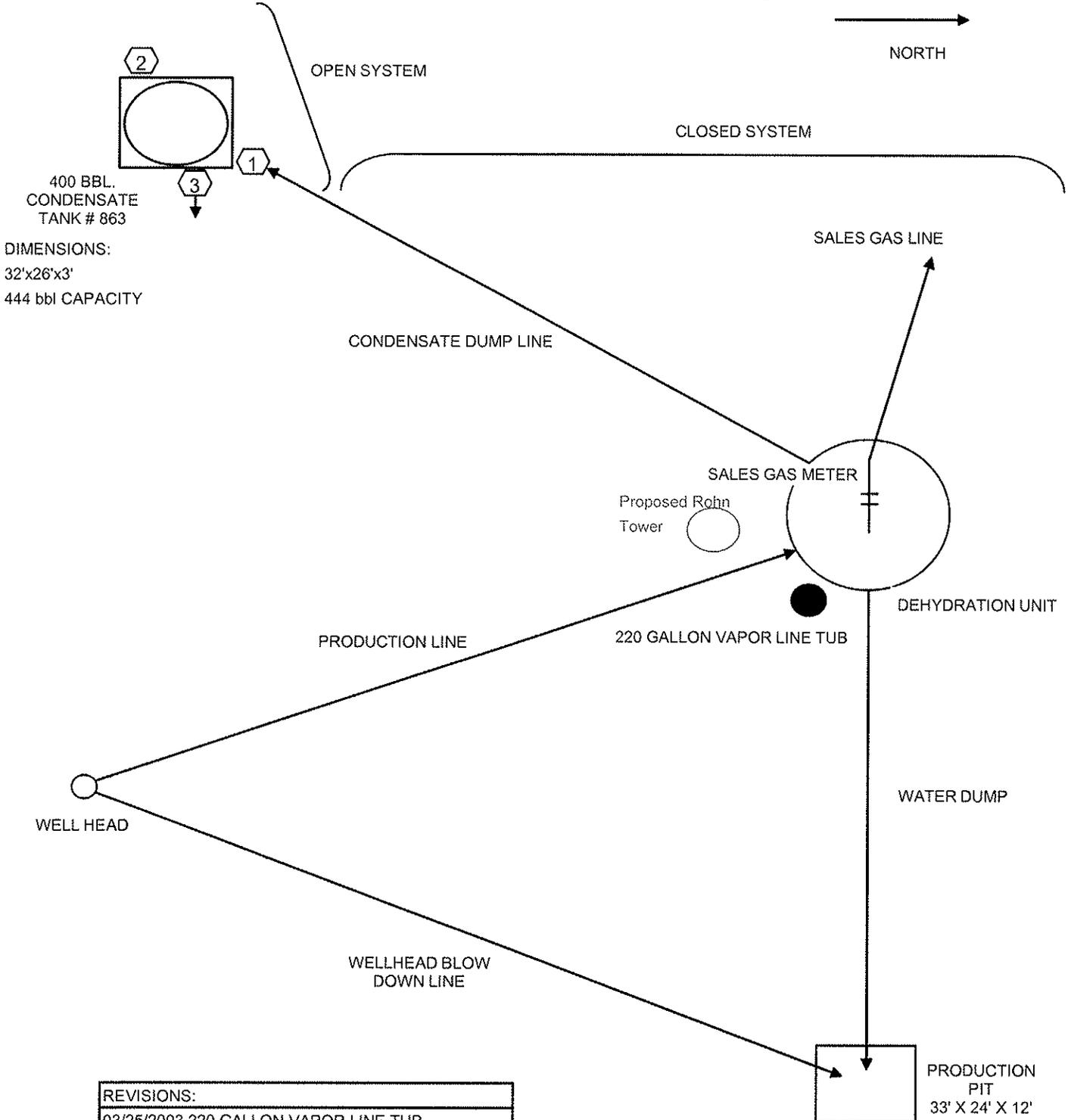
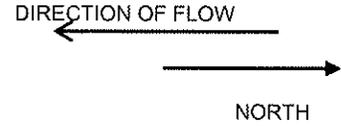
RECEIVED November 02, 2009

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

CLAY BASIN UNIT WELL 62
 SESE 21-3N-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 # 863	
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 220 GALLON VAPOR LINE TUB
03/25/2003 ADDED PRODUCTION PIT DIMENSIONS
12/17/2008 ADDED TANK INFORMATION

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:

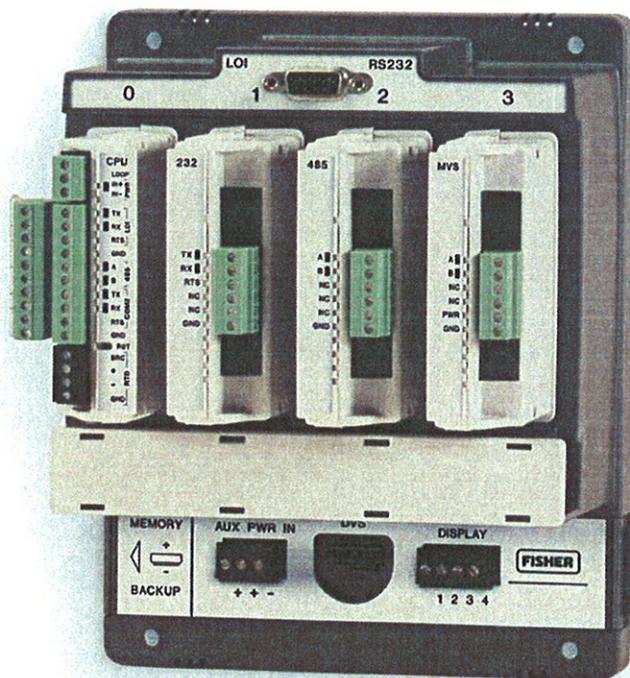
- Custody Transfer
- Wellhead Measurement and Control
- Well Injection Pressure
- Compressor Fuel Gas
- Industrial Gas Usage
- Commercial Gas Usage

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).

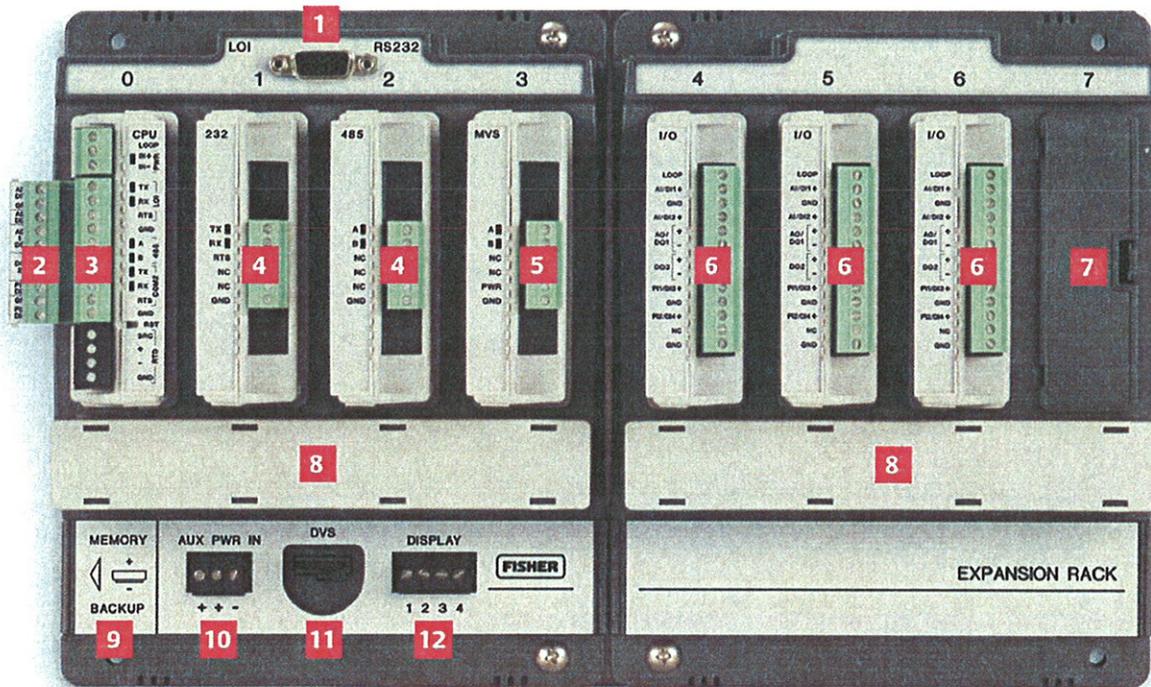
Remote Automation Solutions

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

D351406X012 / Printed in USA / 5M / 12-06

RECEIVED November 02, 2009

MVS205 Multi-Variable Sensor

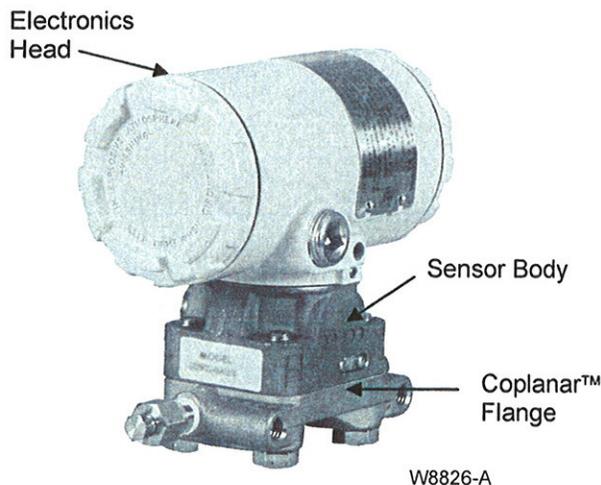
The MVS205 Multi-Variable Sensor (version 1.12 or greater) provides static pressure, differential pressure, and process temperature inputs directly to a ROC 300/800 Series Remote Operations Controller or FloBoss™ 407/500 Series Flow Manager. The inputs from an MVS sensor are used in performing differential 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.

D301079X012

Flow Computer Division

Website: www.EmersonProcess.com/flow



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.

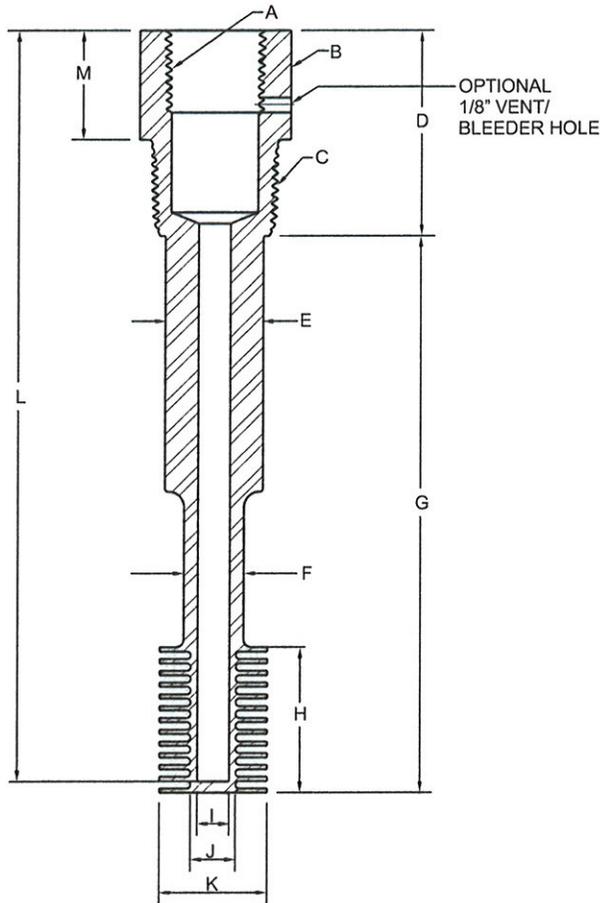
Emerson Process Management
Flow Computer Division
Marshalltown, IA 50158 U.S.A.
Houston, TX 77041 U.S.A.
Pickering, North Yorkshire UK Y018 7JA

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

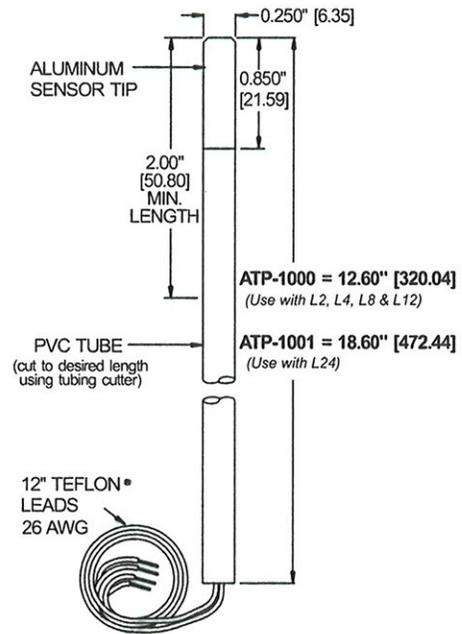


Thermosync Specifications

THERMOSYNC MODEL NO. DIMENSIONS



PROBE



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"	11.49"	.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 62
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		9. API NUMBER: 43009300610000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0054 FSL 0751 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 21 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: 10/12/2012	<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 style="width: 100px;" 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 12, 2012 at 9:00 AM,
after being off for more than 90 days.

**Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
October 23, 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 62
2. NAME OF OPERATOR: WEXPRO COMPANY	9. API NUMBER: 43009300610000
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: 0054 FSL 0751 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 21 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
		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 62
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		9. API NUMBER: 43009300610000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0054 FSL 0751 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 21 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: 12/23/2013	<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 December 23, 2013, after being off for more than 90 days.

**Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
December 30, 2013**

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 62
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		9. API NUMBER: 43009300610000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0054 FSL 0751 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 21 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: 10/25/2014	<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 25, 2014; after being off more than 90 days.

**Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
October 31, 2014**

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
		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 62
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		9. API NUMBER: 43009300610000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0054 FSL 0751 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 21 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: 10/30/2015	<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.

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	