

Phone # (406) 248-7406  
Co. 2-17-81 - Operations Suspended

**FILE NOTATIONS**

Entered in NID File .....  
Location Map Pinned .....  
and Indexed .....  
*(Handwritten checkmarks are present next to these items)*

Checked by Chief .....  
Approval Letter .....  
Disapproval Letter .....

*PMB*  
*10-24-73*

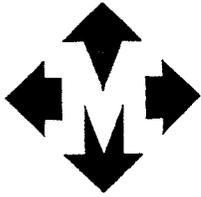
**COMPLETION DATA:**

Date Well Completed .....  
..... WW..... TA.....  
..... OS..... PA.....

Location Inspected .....  
Bond released .....  
State or Fee Land .....

**LOGS FILED**

Driller's Log.....  
Electric Logs (No.) .....  
E..... I..... Dual I Lat..... GR-N..... Micro.....  
BHC Sonic GR..... Lat..... Mi-L..... Sonic.....  
CBLog..... CLog..... Others.....



**mapco**  
INC.

PRODUCTION DIVISION

October 19, 1973

State of Utah  
Department of Natural Resources  
Division of Oil and Gas Commission  
1588 West North Temple  
Salt Lake City, Utah 84116

ATTENTION: Mr. Paul Burchell

Re: MAPCO Inc., et al, Josie No. 1-3  
SE NE (1689' FNL & 1259' FEL) Sec. 3,  
T. 2 S., R. 5 W., USM  
Duchesne County, Utah

Gentlemen:

Enclosed are three (3) copies each of our Application for Permit to Drill and three (3) copies each Well Plats on the above captioned well.

Our \$25,000 blanket bond No. 8055-97-09, dated October 11, 1972, with certified copy of Power of Attorney attached, is on file with your office. We trust that everything is in order, and if it is not, please let us know.

Very truly yours,

MAPCO INC.

*T. F. Barnes*

T. F. Barnes, Engineer

TFB:awm

Enclosures

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL & GAS

5. Lease Designation and Serial No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

6. If Indian, Allottee or Tribe Name

1a. Type of Work

DRILL

DEEPEN

PLUG BACK

7. Unit Agreement Name

b. Type of Well

Oil Well

Gas Well

Other

Single Zone

Multiple Zone

8. Farm or Lease Name

Josie

2. Name of Operator

MAPCO Inc., et al

9. Well No.

1 - 3

3. Address of Operator

Suite 320 Plaza West  
1537 Avenue D, Billings, Montana 59102

10. Field and Pool, or Wildcat

Altamont

4. Location of Well (Report location clearly and in accordance with any State requirements.\*)

At surface

SE/4 NE/4 (1689' FNL & 1259' FEL)

At proposed prod. zone

Section 3, T. 2 S., R. 5 W., USM, Duchesne County, Utah

11. Sec., T., R., M., or Blk. and Survey or Area

Section 3,  
T. 2 S., R. 5 W., USM

14. Distance in miles and direction from nearest town or post office\*

1/2 mile west of Talmage

12. County or Parrish

Duchesne

13. State

Utah

15. Distance from proposed\* location to nearest property or lease line, ft. (Also to nearest drlg. line, if any)

369'

16. No. of acres in lease

158

17. No. of acres assigned to this well

662.04

18. Distance from proposed location\* to nearest well, drilling, completed, or applied for, on this lease, ft.

19. Proposed depth

15,250'

29. Rotary or cable tools

Rotary

21. Elevations (Show whether DF, RT, GR, etc.)

6855' ungraded ground

22. Approx. date work will start\*

November 1, 1973

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"	40	3500'	As required
8-3/4"	7-5/8"	Mixed	13200'	As required
5-1/2"	5-1/2" (liner)	22.54	15250'	As required

This well will be drilled from surface to total depth with rotary drilling equipment including BOP assemblies, three 10" - 5000 psi Cameron and 10" - 5000 psi Hydril and additional as required from surface to 15250'. Other equipment will include: (1) a recording pit level indicator with warning device, (2) mud volume measuring device, and (3) a mud return indicator.

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. *J. F. Barnes for E. J. Milt* Manager of Operations  
Signed *T.F. Barnes for E. J. Milt* Title Northern District

Date October 19, 1973

(This space for Federal or State office use)

Permit No.

43-013-30273

Approval Date

Approved by

Title

Date

Conditions of approval, if any:

PROJECT  
**MAPCO INC.**

Well location, located as shown in the SE 1/4 NE 1/4 Section 3, T2S, R5W, U.S.B.&M. Duchesne County, Utah.

NOTE:  
Bearings are assumed but relative.



CERTIFICATE

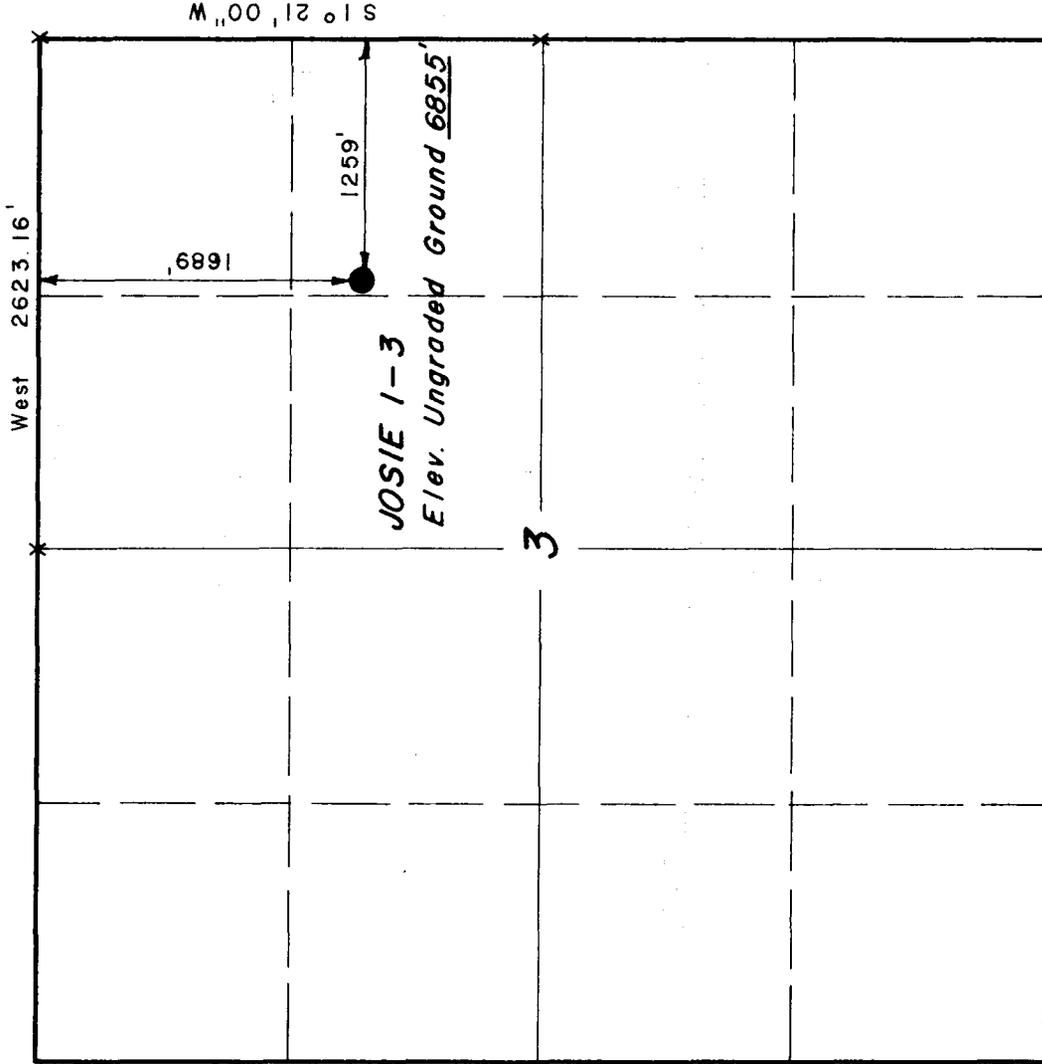
THIS IS TO CERTIFY THAT THE ABOVE PLAT WAS PREPARED FROM FIELD NOTES OF ACTUAL SURVEYS MADE BY ME OR UNDER MY SUPERVISION AND THAT THE SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

*Laurence C. Fry*  
REGISTERED LAND SURVEYOR  
REGISTRATION NO 3137  
STATE OF UTAH

UINTAH ENGINEERING & LAND SURVEYING  
P.O. BOX Q - 110 EAST - FIRST SOUTH  
VERNAL, UTAH - 84078

SCALE 1" = 1000'	DATE Oct. 5, 1973
PARTY B.R. A.K.	REFERENCES GLO Plat
WEATHER Fair.	FILE MAPCO, 1973

T2S, R5W, U.S.B.&M.



X = Section Corners Used.

October 24, 1973

Mapco Inc.  
1537 Avenue D  
Suite 320  
Billings, Montana 59102

Re: Well No. Mapco et al Josie #1-3  
Sec. 3, T. 2 S, R. 5 W, USM  
Duchesne County, Utah

Gentlemen:

Insofar as this office is concerned, approval to drill the above referred to well is hereby granted in accordance with the Order issued in Cause No. 139-8.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately notify the following:

PAUL W. BURCHELL - Chief Petroleum Engineer  
HOME: 277-2899  
OFFICE: 328-5771

Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling. Your cooperation relative to the above will be greatly appreciated.

The API number assigned to this well is 43-013-30273.

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

CLEON B. FEIGHT  
DIRECTOR

CBF:sd

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**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.)

<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b>  <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>  <b>7. UNIT AGREEMENT NAME</b>  <b>8. FARM OR LEASE NAME</b> Josie
<b>2. NAME OF OPERATOR</b> MAPCO Inc., et al		<b>9. WELL NO.</b> 1 - 3
<b>3. ADDRESS OF OPERATOR</b> Suite 320 Plaza West, 1537 Avenue D, Billings, Montana 59102		<b>10. FIELD AND POOL, OR WILDCAT</b> Altamont
<b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE/4 NE/4 (1689' FNL & 1259' FEL) Section 3, T. 2 S., R. 5 W., USM Duchesne County, Utah		<b>11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA</b> Section 3, T. 2 S., R. 5 W., USM
<b>14. PERMIT NO.</b> 43-013-30273	<b>15. ELEVATIONS</b> (Show whether DF, RT, OR, etc.) 6855' G.L. - 6876' K.B.	<b>12. COUNTY OR PARISH</b> Duchesne <b>18. STATE</b> Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> (Other) <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> ABANDON* <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREATMENT <input type="checkbox"/> SHOOTING OR ACIDIZING <input type="checkbox"/> (Other) <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> ABANDONMENT* <input type="checkbox"/>

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

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

OCTOBER REPORT:

10-31-73      SPUDDED 7:00 P.M.  
  
T.D. 64'; conditioning surface hole - boulders.

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

SIGNED <u>Edwin J. Milt</u>	TITLE <u>Manager of Operations Northern District</u>	DATE <u>November 12, 1973</u>
-----------------------------	--	-------------------------------

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**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.)

<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
<b>2. NAME OF OPERATOR</b> MAPCO Inc., et al		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
<b>3. ADDRESS OF OPERATOR</b> Suite 320 Plaza West, 1537 Avenue D, Billings, Montana 59102		7. UNIT AGREEMENT NAME
<b>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface</b> SE/4 NE/4 (1689' FNL & 1259' FEL) Section 3, T. 2 S., R. 5 W., USM Duchesne County, Utah		8. FARM OR LEASE NAME Josie
<b>14. PERMIT NO.</b> 43-013-30273	<b>15. ELEVATIONS (Show whether DF, RT, GR, etc.)</b> 6855' G.L. - 6876' K.B.	9. WELL NO. 1 - 3
		10. FIELD AND POOL, OR WILDCAT Altamont
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Section 3, T. 2 S., R. 5 W., USM
		12. COUNTY OR PARISH Duchesne
		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 <input type="checkbox"/>	FULL 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) _____	
(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.)\***

NOVEMBER REPORT:

11-1 thru  
11-3-73: T.D. 382'; drilled 12-1/4" hole to 382'. Picked up 17-1/2" hole opener and tripped in. Reamed 12-1/4" hole to 17-1/2" to 382'

11-4 thru  
11-6-73: T.D. 492'; circulated and condition hole to run 13-3/8" casing. Tripped out. Ran 10 joints of 13-3/8", 68#, K-55 STC casing and landed at 374' K.B. Ran Halliburton guide shoe on bottom, baffle plate at 330', centralizers at 359', 330', and 289'. Halliburton cemented with 500 sacks Class "G" containing 3% CaCl<sub>2</sub> and 1/4 lb. Floseal per sack. Pumped 10 BW ahead and displaced with 50 BW. Bumped plug at 2:15 AM, 11-5-73, with 600 psi. Good cement returns to surface. WOC. Nippling up 13-3/8". Picked up BHA and tripped in. Drilled baffle plate, cement, and guide shoe. Drilled new formation @374'. Drilled to 492'. Rigged up air compressor.

11-7 thru  
11-13-73: T.D. 3500'; drilling Uinta formation.

11-14 thru  
11-16-73: T.D. 3500'; ran 87 joints of 9-5/8", 36#, K-55, STC casing with Halliburton guide shoe at 3500', float collar at 3451', centralizers at 3476', 3407', and 1564' and a cement basket at 1534'. Landed casing at 3500'. Cemented with 700 sacks 65-35 Pozmix containing 10% salt, 1/4#/sack Flocele, 12.4 ppg slurry density; followed by 250 sacks 50-50 pozmix contain 2% gel,

18. I hereby certify that the foregoing is true and correct  
 SIGNED Edwin J. Mitt TITLE Manager of Operations Northern District DATE December 11, 1973

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**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.)

<b>1.</b> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b>	
<b>2. NAME OF OPERATOR</b> MAPCO Inc., et al		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>	
<b>3. ADDRESS OF OPERATOR</b> Suite 320 Plaza West, 1537 Avenue D, Billings, Montana 59102		<b>7. UNIT AGREEMENT NAME</b>	
<b>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface</b> SE NE (1689' FNL & 1259' FEL) Section 3, T. 2 S., R. 5 W., USM Duchesne County, Utah		<b>8. FARM OR LEASE NAME</b> Josie	
<b>14. PERMIT NO.</b> 43-013-30273		<b>9. WELL NO.</b> 1 - 3	
<b>15. ELEVATIONS (Show whether DF, RT, OR, etc.)</b> 6855' G.L. - 6876' K.B.		<b>10. FIELD AND POOL, OR WILDCAT</b> Altamont	
		<b>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> Section 3 T. 2 S., R. 5 W., USM	
		<b>12. COUNTY OR PARISH</b> Duchesne	<b>13. STATE</b> Utah

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

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

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

DECEMBER REPORT:

12-1 thru  
12-30-73: T.D. 13,200'; drilling Green River and Wasatch formations.

SAMPLE TOP WASATCH RED BEDS: 11,864 (-4988) feet

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

SIGNED <u>Edwin J. Mill</u>	TITLE <u>Manager of Operations Northern District</u>	DATE <u>January 4, 1974</u>
-----------------------------	--	-----------------------------

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR MAPCO Inc., et al		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Suite 320 Plaza West, 1537 Avenue D, Billings, Montana 59102		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE/4 NE/4 (1689' FNL & 1259' FEL) Section 3, T. 2 S., R. 5 W., USM Duchesne County, Utah		8. FARM OR LEASE NAME Josie
14. PERMIT NO. 43-013-30273	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6855' G.L. - 6876' K.B.	9. WELL NO. 1 - 3
		10. FIELD AND POOL, OR WILDCAT Altamont
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 3, T. 2 S., R. 5 W., USM
		12. COUNTY OR PARISH Duchesne
		13. STATE Utah

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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

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

MARCH REPORT: Continued --

4505.41 as heat string. Hung in hanger at 4525.41 K.B. Removed L & M 8" BOP's and installed 10,000# OCT christmas tree. Tested tree seals to 5000 psi. Held OK. Tested 2-7/8" tubing and tree to 10,000#. Held OK. Pressure tested annulus to 3000 psi; held OK. Rigged up Otis with slick line and ran hydrostatic baler, spang jars, hydraulic jars and sinker bars to bale off top of XX plug. Ran Otis XX plug plucker with equalizer. Jarred XX plug loose and came out of hole with same. Open well to pit for clean up. T.D. 15,248'; well shut in waiting on tank battery completion.

3-6 thru 15-74:

3-16-74: T.D. 15,248'; flowed 1256 barrels oil in 24 hours through 12/64" choke at 2700 psi FTP.

END OF MONTHLY SUNDRY NOTICES

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

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

P-1

STATE OF UTAH

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

OIL & GAS CONSERVATION COMMISSION

**SUNDRY NOTICES AND REPORTS ON WELLS**

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<b>2. NAME OF OPERATOR</b> MAPCO Inc., et al		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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		12. COUNTY OR PARISH Duchesne
		18. 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)

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.)\*

**JANUARY REPORT:**

1-1 thru

1-3-74: T.D. 13,200'; Circulating and conditioning hole for logs. Rig froze up. Diesel set up in all lines. Thawing out rig. Thawed out mud system and mixed 1100 barrels mud.

1-4-74:

T.D. 13,200'; washed from 12,730 to 12,937'; build 1200 barrel mud volume. Washed from 12,937 to 12,968; built 1200 barrel mud volume. Washed from 12,968 to 12,998'; lost total 3800 barrels.

1-5 thru

1-7-74: T.D. 13,200'; washed from 12,998 to 13,155'. Worked pipe in tight hole at 13,125'. Build 1000 barrel mud volume. Spotted 9.7 ppg mud pill on bottom. Tripping out. Rigged up Schlumberger. Ran Dual Induction Laterolog 8 and BHC Sonic-GR combination tool. Had to spud through tight spots at 9878' and 10,290'. Logging tool stopped at 11,781'; pulled tool out of hole. Tripped in and hit bridge at 12,120'. Build mud volume. Washed bridge from 12,120 to 12,130' with no returns. Began injecting air at 12,130' without returns. Tripped to 12,600'; washed bridge from 12,600 to 13,200'. Build 850 barrel mud volume. Circulated bottoms up.

---CONTINUED ON PAGE 2---

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

SIGNED

*E. J. MITT*  
E. J. MITT

TITLE

Manager of Operations,  
Northern District

DATE

February 13, 1974

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

Form OGCC-1 b

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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<b>2.</b> NAME OF OPERATOR MAPCO Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
<b>3.</b> ADDRESS OF OPERATOR		7. UNIT AGREEMENT NAME
<b>4.</b> LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		8. FARM OR LEASE NAME Josie
<b>14.</b> PERMIT NO.		9. WELL NO. 1 - 3
<b>15.</b> ELEVATIONS (Show whether DF, RT, GR, etc.)		10. FIELD AND POOL, OR WILDCAT Altamont
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Section 3
		T. 2 S., R. 5 W., USM
		12. COUNTY OR PARISH Duchesne
		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 <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) _____	
(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.)\*

NOVEMBER REPORT CONTINUED --

10% salt, 1/4#/sack Flocele, 14.4 ppg slurry density; and tailed in with 50 sacks class "G" containing 10% salt, 1/4#/sack Flocele, 15.8 ppg slurry density. Pumped cement at 9 bbl/min. with 700-1000 psi. Bumped plug at 5:37 P.M., 11-14-73 with 1500 psi. Displaced with 267 bbls. water; float held OK. No returns throughout job. Pumped down annulus 150 sacks class "G" with 25% Cal Seal, 15.7 ppg slurry density; no returns. WOC 1/2 hr. Pumped down annulus 200 sacks class "G" containing 3% CaCl<sub>2</sub>, 15.9 ppg slurry density; no returns. WOC 1-1/2 hrs. Pumped down annulus 200 sacks class "G", containing 3% CaCl<sub>2</sub>, 15.9 ppg slurry wt; 5 bbls. cement return. Cement job completed 9:30 PM, 11-14-73. WOC. Nippling up 9-5/8" casing. Picked up 8" DC and DP and tripped in. Drilled firm cement at 3447', plug and float collar at 3452' and guide shoe at 3500'.

11-17 thru  
11-30-73:

T.D. 8515'; drilling Green River formation.

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

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

**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.)

<p>1. <input checked="" type="checkbox"/> OIL WELL    <input type="checkbox"/> GAS WELL    <input type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR MAPCO Inc., et al</p> <p>3. ADDRESS OF OPERATOR Suite 320 Plaza West 1537 Avenue D, Billings, Montana 59102</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE NE (1689' FNL &amp; 1259' FEL) Section 3, T. 2 S., R. 5 W., USM Duchesne County, Utah</p> <p>14. PERMIT NO. 43-013-30273</p>	<p>5. LEASE DESIGNATION AND SERIAL NO.</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Josie</p> <p>9. WELL NO. 1 - 3</p> <p>10. FIELD AND POOL, OR WILDCAT Altamont</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 3, T. 2 S., R. 5 W., USM</p> <p>12. COUNTY OR PARISH Duchesne</p> <p>13. STATE Utah</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6855' G.L. - 6876' K.B.</p>	

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

NOTICE OF INTENTION TO :		SUBSEQUENT REPORT OF :	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACUTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACUTURE 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) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

FEBRUARY REPORT:

2-1 thru 15-74: T.D. 15,248'; drilled Wasatch formation to total depth.

2-16 & 17-74: T.D. 15,248'; conditioned hole for logging. Schlumberger ran DILL-8 15,248 to 13,089; BHC Sonic-GR 15,214 to 13,089; FDC 15,251 to 13,087; CNL 15,251 to 12,300'.

2-18-74: T.D. 15,248'; ran 73 joints of 5-1/2", 22.54#, P-110, Hydril SFJ-P (2324') liner. Liner set at 15,186 with liner top at 12,862. Ran Otis type "WB" permanent packer with 2 - "X" nipples and "N" nipple rail-pipe assembly. Set pack at 12,852 with tailpipe at 12,887.

2-19-74: T.D. 15,248'; rigged up Halliburton and displaced mud in casing with 500 barrels of water at 12,852'. Laid down 3-1/2" drill pipe and 4-3/4" drill collars. Nippling down. RIG RELEASED AT 5:00 PM, 2-20-74.

Rigging down rotary tools.

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

Manager of Operations  
Northern District

SIGNED *Edwin J. Milt*  
Edwin J. Milt

TITLE

DATE March 13, 1974

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**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.)

<b>1.</b> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b>  <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>  <b>7. UNIT AGREEMENT NAME</b>  <b>8. FARM OR LEASE NAME</b> Josie
<b>2. NAME OF OPERATOR</b> MAPCO Inc., et al		<b>9. WELL NO.</b> 1 - 3
<b>3. ADDRESS OF OPERATOR</b> Suite 320 Plaza West, 1537 Avenue D, Billings, Montana 59102		<b>10. FIELD AND POOL, OR WILDCAT</b> Altamont
<b>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)</b> At surface SE NE (1689' FNL & 1259' FEL) Section 3, T. 2 S., R. 5 W., USM Duchesne County, Utah		<b>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> Section 3 T. 2 S., R. 5 W., USM
<b>14. PERMIT NO.</b> 43-013-30273	<b>15. ELEVATIONS (Show whether DF, RT, OR, etc.)</b> 6855' G.L. - 6876' K.B.	<b>12. COUNTY OR PARISH</b> Duchesne
		<b>18. STATE</b> Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	
(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.)\***

JANUARY REPORT: - Continued -

1-8 & 9-74: T.D. 13,200'; Spotted 500 barrels of 11 ppg mud on bottom. Chained out of hole to log. Ran FDC-CNL logging tool. Tool stopped at 5797'. Pulled tool out of hole. Rigged up BHC Sonic-GR and DILL combination and tripped in. Tool stopped at 5800'; pulled out of hole. Tripped in with drill pipe to 11,094'. Hit bridges at 7256, 7454 and 9678 on trip in. Tripping out of hole to log. Schlumberger ran BHC Sonic-GR and DILL combination. Hit bridges at 10,240', 11,690' and 12,318' going in hole with tool. Logging tool stopped at 12,448'. Changed out logging trucks. Ran in hole with FDC-CNL logging tool, stopped at 7500'. Came out to run drill pipe and clean out for second log run.

1-10-74: T.D. 13,200'; Rigged up Schlumberger and ran Formation Density log. Tripped in to 12,490'. Tried to work past junk (centralizers from DILL 8 Sonic-GR tool) at 12,445-12,496' with no returns. Ran combination DILL 8 & BHC Sonic-GR, logged interval 12,444-3,510'. Made trip in hole to 12,444' (did not circulate or rotate). Ran FDC-CNL with Caliper, logged interval 12,440-7500'. Lost total of 1600 barrels.

1-11-74: T.D. 13,200'; built 4000 barrels mud volume. Washed 12,496-13,093'. Lost total 4500 barrels  
 --- CONTINUED ON PAGE 3---

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

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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2. NAME OF OPERATOR MAPCO Inc., et al		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
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14. PERMIT NO. 43-013-30273		9. WELL NO. 1 - 3	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6855' G.L. - 6876' K.B.		10. FIELD AND POOL, OR WILDCAT Altamont	
		11. SEC., T., R., M., OR BLK. AND SUBVY OR AREA Section 3 T. 2 S., R. 5 W., USM	
		12. COUNTY OR PARISH Duchesne	13. STATE Utah

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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

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

JANUARY REPORT: - Continued -

1-12 & 13-74: T.D. 13,200'; washed 13,093-13,187'. Laid down drill collars. Rigged up to run 7-5/8" casing. Ran a total of 330 joints 7-5/8", 33.70#, 29.70#, 26.40#, Buttress and LT&C, S-95, N-80, CF-95 casing. Landed at 13,087'. Float collar at 13,042'. Rigged up Halliburton and cemented with 300 sacks Howco Lite, 250 sacks 50-50 Pozmix and tailed in with 50 sacks Class "G" cement. All of the cement contained the following additives: 10% salt, 0.5% CFR-2, 1/4# Flocele/sack, 0.3% HR-4. Circulation pressure while cementing increased to 1200 psi from 400 psi initial displacement pressure. Bumped plug at 5:00 PM, 1-13-74 with pressure at 2000 psi after pumping a total of 605 barrels.

1-14 & 15-74: T.D. 13,200'; Waiting on cement and nipples up. Tested well head to 3500 psi.

1-16 & 17-74: T.D. 13,200'; changed out kelly. Pressure tested BOP to 5,000 psi, Hydril to 3,000 psi, choke manifold to 5,000 psi. Held OK. Picking up 3-1/2" drill pipe and 4-3/4" drill collars. Drilled cement top at 13,018' and guide shoe at 13,085'. Washed to 13,200'. Circulated and conditioned mud and hole.

1-18 thru 1-31-74: T.D. 14,157'; drilling Wasatch formation.  
SAMPLE TOP BASE WASATCH RED BEDS: 13,776 (-6900) feet.

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

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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3. ADDRESS OF OPERATOR Suite 320 Plaza West, 1537 Avenue D, Billings, Montana 59102		7. UNIT AGREEMENT NAME
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14. PERMIT NO. 43-013-30273	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6855' G.L. - 6876' K.B.	9. WELL NO. 1 - 3
		10. FIELD AND POOL, OR WILDCAT Altamont
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		12. COUNTY OR PARISH Duchesne
		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)

- 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.)\*

MARCH REPORT:

3-1 & 2: T.D. 15,248'; moved in and rigged up Western Oil Well Service Rig. Rigged down OCT blind flange and 10" x 6" API spool. Installed and tested to 2500 psi 10" x 8" API tubing head. Installed 8" land and marine BOP's. Ran 243 joints 2-7/8", 6.5#, A-95 Hydril N-80 tubing and 151 joints 2-7/8", 6.5#, SC Hydril P-105 tubing. Hydrotested all tubing to 10,000 psi; held OK. Set at 12,857.48' K.B. with 10,000# on packer. Displaced down hole 250 bbls. fresh water, 330 bbls. 10# treated CaCl<sub>2</sub> water, 65 bbls. fresh water, 5 bbls. diesel fuel.

3-3-74: T.D. 15,248'; pressure tested 2-7/8" tubing to 10,000 psi. Bled off to 8600# in 20 mins. Released pressure and repressured to 10,000 psi. Bled off to 7900# in 1 hour. Pulled 2-7/8" tubing from well. Seal assembly did not indicate a leak. Changed out seal on seal assembly.

3-4-74: T.D. 15248'; redressed Otis Seal Assembly with new seals and reran 394 joints 2-7/8", 6.5# Hydril tubing. Hydrotested all tubing and seal assembly to 10,000 psi. Held OK with no leaks. Respotted treated CaCl<sub>2</sub> water.

3-5-74: T.D. 15,248'; pressure tested 2-7/8" tubing and seal assembly to 10,000 psi. Pressure bled off slowly to 7350# in 30 mins. and then it stabilized at that pressure. Hung 2-7/8" tubing in spool with 10,000# on packer. Ran 146 joints 203/8", 4.7#, EUE 8 round, J-55 tubing with overall measurement of

--- CONTINUED ON PAGE 2 ---

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

SIGNED Edwin J. MITT

TITLE Manager of Operations Northern District

DATE April 15, 1974

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

SUBMIT IN DUPLICATE\*

STATE OF UTAH

(See other In-  
structions on  
reverse side)

OIL & GAS CONSERVATION COMMISSION

WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. LEASE AGREEMENT NAME

8. FARM OR LEASE NAME  
Josie

9. WELL NO.  
1-3

10. FIELD AND POOL, OR WILDCAT  
Altamont

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA  
Section 3  
T. 2 S., R. 5 W., USM

12. COUNTY OR PARISH  
Duchesne

13. STATE  
Utah

1. TYPE OF WELL  
OIL WELL  GAS WELL  DRY  Other

2. TYPE OF COMPLETION  
CASE WELL  WORK OVER  DEEP EN  REIN. BACK  DEEP TENSER  Other

3. NAME OF OPERATOR  
MAPCO INC., et al

4. ADDRESS OF OPERATOR  
Suite 320, Plaza West  
1537 Ave. D, Billings, Montana 59102

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface SE NE (1680' FNL & 1259' FEL)  
At top prod. interval reported below Section 3, T. 2 S., R. 5 W., USM  
At total depth Duchesne County, Utah

14. PERMITS NO.  
43-013-30273

15. DATE DRILLED  
10-31-74

16. DATE T.D. REACHED  
2-15-74

17. DATE COMPL. (Ready to prod.)  
3-7-74

18. ELEVATIONS (HP, BND, ST, OR, ETC.)\*  
6855' GL - 6876' KB

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD  
15,248'

21. PLUG BACK T.D. MD & TVD  
15,186'

22. IF MULTIPLE COMPL. HOW MANY?  
No

23. INTERVALS DRILLED BY  
Rotary Tools: Surf.-15,248'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*  
Wasatch

25. WAS DIRECTIONAL SURVEY MADE  
No

26. TYPE ELECTRIC AND OTHER LOGS RUN  
BHC-Sonic-Gamma Ray, Dual Induction  
Laterolog 8, FDC-CNL-Gamma Ray-Caliper

27. WAS WELL CORRED  
No

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

CASING SIZE	WEIGHT, LB/FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"	36#	3500'	12 1/2"	1550 sx.	
7-5/8"	26.4#, 29.7# 33.7#	13,087'	8-3/4"	600 sx.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)
5 1/2"	12,862'	15,186'	None	None

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8"	12,857'	12,852'
2-3/8"	4,525'	

31. PERFORATION RECORD (Interval, size and number)  
None

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION

DATE FIRST PRODUCTION: 3-15-74  
PRODUCTION METHOD: Flowing  
WELL STATUS: Producing

DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N FOR TEST PERIOD	OIL—BBL	GAS—MCF	WATER—BBL	GAS-OIL RATIO
3-20-74	24	14/64"	→	894	302	None	338

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL	GAS—MCF	WATER—BBL	OIL GRAVITY-API (CORR.)
1700	→	→	894	302	None	41.7

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)  
Used for fuel & vented.

TEST WITNESSED BY  
Robert G. Jessen

35. LIST OF ATTACHMENTS

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

SIGNED: \_\_\_\_\_  
E. J. Hill  
Manager of Operations  
TITLE: Northern District  
DATE: April 25, 1974



June 4, 1974

MEMO FOR FILING

Re: MAPCO OIL COMPANY  
Josie #1-3 Fee  
Sec. 3, T. 2 S, R. 5 W,  
Duchesne County, Utah

On May 22, 1974, a visit was made to the above referred to well site.

Met with Mr. Curly Grimley, Production Manager, and discussed operations being conducted on the hole. At the time of the visit they had a workover rig fishing for logging cables stuck in the hole. To date they have fished for eight consecutive days without success. A bulldozer was in the process of filling in the pit and samples of the fluid in the pit were taken for future analyses.

Also met with Mr. Glendon Sorenson who has a 17' water well located approximately 1200' from the Josie #1-3 well, and he informed me that his water well has developed a quality change. Additional samples were taken from his well and a correlation of analysis will be made between the pit and the water well to determine if operations at the Josie #1-3 location are contaminating the drinking water.

PAUL W. BURCHELL  
CHIEF PETROLEUM ENGINEER

PWB:lp

cc: Norm Chamberlain  
Environmental Health

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b>
<b>2. NAME OF OPERATOR</b> MAPCO Inc.		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>
<b>3. ADDRESS OF OPERATOR</b> Suite 320 Plaza West, 1537 Avenue D Billings, Montana 59102		<b>7. UNIT AGREEMENT NAME</b>
<b>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface</b> SE/4 NE/4 (1689' FNL & 1259' FEL) Section 3, T. 2 S., R. 5 W., USM Suchesne County, Utah		<b>8. FARM OR LEASE NAME</b> Josie
<b>14. PERMIT NO.</b> 43-013-30273	<b>15. ELEVATIONS (Show whether DF, RT, GR, etc.)</b> 6855' G.L. - 6876' K.B.	<b>9. WELL NO.</b> 1-3
		<b>10. FIELD AND POOL, OR WILDCAT</b> Altamont
		<b>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> Section 3, T. 2 S., R. 5 W., USM
		<b>12. COUNTY OR PARISH</b>   <b>13. STATE</b> Duchesne   Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Perforate</u>	
(Other) <u>Perforate</u>		(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.)\***

4-27-74 Shut well in at 6:30 AM, with 300 psi FTP. Rigged up Halliburton and started pumping 110°F. diesel at 2 BPM with 800 psi FTP. Pressure increased steadily to 6800 psi FTP. Pumped 150 barrels diesel, followed by 110° F., 7-1/2% MCA containing 30 gallons Morflo 11/1000 gallons and 3 gallons HAI 50 Inhibitor/ 1000 gallons. All fluids pumped at 2 BPM. Pumped 170 bbls. MCA and shut down for 20 mins. FTP 500 psi, ISIP 4600 psi. SIP 15 mins. 4400 psi; SIP 20 mins. 4400 psi. Pumped 21 bbls. MCA and 27 bbls. diesel at 4800 psi, increasing to 5200 psi. Shut down for 15 mins. ISIP 4950 psi, SIP 15 mins. 4800 psi. Pumped 48 bbls. diesel at 5200 psi, increasing steadily to 6100 psi. Shut down for 15 mins. ISIP 5700 psi. SIP 15 mins. 5600 psi. Started pumping 50 bbls. diesel at 6100 psi. FTP 6150 psi. Shut down for 60 mins. ISIP 5750 psi. SIP 15 mins. 5650 psi; SIP 60 mins. 5550 psi; SIP 90 mins 5500 PSI. Opened well to tanks, bypassing treater on 20/64" choke with 5500 psi FTP, decreasing to 950 psi FTP in 30 mins. after 98 bbls. diesel returned to tank. FTP increased to 1800 psi after 35 mins. on 20/64" choke. Opened choke to 24/64" after 45 mins with 1600 psi FTP. Recovered diesel cut with spent acid water, FTP after 60 mins. on 24/64" choke 900 psi. Recovered diesel and spent acid water with very little gas. After 90 mins. turned to pit. Well making mostly spent acid water with diesel and gas. After flowing to pit for 30 mins. on 24/64" choke at 300 psi FTP, well started making mostly diesel and oil. Turned well through treater on 20/64" choke with 350 psi FTP.

18. I hereby certify that the foregoing is true and correct  
 SIGNED E. J. MITT TITLE Manager of Operations Northern District DATE July 3, 1974

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLIC.  
(Other instructions on reverse side)

**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.)

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR MAPCO Inc.</p> <p>3. ADDRESS OF OPERATOR Suite 320 Plaza West, 1537 Avenue D Billings, Montana 59102</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE/4 NE/4 (1689' FNL &amp; 1259' FEL) Section 3, T. 2 S., R. 5 W., USM Suchesne County, Utah</p> <p>14. PERMIT NO. 43-013-30273</p>	<p>5. LEASE DESIGNATION AND SERIAL NO.</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Josie</p> <p>9. WELL NO. 1-3</p> <p>10. FIELD AND POOL, OR WILDCAT Altamont</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 3, T. 2 S., R. 5 W., USM</p> <p>12. COUNTY OR PARISH Duchesne</p> <p>13. STATE Utah</p>
<p>15. ELEVATIONS (Show whether D.F., RT., OR, ETC.) 6855' G.L. - 6876' K.B.</p>	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Perforate</u>	
(Other) <u>Perforate</u>		(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.)\*

5-14-75 T.D. 15,248'; rigged up GO International. Shut in wellhead pressure 2400 psi. Ran bond log from 15,050 to 13,000' with well shut in. Began pulling out of hole; tool stuck coming through packer. Pulled line in two at surface.

5-15 thru 6-10-74 Fishing for logging tool and wireline in hole. Recovered fish and most of wireline. On 6-10-74, GO International ran tools to 13,100' and did not touch anything. Pulled out of hole and rigged up Western to swab well. Worked swab to 5650' and pulled out of hole. Put well on choke and opened to tanks.

6-13-74 Rigged up Halliburton and tested lines to 7500 psi. Pumped 50 bbls. diesel and 4000 gals. Gypsol containing 4 gals Pen-5 penetrant and 121 bbls. water containing 30 gals. Howco suds and 1000# KCL (10 sacks). IPP 6300 psi; min. pump pressure 4000 psi, aver. pump pressure 5000 psi; final pump pressure 4800 psi. ISIP 4750 psi; 5 min. SIP 4650 psi; 15 min. SIP 4650 psi. SIP held steady at 4650 psi. Gypsol is an aqueous solution consisting of 0.5# amonium bicarbonate and 0.5# sodium carbonate per gallon of water.

6-15 thru 6-19-74 Opened well to pit on 16/64" choke. Pressure decreased rapidly from 2750# to 0 after 4 1/2 hours. Well flowed soapy KCl water. Shut well in - prep to perforate. Made two runs with 10' gun with 4 shots per foot, 1-7/8" ceramic shots. First run shot at 14,700-14,710'. Pressure from 2350 to 2450#, bled

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

-- CONTINUED ON PAGE 3

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**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.)

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<p>15. ELEVATIONS (Show whether DT, RT, OR, etc.) 6855' G.L. - 6876' K.B.</p>	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
<p>TEST WATER SHUT-OFF <input type="checkbox"/></p> <p>FRACTURE TREAT <input type="checkbox"/></p> <p>SHOOT OR ACIDIZE <input checked="" type="checkbox"/></p> <p>REPAIR WELL <input type="checkbox"/></p> <p>(Other) <u>Perforate</u></p>	<p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>MULTIPLE COMPLETE <input type="checkbox"/></p> <p>ABANDON* <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p>	<p>WATER SHUT-OFF <input type="checkbox"/></p> <p>FRACTURE TREATMENT <input type="checkbox"/></p> <p>SHOOTING OR ACIDIZING <input checked="" type="checkbox"/></p> <p>(Other) <u>Perforate</u></p>	<p>REPAIRING WELL <input type="checkbox"/></p> <p>ALTERING CASING <input type="checkbox"/></p> <p>ABANDONMENT* <input type="checkbox"/></p>

(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.)\*

well off to unstick gun. Pressure bled to 0, increased to 1450# with ball action on gauges. Pressure fluctuating. Second run shot at 14,635-14,645'. Pressure from 2450 to 2575#. Bled well off to flow gun out of hole. Pressure at 1200#, increased to 1900# on trip out with gun. Turned well to tank on 6-19-74 with 2100#.

6-28-74 Rigged up Halliburton and pumped 65 bbls. of diesel, followed by 4000 gals. Gypsol dropping 1-7/8" RCP ball every 66 gals. Gypsol (total 60 balls). Flushed with 111 bbls. 2% KCl water containing 5 gals. of Howco suds per 1000 gals. Pressure started from 250 psi and increased to 6300 psi on the diesel at 2 BPM with no breaks. Pressure at start of Gypsol was 6300 psi and decreased steadily to 5000 psi at end of Gypsol with no sharp breaks at 2 BPM. Started flush at 5000 psi which increased to 5250 psi when balls started hitting perforations. No sharp ball action. Pumped 101 bbls and 20 bbls flush at 3.6 BPM at 6200 psi and bled back 10 bbls to truck. Pumped 10 bbls. back at 4 BPM at 6400 psi. ISIP 5000 psi; 15 min 4700 psi; 45 min. 4500 psi.

6-29 & 30 Swabbing well and turned to tank battery.

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

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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<p>15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6855' G.L. - 6876' K.B.</p>	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL 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>Perforate</u>	

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

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7-11-74

T.D. 15,248'; OWP perforated five 5 foot zones with 2 shots per foot using 24 gram ceramic charges on formed wire. Perforating details follow: First run, pressure increased from 2000 psi to 2100 psi after shooting 14,470-14,475'; pressure increased to 3000 psi while coming out and going back in with second gun. Second run, pressure decreased from 3000 psi to 1500 psi after shooting 14,375-14,380'. Third run, pressure increased from 1500 psi to 1900 psi after shooting 14,115-14,120'; pressure increased to 2000 psi after tripping out and going back in with fourth gun. Fourth run, pressure increased from 2000 psi to 2200 psi after shooting 13,872-13,877'; pressure increased to 2800 psi on trip out and going back in with fifth gun. Fifth run, bled pressure to 2100 psi and shot 13,820-13,825', pressure jumped to 2500 psi and increased to 2800 psi on trip out. Well flowed 134 barrels of oil in 1 hour through 12/64" choke at 1600 psi FTP and 3 hours through 18/64" choke at 1000 psi FTP.

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

SIGNED Edwin J. Mill TITLE Manager of Operations Northern District DATE July 31, 1974

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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<b>2. NAME OF OPERATOR</b> MAPCO Inc.		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>	
<b>3. ADDRESS OF OPERATOR</b> Suite 320 Plaza West 1537 Avenue D, Billings, Montana 59102		<b>7. UNIT AGREEMENT NAME</b>	
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<b>14. PERMIT NO.</b> 43-013-30273		<b>9. WELL NO.</b> 1 - 3	
<b>15. ELEVATIONS</b> (Show whether OF, RT, OR, etc.) 6855' G.L. - 6876' K.B.		<b>10. FIELD AND POOL, OR WILDCAT</b> Altamont	
		<b>11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA</b> Section 3 T. 2 S., R. 5 W., USM	
		<b>12. COUNTY OR PARISH</b> Duchesne	<b>13. STATE</b> Utah

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	

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11-1-74 T.D. 15,248'; shut well in at 8:00 AM with 50 psi FTP. Rigged up NOWSCO 1" coiled tubing unit and BJ pump truck. Started tubing in hole while BJ pumped 30 barrels formation water containing liquid soap @ .25 BPM @ 1400 psi. Flowed well through treater. When coiled tubing was at 12,000' BJ started pumped acid containing 12% HCl, 3% HF and the following additives per 1,000 gallons: 6 gallons C-15 inhibitor, 3 gallons J-22 demulsifier, 6 gallons B-12 soap, 3 gallons D-10 friction reducer. Pumped 30 barrels acid as tubing reached 14,200' @ .5 BPM @ 2000 psi. Shut flowline off and pumped remaining 29.5 barrels acid into formation @ 4500 psi @ 1.0 BPM. No formation breaks. Displaced coiled tubing with 15 barrels formation water containing liquid soap @ 4500# @ 1.0 BPM. ISIP-0#. Pulled coil tubing to 12,800' and shut down. Tubing pressure was 375 psi after 60 minutes. Started injecting N2 down coiled tubing @ 850 SCFM @ 2600 psi and started down with coiled tubing to 14,200'. Started out of hole with coiled tubing while injection N2. Opened well to pit on 24/64" choke. N2 injection pressure was 2700 psi @ 850 SCFM with 500# back pressure. Well was flowing oil, water and gas to pit. After flowing back 50 minutes, started getting acid water, mud, oil, gas and N2. Opened choke to 48/64" with 200 psi back pressure. Acid water coming back was brackish with quite a bit of mud and solid - Cont.Pg.2

18. I hereby certify that the foregoing is true and correct  
 SIGNED J. D. Holliman /for Manager of Operations TITLE Northern District DATE January 6, 1975

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

**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.)

<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b>	
<b>2. NAME OF OPERATOR</b> MAPCO Inc.		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>	
<b>3. ADDRESS OF OPERATOR</b> Suite 320 Plaza West 1537 Avenue D, Billings, Montana 59102		<b>7. UNIT AGREEMENT NAME</b>	
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<b>14. PERMIT NO.</b> 43-013-30273		<b>9. WELL NO.</b> 1 - 3	
<b>15. ELEVATIONS</b> (Show whether D.F., RT., GR., etc.) 6855' G.L. - 6876' K.B.		<b>10. FIELD AND POOL, OR WILDCAT</b> Altamont	
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		<b>12. COUNTY OR PARISH</b> Duchesne	<b>13. STATE</b> Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

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CONTINUED:

particles that appeared to be shale. When coiled tubing was @ 3300' cut N<sub>2</sub> injection rate to 425 SCFM. Shut off N<sub>2</sub> injection when 1500' from being out of hole with coiled tubing. No fluid was going to pit. When N<sub>2</sub> blew down well was not making anything. Shut well in to let it build pressure.

11-9-74

T.D. 15,248'; Shut well in at 5:00 AM, 11-9-74. At 9:00 AM, 11-9-74 had 100 psi on tubing. Rigged up Dennis Hot Oil Service truck and pumped condensate heated to 150°F down 2-7/8" tubing. Injection pressure increased slowly from 100 to 2100 psi at a rate of 1BPM. Rate stabilized at 1 BPM and at 2100 psi after pumping 80 barrels. Pumped a total of 160 barrels condensate. ISDP 2000#, after 5 minutes 1600 psi after 15 minutes, 1400 psi, after 60 minutes 875 psi. Open well on 15/64" choke bypassing treater. Pressure dropped to 500# in 45 minutes. After 6 hours, tubing pressure was 275 psi on 15/64" choke, well started making oil cut condensate with very little gas. Attempted to turn well through treater but well was not making enough gas. Well still bypassing treater. Turned well through treater at 5:30 AM, 11-10-74 and opened choke to 20/64".

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

<b>SIGNED</b> <u>J. D. Holliman</u>	/for	<b>TITLE</b> <u>Manager of Operations Northern District</u>	<b>DATE</b> <u>January 6, 1975</u>
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(This space for Federal or State office use)

**APPROVED BY** \_\_\_\_\_ **TITLE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**CONDITIONS OF APPROVAL, IF ANY:**

April 9, 1975

MEMO FOR FILING

Re: Mapco Inc.  
Josie 1-3B5  
Sec. 3, T. 2 S, R. 5 W  
Duchesne County, Utah USM

On April 9, 1975, a visit was made to the above referred to well site.

Location and pit in good shape. The compressor being utilized to pump this well, was down at the time of the visit.

CLEON B. FEIGHT  
DIRECTOR

CBF:tb

cc: U. S. GEOLOGICAL SURVEY

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

SUBMIT TRIPPLICATE\*  
(Other instructions on reverse side)

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b>
		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>
<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		<b>7. UNIT AGREEMENT NAME</b>
<b>2. NAME OF OPERATOR</b> MAPCO Inc.		<b>8. FARM OR LEASE NAME</b> Josie
<b>3. ADDRESS OF OPERATOR</b> Suite 320 Plaza West 1537 Avenue D, Billings, Montana 59102		<b>9. WELL NO.</b> 1 - 3
<b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  SE/4 NE/4 1689' FNL & 1259' FEL		<b>10. FIELD AND POOL, OR WILDCAT</b> Altamont
<b>14. PERMIT NO.</b> 43-013-30273		<b>11. SEC., T., R., M., OR BLK. AND SUBVY OR AREA</b> Section 3 T. 2 S., R. 5 W., USM
<b>15. ELEVATIONS</b> (Show whether DF, RT, GR, etc.) 6855' GL - 6876' KB		<b>12. COUNTY OR PARISH</b>   <b>13. STATE</b> Duchesne   Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL 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 checked="" type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/> Perforate	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

- 1-19-75: Acidized with 5000 gals. 15% mud acid with ball sealers. Production increased from 180 to 496 BOPD.
- 3-20-75: Installed gas lift mandrels.
- 5-7-75: Acidized with 5000 gals foamed acid mud. Production at 60 BOPD.
- 1-9-76: Cleaned out liner to 15,101'. Ran tubing with gas lift mandrels and 1" tubing for paraffin chemical injection. Production at 60 BOPD.
- 3-8-76: Perforated 163' in 39 intervals, 2 SPF from 13,996' to 15,005'. Production rose to 50 BOPD from 27.
- 5-16-76: Removed compressor from well. Shut in. Will install hydraulic pump on well.

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

SIGNED Agnes M. Model TITLE Geological Clerk & Secretary DATE AUG 17 1976

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR MAPCO PRODUCTION COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Suite 320 Plaza West 1537 Avenue D, Billings, Montana 59102		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE/4 NE/4 1689' FNL & 1259' FEL		8. FARM OR LEASE NAME Josie
14. PERMIT NO. 43-013-30273		9. WELL NO. 1 - 3
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6855' GL - 6876' KB		10. FIELD AND POOL, OR WILDCAT Altamont
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 3 T. 2 S., R. 5 W., USM
		12. COUNTY OR PARISH Duchesne
		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 <input type="checkbox"/>	PULL OR ALTER CASING <input checked="" 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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	(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.)\*

It is proposed to set a 5-1/2" cast iron bridge plug in the liner above perfs, then pull as much 7-5/8" casing as possible, spotting cement plugs at stub of casing, at base of surface casing, and at surface. Production equipment will be removed from the lease and the lease returned to its original condition.

See attached sheet for proposed procedure.

APPROVED BY THE DIVISION OF  
OIL, GAS, AND MINING

DATE: Dec. 10, 1979

BY: Frank M. Johnson

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

SIGNED Gary J. Evertz TITLE Production Engineer DATE 12-7-79  
Gary J. Evertz

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

CURRENT CONDITIONS

7-5/8" Casing to 13,087'.

5-1/2" Liner from 12,862' to 15,186'.

Perforations: 13,820' - 15,005'.

Hole drilled in liner @ 13,892'.

7-5/8" Baker Lok-set packer @ 12,826'. Tailpipe @ 12,947'. (4 Jts.)

387 Jts. 2-7/8", 6.5# N-80 Hydrii; 6 Jts. 2-7/8" 6.5# N-80, Nu-lock.

51 Jts. 2-3/8" 8rd (heat string).

PROPOSED PROCEDURE

1. MIRU workover rig.
2. Remove wellhead and install BOP's. Pull 2-3/8" heat string.
3. Release Baker Lok-set packer. POOH with tubing and packer.
4. LD packer and BHA. MU 5-1/2" cast iron bridge plug on tubing. Must be capable of pumping cement thru setting tool.
5. RIH with BP on tubing and set it at 13,650' or above top of fill.
6. Spot 25 sx cement on top of bridge plug. POOH and LD tubing.
7. R.U. casing pullers, check for free point of casing. RIH with casing cutter and shoot off casing at deepest point possible. POOH.
8. Pull and LD 7-5/8" casing.
9. RIH with tubing to 50' below casing stub. Spot 50 sx cement across stub of 7-5/8" casing.
10. If amount of open hole between 7-5/8" casing stub and bottom of surface casing is greater than 4000', spot a 50 sx plug at the mid point of the open hole.
11. Pull tubing to bottom of surface casing @ 3500'. Spot a 60 sx plug across shoe of surface casing.

12. POOH with tubing and spot 10 sx plug at the surface.
13. Install dry hole marker, consisting of a piece of pipe 4 inches or greater in diameter and 10 feet or longer. Four feet of the marker should be above ground level and the remainder embedded in cement. The well name, lease number and location should be shown on the marker.
14. RD workover rig.
15. Remove all equipment from lease, and restore surface to original condition.

# EXXON CHEMICAL COMPANY U.S.A.



834-0000-1A

## WATER ANALYSIS

Houston Chemical Plant  
8230 Stedman, Houston, Texas 77029

SAMPLE DESCRIPTION: Water from Josie No. 1-3, Altamont Field, Utah

COMPANY: Mapco Production Co., Rodsevelt, Utah

STSR NUMBER: 75-6041-31

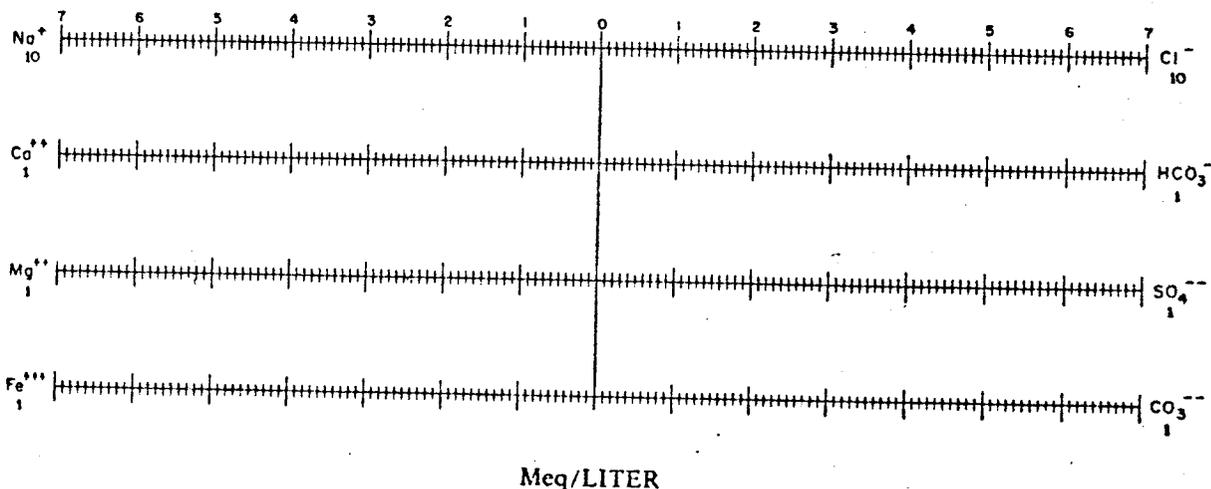
REQUESTED BY: F. H. Collett

DATE RECEIVED: April 1, 1975

ANALYZED BY: C. S. Lieberman

	<u>Mg/L</u>	<u>Meq/L</u>		
Sodium	2420	105	pH	7.4
Calcium	430	22	Specific Gravity at <u>60</u> °F.	1.004
Magnesium	6	0.5		
Chloride	1350	38		
Sulfate	3650	76	Oil Content	<u>Mg/L</u> 247
Bicarbonate	811	13	Organic Matter	
Carbonate	Nil		Hydrogen Sulfide	
Hydroxide	Nil		<u>Barium</u>	Nil
<b>TOTAL</b>	<b>8667</b>			
Dissolved Iron				
Total Iron		24 ppm		

### WATER PATTERN (Stiff Method)



Remarks:

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

5. LEASE DESIGNATION AND SERIAL NO. 3

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL  GAS WELL  OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR  
A.F.E. Management Limited

8. FARM OR LEASE NAME

Josie

3. ADDRESS OF OPERATOR  
Suite 208 372 Bay St. Toronto, Ontario, Canada M5H 2W9

9. WELL NO.

#1-3B5

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface SE 1/4 NE 1/4 (1689' FNL & 1259 FEL)  
Section 3, T 2 S R 5 W Uinta Special Meridian  
Duchesne County, Utah

10. FIELD AND POOL, OR WILDCAT

Altamont

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

Section 3

T2S R5W USM

14. PERMIT NO.  
43-013-30273

15. ELEVATIONS (Show whether DF, RT, OR, etc.)  
6855 GL 6876 KB

12. COUNTY OR PARISH  
Duchesne

18. 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	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input checked="" type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

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

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

This well is presently shut-in. The operator proposes to isolate the Wasatch Formation by placing a permanent Bridge Plug in the casing and on top of the Upper-most Completed interval in the Wasatch Formation. After this isolation job is completed, it is the current plans to complete this well in the Green River formation from an approximate depth of 7500' to 11500'.

*with 10.5% cement on top*

CIBP at 13150

11500

Conditional  
APPROVED BY THE DIVISION  
OF OIL, GAS, AND MINING

DATE: 12-3-81

BY: *Patrick L. Driscoll*

*Providing there is a competent and continuous cement plug from the formation through the well bore which will isolate Wasatch & prevent any migration.*

RECEIVED

7 1981

SON OF  
& MINING

18. I hereby certify that the foregoing is true and correct  
SIGNED *Patrick L. Driscoll*

TITLE Consulting Engineer

DATE Oct, 2, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

File in Duplicate

DIVISION OF OIL, GAS AND MINING  
OF THE STATE OF UTAH

DESIGNATION OF AGENT  
\*\*\*\*\*

The undersigned producer, operator, transporter, refiner, gasoline or initial purchaser who is conducting oil and/or gas operations in the State of Utah, does, pursuant to the Rules and Regulations and Rules of Practice and Procedure of the Division of Oil, Gas and Mining of the State of Utah, hereby appoint Dale A. Kimball, Esq., whose address is 36 South State St. Salt Lake City, Utah 84111, (his, ~~her or theirs~~) designated agent to accept and to be served with notices from said Board, or from other persons authorized under the Oil and Gas Conservation Act of the State of Utah.

The undersigned further agrees to immediately report in writing, all changes of address of the agent, and any termination of the agent's authority, and in the latter case, the designation of a new agent or agents shall be immediately made. This designation of agent, however, shall remain in full force and effect until and unless a new designation agent is filed in accordance with said statute and said regulations.

Effective date of designation October 1, 1981

Company A.F.E. Management Co. Address Suite 208 372 Bay St. Toronto, Ontario, Canada M5H 2W9

By Jack Tindale by P.H. Driscoll Title Vice President  
(signature)

NOTE: Agent must be a resident of the State of Utah

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR A. F. E. Management Company (c/o D.A. Kimball)		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 36 South State Street, Salt Lake City, Utah		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface SW 1/4 NE 1/4 Section 3 (1689' FNL 1259' FEL)		8. FARM OR LEASE NAME Josie
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6876' K.B. 6855' G.L.	9. WELL NO. 1-3B5
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT Altamont
NOTICE OF INTENTION TO:		11. SEC., T., R., M., OR BLK. AND SURVEY OR ABBA Section 3
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>	12. COUNTY OR PARISH   18. STATE Duchesne   Utah
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	
(Other) <input type="checkbox"/>		
SUBSEQUENT REPORT OF:		
WATER SHUT-OFF <input type="checkbox"/>		REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>		ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>		ABANDONMENT* <input type="checkbox"/>
(Other) <u>Monthly report of Operations</u> <input checked="" type="checkbox"/>		
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)		

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

MONTH: OCTOBER 1981

Moved in and rigged-up Utah Well Service Rig #7. Set permanent bridge plug at 12,001' K.B. in order to isolate the Wasatch Transition and Wasatch Formations; Ran CBL and Spectral Log. Rigging up to do cement replacement job from approximately 10,300 to 9,800'.

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

SIGNED Patrick L. Driscoll P.E. TITLE Consultant DATE Nov. 1, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

**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.)

<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
<b>2. NAME OF OPERATOR</b> A.F.E. Management Limited		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
<b>3. ADDRESS OF OPERATOR</b> Suite 208 372 Bay Street, Toronto, Ontario, Canada M5H2W9		7. UNIT AGREEMENT NAME
<b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE½ NE½ (1689 FNL & 1259 FEL) Section 3 T2S R5W Uinta Special Meridian Duchesne County, Utah		8. FARM OR LEASE NAME Josie #1-3B5
<b>14. PERMIT NO.</b> 43-013-30273	<b>15. ELEVATIONS</b> (Show whether DF, RT, OR, etc.) 6855 GL 6876 KB	9. WELL NO. #1-3B5
		10. FIELD AND POOL, OR WILDCAT Altamont
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 3 T2S R5W USM
		12. COUNTY OR PARISH 18. STATE Duchesne Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input checked="" 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) _____	
(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.)\*

NOVEMBER REPORT

Repairing Casing leak at approximately 4,000 feet. Upon completion of repair work, the well will be completed as a lower Green River Form.-producer. The Wasatch is seperated by a permanent bridge plug set at 12,001 feet, and has two sacks of neat,systemized gypsum cement on top of the Bridge plug.

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

SIGNED Patrick L. Driscoll TITLE Consultant DATE Dec. 14, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

SUBMITTED IN TRIPPLICATE  
(Other instructions on reverse side)

**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.)

<b>1. OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b>
<b>2. NAME OF OPERATOR</b> A.F.E. Management Limited		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b>
<b>3. ADDRESS OF OPERATOR</b> Suite 208 372 Bay Street, Toronto, Ontario, Canada M5H 2W9		<b>7. UNIT AGREEMENT NAME</b>
<b>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)</b> At surface SE 1/4 NE 1/4 (1689 FNL 1259 FEL)		<b>8. FARM OR LEASE NAME</b> JOSIE
<b>14. PERMIT NO.</b> 43-013-30273	<b>15. ELEVATIONS (Show whether DF, RT, OR, etc.)</b> 6855 GL 6876 KB	<b>9. WELL NO.</b> #1-3B5
		<b>10. FIELD AND POOL, OR WILDCAT</b> Altamont
		<b>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> Section 3 T2S R5W Uinta Special
		<b>12. COUNTY OR PARISH</b> <b>13. STATE</b> Duchesne Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL 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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

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

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

This well has been completed as a **Green River** Producer from the following gross interval. 10,400' K.B to 11,500' K.B. . The surface facilities are being finished and the well will be placed on production during the month of February, 1982.

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

SIGNED *Edward R. Powell* TITLE *Eng. Comm. Hand* DATE *2-4-82*

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

**TATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING**

SUBMIT IN TRIPLICATE\*  
(See instructions on reverse side)

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>		5. LEASE DESIGNATION AND SERIAL NO.
1. <b>OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. <b>NAME OF OPERATOR</b> AFE Managemnet Limited		7. UNIT AGREEMENT NAME
3. <b>ADDRESS OF OPERATOR</b> Suite 208 372 Bay Street Toronto, Ontario, Canada M5H 2W9		8. FARM OR LEASE NAME Josie
4. <b>LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE 1/4 NE 1/4 (1689' FNL 1259' FEL)		9. <b>WELL NO.</b> 1-3B5
14. <b>PERMIT NO.</b> 43-013-30273		10. <b>FIELD AND POOL, OR WILDCAT</b> Altamont
15. <b>ELEVATIONS</b> (Show whether DF, RT, OR, etc.) 6855' GL 6876' K.B		11. <b>SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> Sec 3, T2S, R5W Uinta M.
16. <b>CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA</b>		12. <b>COUNTY OR PARISH</b> Duchesne
17. <b>DESCRIBE PROPOSED OR COMPLETED OPERATIONS</b> (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.)*		13. <b>STATE</b> Utah

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">TEST WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">FULL OR ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> </tr> <tr> <td colspan="2">(Other) <input type="checkbox"/></td> </tr> </table>	TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>	FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">WATER SHUT-OFF <input checked="" type="checkbox"/></td> <td style="width: 50%;">REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT* <input type="checkbox"/></td> </tr> <tr> <td colspan="2">(Other) testing <input type="checkbox"/></td> </tr> </table>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>	(Other) testing <input type="checkbox"/>	
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>																		
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>																		
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REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>																		
(Other) <input type="checkbox"/>																			
WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>																		
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>																		
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>																		
(Other) testing <input type="checkbox"/>																			

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

On May 27, 1982 a packer was set at 11,527' to produce and test the lower Green River perforations from a gross interval of 11,531' to 11,956'.

RECEIVED

JUN 08 1982

DIVISION OF  
OIL, GAS & MINING

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

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE June 7 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

Chronological Breakdown of Recompletion Workover  
On the Josie 1-3B5 well, Duchesne County, Utah

October-November/81

Oct 29- set 7-5/8" BP @ 12,001 ft. ran Dresser-Atlas CBL 12,000 ft to  
Nov 1 9,400 ft. found cement top @ 10,200 ft. ran Dresser Atlas  
Spectra log 12,000 ft to 6,300 ft.

Nov. 2- repairing hole in 7-5/8" casing @ 4,040 ft. attempting to squeeze  
Dec 17 cement behind 7-5/8" casing 10,200 ft to 10,164 without success.

Dec 18-19 perforate following zones with OWP, casing gun.

	<u>INTERVAL</u>	<u>HEIGHT</u>	<u>SHOTS/FT.</u>	<u>TOTAL SHOTS</u>
ZONE #1	11,934-11,932	2	2	4
	11,918-11,922	4	2	8
34' height	11,872-11,874	2	2	4
109 shots	11,856-11,860	4	2	8
	11,844-11,846	2	2	4
	11,828-11,830	2	2	4
	11,810-11,814	4	4	16
	11,800-11,804	4	4	16
	11,788-11,792	4	4	16
	11,772-11,778	6	4	24
ZONE #2	11,752-11,760	4	2	8
	11,744-11,752	8	2	16
50' height	11,730-11,734	4	2	8
124 shots	11,720-11,924	4	4	16
	11,708-11,704	6	2	12
	11,698-11,702	4	4	16
	11,690-11,694	4	4	16
	11,668-11,642	4	2	8
	11,652-11,656	4	2	8
	11,638-11,642	4	2	8
	11,609-11,603	4	2	8
ZONE #3	11,580-11,588	8	2	16
	11,550-11,554	4	4	16
32' height	11,532-11,536	4	2	8
88 shots	11,500-11,504	4	2	8
	11,444-11,446	2	4	8
	11,427-11,431	4	2	8
	11,400-11,406	6	4	24

	<u>INTERVAL</u>	<u>HEIGHT</u>	<u>SHOTS/FT.</u>	<u>TOTAL SHOTS</u>
ZONE #4	11,380-11,384	4	2	8
	11,355-11,359	4	2	8
26' height	11,334-11,342	81	2	16
52 shots	11,296-11,300	4	2	8
	11,288-11,290	2	2	4
	11,280-11,282	2	2	4
	11,272-11,274	2	2	4
ZONE #5	11,252-11,258	6	2	12
	11,232-11,236	4	2	8
26' height	11,214-11,216	2	2	4
74 shots	11,204-11,208	4	4	16
	11,196-11,198	2	4	8
	11,170-11,178	8	2	16
ZONE #6	10,984-10,986	2	4	8
	10,978-10,980	2	4	8
26- height	10,970-10,974	4	2	8
80 shots	10,962-10,964	2	4	8
	10,914-10,918	4	4	16
	10,866-10,870	4	2	8
	10,814-10,816	2	4	8
	10,802-10,806	4	2	8
	10,788-10,790	2	4	8
ZONE #7	10,762-10,768	6	2	12
	10,754-10,756	2	4	8
22' heights	10,730-10,734	4	2	8
52 shots	10,674-10,678	4	2	8
	10,658-10,660	2	2	4
	10,646-10,648	2	2	4
	10,638-10,640	2	4	8
ZONE #8	10,596-10,598	2	4	8
	10,582-10,584	2	4	8
28' height	10,560-10,562	2	4	8
72 shots	10,544-10,546	2	4	8
	10,508-10,512	4	2	8
	10,416-10,420	4	2	8
	10,400-10404	4	2	8
	10,386-10,390	4	2	8
	10,372-10,376	4	2	8

Dec 20- swabbed interval 10,019' - 11,965'  
Jan 5/82

Jan 6-8 swabbed interval 11,475' - 11,965'. recover 90% water, 10% oil.

Jan 9-11 acidized interval 11,475-11,965 with Western, 3700 gal 15% HCl, displaced with 85 bbls F.W. good breakdown. swabbed 232 bbls back interval cleaned up, 50% water, 50% oil.

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

3 IN TRIPLICATE  
(Enter instructions on reverse side)

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.)

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

FARM OR LEASE NAME

JOSIE

WELL NO.

1-3B5

10. FIELD AND POOL, OR WILDCAT

ALTAMONT

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

Sec. 3, T2S R5W USM

12. COUNTY OR PARISH

DUCHESNE

18. STATE

UTAH

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
AFE MANAGEMENT LIMITED

3. ADDRESS OF OPERATOR  
208-372 Bay Street, Toronto, Ontario, Canada M5H 2W9

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

SE 1/4 NE 1/4 (1689 FNL, 1259 FEL)

DIVISION OF OIL, GAS & MINING

14. PERMIT NO.

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

6855 GL, 6876 KB

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	FULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input 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.)

May 1982

- May 1-5 Pressure test casing. Found leak at 4020 ft. with R.A. tracer log. Ran dual string (2-7/8" & 2-3/8" tubing), production packer at 11,111 ft.; PBDT at 11,955 ft.
- May 5-13 Attempted to drill out undersized sub in 2-7/8" string at 10,573 ft. using Newsco Dynadrill. Not successful.
- May 14-17 PODH with tubing and removed undersized sub. Ran back and reset production packer at 11,111 ft.
- May 18-22 Well on pump - making excessive water. SI on May 23.
- May 28 Lowered production string, set packer at 11,520 ft. Turn well on pump from interval 11,520 - 11,955 ft.

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

SIGNED

*J. P. Tindale*

TITLE

*Geologist*

DATE

*June 7/82*

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

- Jan 12-14 moved packers 10,176-11,067. swabbed interval 50% oil 50% water after 45 bbls swabbed. acidized with Western; 3,650 gals 15% Hcl. displaced with 78 bbls F.W. well flowed back approx 100 bbls. swabbed a further 100 bbls; making good oil cut at end of swab.
- Jan 15-17 moved packers 10,998-11,490. swabbed heavy water cut. swabbed 265 bbls.
- Jan 18- Feb 7 rig well for production. set Baker R3 packer @9,946'. well on pump Feb 7. five day production average 65 BOPD, 495 BWPD.
- Apr 3-29 well shut in.
- May 1-5 pressure test casing. found leak at 4,020 ft with RA tracer log. ran dual string (2-7/8" & 2-3/8" tubing), production packer at 11,111 ft; PBD at 11,955 ft.
- May 5-13 attempted to drill out undersized sub in 2-7/8" string at 10,573 ft using Nowsco Dynadrill. not successful.
- 14-17 PODH with tubing and removed undersized sub. ran back and reset production packer at 11,111 ft.
- 18-22 well on pump - making excessive water. SI on May 23.
- 28 lowered production string, set packer at 11,520 ft. turn well on pump from interval 11,520-11,955 ft. place well on pump. **34.2** **82**
- May 27- June 2 5 day production: 171 BOPD; 410 BWPD



STATE OF UTAH  
NATURAL RESOURCES & ENERGY  
Oil, Gas & Mining

Scott M. Matheson, Governor  
Temple A. Reynolds, Executive Director  
Cleon B. Feight, Division Director

4241 State Office Building • Salt Lake City, UT 84114 • 801-533-5771

March 21, 1983

A. F. E. Management Limited  
372 Bay Street, Suite # 208  
Toronto, Ontario, Canada  
M5H 2W9

Re: Well No. Josie # 1-3B5  
Sec. 3, T. 2S, R. 5W.  
Duchesne County, Utah

Gentlemen:

This letter is to advise you that the Well Completion or Recompletion Report and Log for the above mentioned well is due and have not been filed with this office as required by our rules and regulations.

Please complete the enclosed Form OGC-3, in duplicate, and forward them to this office as soon as possible.

We will be happy to acknowledge receipt of response to this notice if you will include an extra copy of the transmittal letter with a place for our signature, and a self addressed envelope for the return. Such acknowledgement should avoid unnecessary mailing of a firm second notice from our agency.

Your prompt attention to the above will be greatly appreciated.

Respectfully,

DIVISION OF OIL, GAS AND MINING

A handwritten signature in cursive script that reads "Cari Furse".

Cari Furse  
Well Records Specialist

CF/cf  
Enclosure

# A F E management limited

372 BAY STREET, SUITE 208  
TORONTO, ONTARIO M5H 2W9  
(416) 366-4257

April 5, 1983

State of Utah  
Natural Resources & Energy  
4241 State Office Building  
Salt Lake City, Utah 84114  
U.S.A.

ATTENTION: CARI FURSE

Gentlemen:

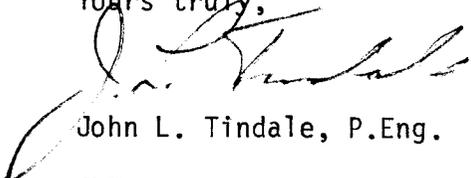
RE: JOSIE 1-3B5, Duchesne County, Utah  
Sec. 3, T2S, R5W

In reply to your letter of March 21, 1983, I am enclosing herewith a Form OGC-3 in duplicate pertaining to the above-captioned well.

In February and June of 1982 we filed Sundry Notice form OGC-16 regarding this well which we felt was sufficient for this Green River recompletion. We also file monthly Report of Operations form DOGC-4 on the well.

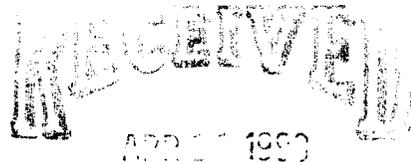
I trust this is sufficient to keep you informed. Should you require additional information or clarification, please let us know and we will be pleased to oblige.

Yours truly,



John L. Tindale, P.Eng.

JLT:des  
Enclosures



DIVISION OF  
OIL GAS & MINING

STATE UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

5. LEASE DESIGNATION AND SERIAL NO

API 43-103-30273

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
n/a

7. UNIT AGREEMENT NAME  
n/a

8. FARM OR LEASE NAME  
JOSIE 1-3B5

9. WELL NO.  
1-3B5

10. FIELD AND POOL, OR WILDCAT  
ALTAMONT

11. SEC., T., R., M., OR BLOCK AND SURVEY  
OR AREA  
Section 3  
T2S R5W USM

12. COUNTY OR  
PARISH  
Duchesne

13. STATE  
Utah

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

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

2. NAME OF OPERATOR  
AFE MANAGEMENT LIMITED

3. ADDRESS OF OPERATOR  
208-372 Bay St., Toronto, Ontario CANADA M5H 2W9

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface SE 1/4 NE 1/4 (1689 FNL 1,259 FEL)  
At top prod. interval reported below  
At total depth

14. PERMIT NO. DATE ISSUED  
to P. Driscoll | Oct. 1981

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 19. ELEV. CASINGHEAD  
Oct. 31/73 March 7/74 6855GL 6876KB

20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS  
11,955 ft.

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 25. WAS DIRECTIONAL SURVEY MADE  
11,520 ft - 11,955 ft - Green River Formation

26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED  
CBL, SPECTROLOG

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1-7/8"	11,520	11,520
					2-3/8"	11,520	11,520

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	see attached

33.\* PRODUCTION  
DATE FIRST PRODUCTION: May 28/82  
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump): hydraulic pump - National P110  
WELL STATUS (Producing or shut-in): producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY  
sold to Shell Oil Co.

35. LIST OF ATTACHMENTS  
perf intervals, acid intervals, chronological completion report

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

SIGNED [Signature] TITLE Geologist DATE April 5/83

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



STATE OF UTAH  
NATURAL RESOURCES  
Oil, Gas & Mining

Scott M. Matheson, Governor  
Temple A. Reynolds, Executive Director  
Dr. G. A. (Jim) Shirazi, Division Director

4241 State Office Building • Salt Lake City, UT 84114 • 801-533-5771

June 17, 1983

A. F. E. Management Company  
208-372 Bay Street  
Toronto, Ontario, Canada  
M5H 2W9

Re: Well No. Josie # 1-3B5  
Sec. 3, T. 2S, R. 5W.  
Duchesne County, Utah

Gentlemen:

According to our records, a "Well Completion Report" filed with this office April 5, 1983, from above referred to well, indicates the following electric logs were run: CBL, Spectralog. As of today's date, this office has not received these logs.

Rule C-5, General Rules and Regulations and Rules of Practice and Procedure, requires that a well log shall be filed with the Commission together with a copy of the electric and radioactivity logs.

We will be happy to acknowledge receipt of your response to this notice if you will include an extra copy of the transmittal letter with a place for our signature, and a self addressed envelope for the return. Such acknowledgment should avoid unnecessary mailing of a second notice from our agency.

Your prompt attention to the above will be greatly appreciated.

Respectfully,

DIVISION OF OIL, GAS AND MINING

Cari Furse  
Well Records Specialist

CF/cf

# A F E management limited

372 BAY STREET, SUITE 208,  
TORONTO, ONTARIO M5H 2W9  
(416) 366-4257

June 22, 1983

State of Utah Natural Resources  
Oil Gas & Mining Division  
4241 State Office Building  
Salt Lake City, Utah 84114  
U.S.A.

ATTENTION: CARI FURSE

Gentlemen:

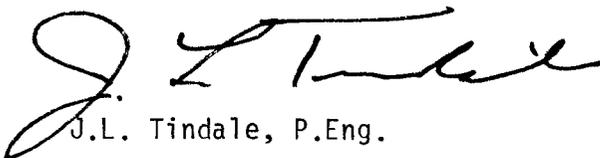
RE: JOSIE 1-3B5 WELL  
Sec. 3, T2S R5W, Duchesne County, Utah

Further to your letter of June 17, 1983, I am enclosing copies of the following logs which are missing from your records:

CBL 11,995' - 9,395'  
Spectrolog 12,000' - 6,300'

No acknowledgement receipt of this data is required.

Yours truly,



J.L. Tindale, P.Eng.

JLT:des  
Enclosures

RECEIVED  
JUL 13 1983  
DIVISION OF  
OIL GAS & MINING

RECEIVED  
MAY 22 1986

# AFE management limited

372 BAY STREET, SUITE 208,  
TORONTO, ONTARIO M5H 2W9  
(416) 366-4257

DIVISION OF  
OIL, GAS & MINING

May 13, 1986

State of Utah Natural Resources  
355 West North Temple  
3 Triad Center, Suite 350  
Salt Lake City, Utah 84180  
U.S.A.

ATTENTION: NORM STOUT

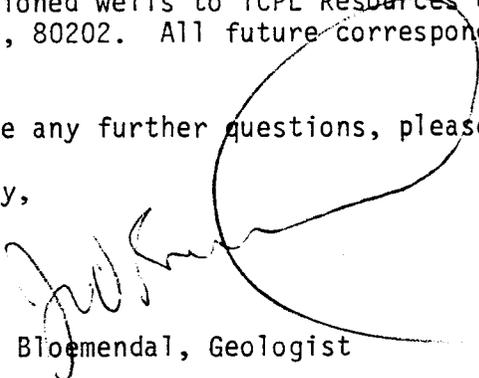
Gentlemen:

RE: DUCHESNE COUNTY, UTAH  
Wilkins 1-24A5 (Section 24, T1S R5W)  
Josie 1-3B5 (Section 3, T2S R5W)

As of May 2, 1986, AFE Management Limited has sold its entire interest in the above-captioned wells to TCPL Resources U.S.A. Ltd., 216-16th St., Suite 1100, Denver, CO, 80202. All future correspondence on these wells must be forwarded to them.

If you have any further questions, please contact us.

Yours truly,

  
Miss Janet Bloemendal, Geologist

JWB:deb

cc: Mari Snyder, TCPL

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

SUB IN TRIPLICATE\*  
(See instructions on reverse side)

**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. <b>OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		5. <b>LEASE DESIGNATION AND SERIAL NO.</b> Private
2. <b>NAME OF OPERATOR</b> TCPL Resources U.S.A. Ltd.		6. <b>IF INDIAN, ALLOTTEE OR TRIBE NAME</b>
3. <b>ADDRESS OF OPERATOR</b> 216 16th Street, Suite 1100, Denver, Colorado 80202		7. <b>UNIT AGREEMENT NAME</b>
4. <b>LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1689' FNL & 1259' FEL, SE/4 NE/4 Section 3-T2S-R5W		8. <b>FARM OR LEASE NAME</b> Josie
14. <b>PERMIT NO.</b> 43-013-30677	15. <b>ELEVATIONS</b> (Show whether OF, RT, GR, etc.) 6888' GR	9. <b>WELL NO.</b> 1-3B5
		10. <b>FIELD AND POOL, OR WILDCAT</b> Altamont
		11. <b>SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> Section 3-T2S-R5W
		12. <b>COUNTY OR PARISH</b> Duchesne
		13. <b>STATE</b> Utah

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

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

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

The operator of this well is being changed from: AFE Management Limited  
372 Bay Street, Suite 208  
Toronto, Ontario, Canada M5H 2W9

to: TCPL Resources U.S.A. Ltd.  
216 16th Street, Suite 1100  
Denver, Colorado 80202

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

SIGNED Owen L. Stone TITLE Operations Engineer DATE 5/16/86

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

# A F E management limited

372 BAY STREET, SUITE 208,  
TORONTO, ONTARIO M5H 2W9  
(416) 366-4257

**RECEIVED**  
JUN 23 1986

June 18, 1986

DIVISION OF  
OIL, GAS & MINING

State of Utah  
Division of Oil, Gas & Mining  
355 West North Temple  
3 Triad Center, Suite 350  
Salt Lake City, Utah 84180-1203  
U.S.A.

ATTENTION: MS. ARLENE SOLLIS

Gentlemen:

RE: CERTIFICATE OF DEPOSIT  
Wilkins 1-24A5 Well  
Duchesne County, Utah

Reference is made to your letter of June 4, 1986, to Mr. Robert Holt of Larsen, Kimball, Parr & Crockett regarding AFE's interest in the captioned well.

This letter shall confirm, as stated in the Settlement Agreement dated May 2, 1986, between TCPL Resources U.S.A. Ltd. and AFE Management, that TCPL has taken over as Operator on the following wells:

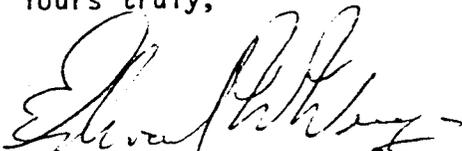
Josie 1A-3B5	Josie 1-3B5
Wilkins 1-24A5	Walker 2-24A5
White Mule Springs 14-5	White Mule Springs 21-7

In addition, as stated in the said Settlement Agreement, and Assignment and Bill of Sale and Conveyance (a copy of which was sent to you by TCPL May 16, 1986), AFE specifically assigned all of its bonds and any collateral associated therewith to TCPL.

This letter shall authorize you to take any action necessary to deliver such bonds and any collateral securing such bonds including, without limitation, that Certificate of Deposit in the amount of \$10,000.00 to TCPL Resources U.S.A. Ltd.

If you have any questions, please advise. Thank you for your immediate attention to this matter.

Yours truly,



Edward W. Wenger, President

cc: Mari Snyder

# DESIGNATION OF OPERATOR

RECEIVED  
JUN 23 1986

The undersigned is, on the records of the Bureau of Land Management, holder of lease

DISTRICT LAND OFFICE: Duchesne County Office  
SERIAL No.:

DIVISION OF  
OIL, GAS & MINING

and hereby designates

NAME: TCPL Resources U.S.A. Ltd.  
ADDRESS: 216-16th St., Suite 1100  
Denver, CO 80202

as his operator and local agent, with full authority to act in his behalf in complying with the terms of the lease and regulations applicable thereto and on whom the supervisor or his representative may serve written or oral instructions in securing compliance with the Operating Regulations with respect to (describe acreage to which this designation is applicable):

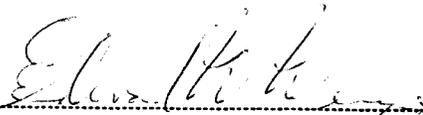
Josie 1-3B5  
Section 3, T2S R5W (SE $\frac{1}{4}$ NE $\frac{1}{4}$ )  
Duchesne County, Utah

It is understood that this designation of operator does not relieve the lessee of responsibility for compliance with the terms of the lease and the Operating Regulations. It is also understood that this designation of operator does not constitute an assignment of any interest in the lease.

In case of default on the part of the designated operator, the lessee will make full and prompt compliance with all regulations, lease terms, or orders of the Secretary of the Interior or his representative.

The lessee agrees promptly to notify the supervisor of any change in the designated operator.

AFE Management Limited



(Signature of lessee)

Edward W. Wenger, President  
208-372 Bay St., Toronto, Ontario  
CANADA M5H 2W9

June 18, 1986

(Date)

(Address)

# DESIGNATION OF OPERATOR

The undersigned is, on the records of the Bureau of Land Management, holder of lease

DISTRICT LAND OFFICE: Duchesne County Office  
SERIAL NO.:



and hereby designates

NAME: TCPL Resources U.S.A. Ltd.  
ADDRESS: 216-16th St., Suite 1100  
Denver, CO 80202

DIVISION OF  
OIL, GAS & MINING

as his operator and local agent, with full authority to act in his behalf in complying with the terms of the lease and regulations applicable thereto and on whom the supervisor or his representative may serve written or oral instructions in securing compliance with the Operating Regulations with respect to (describe acreage to which this designation is applicable):

Josie 1-3B5  
Section 3, T2S R5W (SE $\frac{1}{4}$ NE $\frac{1}{4}$ )  
Duchesne County, Utah

It is understood that this designation of operator does not relieve the lessee of responsibility for compliance with the terms of the lease and the Operating Regulations. It is also understood that this designation of operator does not constitute an assignment of any interest in the lease.

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The lessee agrees promptly to notify the supervisor of any change in the designated operator.

AFE Management Limited

(Signature of lessee)

Edward W. Wenger, President  
208-372 Bay St., Toronto, Ontario  
CANADA M5H 2W9

June 18, 1986

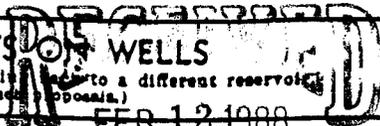
(Date)

(Address)

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS, AND MINING

**SUNDRY NOTICES AND REPORTS OF WELLS**

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



1. OIL WELL  GAS WELL  OTHER  **NE5000 Wessely Energy**

2. NAME OF OPERATOR **Badger Oil Corporation** **N178C** **DIVISION OF OIL, GAS & MINING**

3. ADDRESS OF OPERATOR **P.O. Box 52745, 1001 Pinhook, Lafayette, LA 70505**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface  
**SE/4 NE/4 (1689' FNL & 1259' FEL)**

14. PERMIT NO. **43-013-30273**

15. ELEVATIONS (Show whether OF, RT, OR, etc.)  
**6855' ungraded ground**

5. LEASE DESIGNATION AND SERIAL NO.  
**POW-CERU**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
**021709**

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
**Josie**

9. WELL NO.  
**1 - 3**

10. FIELD AND POOL, OR WILDCAT  
**Altamont**

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
**Sec. 3, T2S, R5W, USM**

12. COUNTY OR PARISH **Duchesne**

13. STATE **UT**

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Change of Operator</u> <input checked="" type="checkbox"/>	

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

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

This is to notify that the Change of Operator is as above. The Utah Representative is as follows:

*Non operator*

Applied Drilling Services, Inc.  
Rt. 1 Box 1764  
Roosevelt, Utah 84066

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

SIGNED *[Signature]* TITLE *Agent Badger Oil Co* DATE *2/1/88*

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)</p>		<p>3. LEASE DESIGNATION &amp; SERIAL NO.</p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p>		<p>6. IF INDIAN ALLOTTEE OR TRIBAL NAME</p>
<p>2. NAME OF OPERATOR UINTA OIL &amp; GAS, INC.</p>		<p>7. UNIT AGREEMENT NAME</p>
<p>3. ADDRESS OF OPERATOR P.O. Box 1618, Roosevelt, Utah 84066</p>		<p>8. FIRST OR LEASE NAME Josie</p>
<p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface SE 1/4 NE 1/4 At proposed prod. zone 1689 - FNL &amp; 1259 FEL</p>		<p>9. WELL NO. 1-3B5</p>
<p>14. API NO. 43-013-30273</p>		<p>10. FIELD AND POOL, OR WILDCAT Altamont</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6855' GL - 6876' KB</p>		<p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 3 T2S, R5W, USM</p>
<p>12. COUNTY Duchesne</p>		<p>13. STATE Utah</p>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACURE 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>Change of Operator</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
APPROX. DATE WORK WILL START <u>May 1, 1995</u>		DATE OF COMPLETION _____	

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.)

\* Must be accompanied by a cement verification report.

Uinta Oil & Gas, Inc., effective May 1, 1995 will be the owner and operator of the above well under Utah Statewide Bond # 7065. Please release Badger's Bond # 178. Please send all reports and correspondence regarding this well to Uinta Oil & Gas, Inc. at the above address. Furthermore, Uinta will be responsible for all reporting effective May 1, 1995.

**RECEIVED**  
JUN 02 1995

DIVISION OF  
OIL, GAS & MINING

Contact Person: Craig Phillips, 801-722-3000

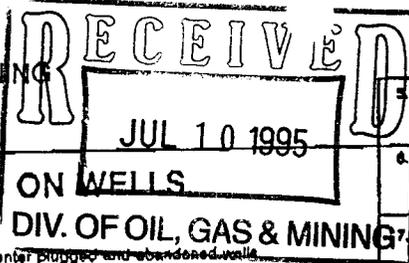
18. I hereby certify that the foregoing is true and correct

SIGNED Craig Phillips TITLE President DATE 5/31/95

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING



SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells. Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.

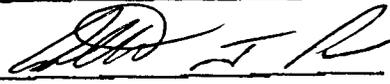
5. Lease Designation and Serial Number:	
6. If Indian, Allottee or Tribe Name:	
7. Unit Agreement Name:	
1. Type of Well: OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> OTHER:	8. Well Name and Number: Josie 1-3B5
2. Name of Operator: Badger Oil Corporation	9. API Well Number: 43-013-30273
3. Address and Telephone Number: P. O. Box 52745; Lafayette, LA 70505; 318/233-9200	10. Field and Pool, or Wildcat: Altamont
4. Location of Well Footages: SE4NE4; 1689' FNL, 1259' FEL OO, Sec., T., R., M.: Section 3, T2S-R5W, USM	County: Duchesne State: Utah

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

NOTICE OF INTENT (Submit in Duplicate)	SUBSEQUENT REPORT (Submit Original Form Only)
<input type="checkbox"/> Abandon <input type="checkbox"/> Repair Casing <input type="checkbox"/> Change of Plans <input type="checkbox"/> Convert to Injection <input type="checkbox"/> Fracture Treat or Acidize <input type="checkbox"/> Multiple Completion <input type="checkbox"/> Other _____	<input type="checkbox"/> Abandon * <input type="checkbox"/> Repair Casing <input type="checkbox"/> Change of Plans <input type="checkbox"/> Convert to Injection <input type="checkbox"/> Fracture Treat or Acidize <input checked="" type="checkbox"/> Other <u>Change of Operator</u>
<input type="checkbox"/> New Construction <input type="checkbox"/> Pull or Alter Casing <input type="checkbox"/> Recomplete <input type="checkbox"/> Perforate <input type="checkbox"/> Vent or Flare <input type="checkbox"/> Water Shut-Off	<input type="checkbox"/> New Construction <input type="checkbox"/> Pull or Alter Casing <input type="checkbox"/> Perforate <input type="checkbox"/> Vent or Flare <input type="checkbox"/> Water Shut-Off
Approximate date work will start <u>May 1, 1995</u>	Date of work completion _____ Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT AND LOG form. * Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Badger Oil Corporation has sold all its right, title and interest in and to the above described property to Uinta Oil & Gas, Inc.; P. O. Box 1618, Roosevelt, Utah 84066, effective May 1, 1995.

13. Name & Signature: Arthur J. Price  Title: Vice President Date: 7-6-95

Division of Oil, Gas and Mining  
**OPERATOR CHANGE WORKSHEET**

Routing:

1-LEC 7-PL	✓
2-LWP 8-SJ	✓
3-DTS 9-FILE	✓
4-VLC	✓
5-RJF	✓
6-LWP	✓

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 DATE: 5-1-95)

TO (new operator)	<u>UINTA OIL &amp; GAS</u>	FROM (former operator)	<u>BADGER OIL CORPORATION</u>
(address)	<u>PO BOX 1618</u>	(address)	<u>PO BOX 52745</u>
	<u>ROOSEVELT UT 84066</u>		<u>LAFAYETTE LA 70505</u>
	<u>CRAIG PHILLIPS</u>		
	phone <u>(801) 722-3000</u>		phone <u>(318) 233-9200</u>
	account no. <u>N 2945</u>		account no. <u>N 1780</u>

Well(s) (attach additional page if needed):

Name: <u>WALKER 2-24A5/GR-WS</u>	API: <u>43-013-31085</u>	Entity: <u>218</u>	Sec <u>24</u> Twp <u>1S</u> Rng <u>5W</u>	Lease Type: <u>FEE</u>
Name: <u>WILKINS 1-24A5/GR-WS</u>	API: <u>43-013-30320</u>	Entity: <u>205</u>	Sec <u>24</u> Twp <u>1S</u> Rng <u>5W</u>	Lease Type: <u>FEE</u>
Name: <u>JOSIE 1A-3B5/GR-WS</u>	API: <u>43-013-30677</u>	Entity: <u>216</u>	Sec <u>3</u> Twp <u>2S</u> Rng <u>5W</u>	Lease Type: <u>FEE</u>
Name: <u>JOSIE 1-3B5/GR-WS</u>	API: <u>43-013-30273</u>	Entity: <u>215</u>	Sec <u>3</u> Twp <u>2S</u> Rng <u>5W</u>	Lease Type: <u>FEE</u>
Name: _____	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: _____

**OPERATOR CHANGE DOCUMENTATION**

- Lee 1. (Rule R615-8-10) Sundry or other legal documentation has been received from former operator (Attach to this form). *(Rec'd 7-6-95)*
- Lee 2. (Rule R615-8-10) Sundry or other legal documentation has been received from new operator (Attach to this form). *(Rec'd 6-2-95)*
- N/A 3. The Department of Commerce has been contacted if the new operator above is not currently operating any wells in Utah. Is company registered with the state? (yes/no) \_\_\_\_ If yes, show company file number: \_\_\_\_\_.
- N/A 4. (For Indian and Federal Wells ONLY) The BLM has been contacted regarding this change (attach Telephone Documentation Form to this report). Make note of BLM status in comments section of this form. Management review of Federal and Indian well operator changes should take place prior to completion of steps 5 through 9 below.
- Lee 5. Changes have been entered in the Oil and Gas Information System (Wang/IBM) for each well listed above. *(7-7-95)*
- LWP 6. Cardex file has been updated for each well listed above. *7-12-95*
- LWP 7. Well file labels have been updated for each well listed above. *7-12-95*
- Lee 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to State Lands and the Tax Commission. *(7-7-95)*
- Lee 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. (Rule R615-8-7) 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. State Lands and the Tax Commission have been notified through normal procedures of entity changes.

BOND VERIFICATION (Fee wells only) IDLOC # 7065 / \$80,000 "Zions First Nat'l Bank"

- Yes 1. (Rule R615-3-1) The new operator of any fee lease well listed above has furnished a proper bond.
- 2. A copy of this form has been placed in the new and former operators' bond files. *\* Upon compl. of routing.*
- Yes 3. The former operator has requested a release of liability from their bond (yes/no) no. Today's date June 5, 1995. If yes, division response was made by letter dated    19  .

LEASE INTEREST OWNER NOTIFICATION RESPONSIBILITY

- N/A 1. (Rule R615-2-10) The former operator/lessee of any **fee lease** well listed above has been notified by letter dated    19  , of their responsibility to notify any person with an interest in such lease of the change of operator. Documentation of such notification has been requested. *No longer doing this*
- N/A 2. Copies of documents have been sent to State Lands for changes involving State leases.

FILMING

- 1. All attachments to this form have been microfilmed. Date: July 21 1995.

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 have been filed in the Operator Change file.

COMMENTS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We are pleased to announce  
that effective immediately  
TCPL Resources U.S.A. Ltd.  
has changed its name to  
Wessely Energy Company.

The address and phone  
number will remain:  
216-16th Street, Suite 1100,  
Denver, Colorado, 80202,  
(303) 629-7766.

1. AFE #21-7
2. Wilkins #2-24A5
3. " # 1-24(A5)
4. White Mule Springs 14-5
5. Josie #1A-3B5
6. Josie # 1-3B5

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells.  
Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.

5. Lease Designation and Serial Number:

6. If Indian, Allocated or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

Josie 1A-3B5

9. API Well Number:

43-013-30273

10. Field and Pool, or Wildcat:

Altamont

1. Type of Well:  OIL  GAS  OTHER:

2. Name of Operator:  
Uinta Oil & Gas, Inc.

3. Address and Telephone Number:  
P.O. Box 1618, Roosevelt, Utah 84066 801-722-3000

4. Location of Well 1689 FNL & 1259 FEL  
Footages:

County: Uintah

State: Utah

QQ, Sec., T., R., M.: T2S, R5W, Sec. 3, SENE

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

**NOTICE OF INTENT**  
(Submit in Duplicate)

- |  |   |
|--|---|
| <input type="checkbox"/> Abandon                   | <input type="checkbox"/> New Construction     |
| <input type="checkbox"/> Repair Casing             | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans           | <input type="checkbox"/> Recomplete           |
| <input type="checkbox"/> Convert to Injection      | <input type="checkbox"/> Reperforate          |
| <input type="checkbox"/> Fracture Treat or Acidize | <input type="checkbox"/> Vent or Flare        |
| <input type="checkbox"/> Multiple Completion       | <input type="checkbox"/> Water Shut-Off       |
| <input type="checkbox"/> Other _____               |   |

Approximate date work will start \_\_\_\_\_

**SUBSEQUENT REPORT**  
(Submit Original Form Only)

- |   |   |
|---|---|
| <input type="checkbox"/> Abandon                                    | <input type="checkbox"/> New Construction     |
| <input type="checkbox"/> Repair Casing                              | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans                            | <input type="checkbox"/> Reperforate          |
| <input type="checkbox"/> Convert to Injection                       | <input type="checkbox"/> Vent or Flare        |
| <input type="checkbox"/> Fracture Treat or Acidize                  | <input type="checkbox"/> Water Shut-Off       |
| <input checked="" type="checkbox"/> Other <u>Change Lift System</u> |   |

Date of work completion \_\_\_\_\_

Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT AND LOG form.

\* Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

December 11-16, 1995

Rig up service unit. P.O.O.H. w/ 2 7/8" tbg. Lay down hydraulic pump cavity. P.U. S.N. & gas buster & R.I.H. w/ 2 7/8" tbg. to +/- 12,000' set packer. P.U. rod pump & R.I.H. w/ 3/4", 7/8", and 1" rods. Installed pumping unit and returned well to production/.

13.

Name & Signature: Clifford Murray *Clifford Murray* Title: Field Supervisor Date: 03/29/96

(This space for State use only)

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

6. Lease Designation and Serial Number <i>Free</i>
7. Indian Allottee or Tribe Name
8. Unit or Communitization Agreement
9. Well Name and Number Josie 1-3B5
10. API Well Number 43-013-30273
11. Field and Pool, or Exploratory Area 55 Altamont

**SUNDRY NOTICE AND REPORTS ON WELLS**  
Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells  
Use APPLICATION FOR PERMIT -- for such proposals

1. Title of Well [ X ] Oil Well [ ] Gas Well [ ] Other	
2. Name of Operator Mountain Oil, Inc.	
3. Address and Telephone No. PO Box 1574, Roosevelt, UT 84066	4. Telephone Number 435-722-2992

5. Location of Well  
Footage \_\_\_\_\_ County: Duchesne  
QQ, Sec. T.,R.,M.: T2S, R5W, Sec. 3, SENE, USM State: Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
NOTICE OF INTENT (Submit in Duplicate)		SUBSEQUENT REPORT (Submit Original Form Only)	
<input type="checkbox"/> Abandonment	<input type="checkbox"/> New Construction	<input type="checkbox"/> Abandonment	<input type="checkbox"/> New Construction
<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Pull or Alter Casing	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Pull or Alter Casing
<input type="checkbox"/> Change of Plans	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Conversion to Injection	<input type="checkbox"/> Shoot or Acidize	<input type="checkbox"/> Conversion to Injection	<input type="checkbox"/> Shoot or Acidize
<input type="checkbox"/> Fracture Test	<input type="checkbox"/> Vent or Flare	<input type="checkbox"/> Fracture Test	<input type="checkbox"/> Vent or Flare
<input type="checkbox"/> Multiple Completion	<input type="checkbox"/> Water Shut-Off	<input type="checkbox"/> Multiple Completion	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Other <u>Change of Operator</u>		<input type="checkbox"/> Other	
Approximate Date Work Will Start _____		Date of Work Completion _____	
Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION AND LOG FORM. *Must be accompanied by a cement verification report			

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 location and measured and true vertical depths for all markers and zones pertinent to this work.

**Self Certification Statement**

Please be advised that Mountain Oil, Inc., PO Box 1574, Roosevelt, UT 84066 is considered to be the new operator of the Josie 1-3B5 well, and is responsible under the terms, and conditions of the lease of the operations conducted upon the associated leased lands. Please release ERHC/ Bass American Petroleum Company's bond # 7618020, as bond coverage will be provided under Mountain Oil, Inc.'s bond # 00742 this will be effective September 1, 1999. Send all communications regarding this lease to Mountain Oil, Inc., PO Box 1574, Roosevelt, UT 84066.

Contact Person: Kalene Jackson

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

Signed: *Kalene Jackson* Title Agent Date 8 Sept 90  
Kalene Jackson

(State Use Only)

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

**SUNDRY NOTICE AND REPORTS ON WELLS**  
Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells  
Use APPLICATION FOR PERMIT -- for such proposals

6. Lease Designation and Serial Number
7. Indian Allottee or Tribe Name
8. Unit or Communitization Agreement
9. Well Name and Number <p style="text-align: center;">Josie 1-3B5</p>
10. API Well Number <p style="text-align: center;">43-013-30273</p>
11. Field and Pool, or Exploratory Area <p style="text-align: center;">55 Altamont</p>

1. Title of Well [ X ] Oil Well [ ] Gas Well [ ] Other	
2. Name of Operator ERHC/ Bass American Petroleum Company	
3. Address and Telephone No. PO Box 1574, Roosevelt, UT 84066	4. Telephone Number 435-722-2992

5. Location of Well

Footage

County: Duchesne

QQ, Sec. T.,R.,M.: T2S, R5W, Sec. 3,SENE, USM

State: Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
NOTICE OF INTENT (Submit in Duplicate)		SUBSEQUENT REPORT (Submit Original Form Only)	
<input type="checkbox"/> Abandonment	<input type="checkbox"/> New Construction	<input type="checkbox"/> Abandonment	<input type="checkbox"/> New Construction
<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Pull or Alter Casing	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Pull or Alter Casing
<input type="checkbox"/> Change of Plans	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Conversion to Injection	<input type="checkbox"/> Shoot or Acidize	<input type="checkbox"/> Conversion to Injection	<input type="checkbox"/> Shoot or Acidize
<input type="checkbox"/> Fracture Test	<input type="checkbox"/> Vent or Flare	<input type="checkbox"/> Fracture Test	<input type="checkbox"/> Vent or Flare
<input type="checkbox"/> Multiple Completion	<input type="checkbox"/> Water Shut-Off	<input type="checkbox"/> Multiple Completion	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Other <u>Change of Operator</u>		<input type="checkbox"/> Other	
Approximate Date Work Will Start _____		Date of Work Completion _____	
Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION AND LOG FORM. *Must be accompanied by a cement verification report			

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 location and measured and true vertical depths for all markers and zones pertinent to this work.

Please note effective September 1, 1999, ERHC/ Bass American Petroleum Company relinquishes operatorship of the Josie 1-3B5 well. Please release ERHC/ Bass American Petroleum Company's bond # 7618020. ERHC/ Bass American Petroleum Company relinquishes operatorship to Mountain Oil, Inc., PO Box 1574, Roosevelt, UT 84066. Under Mountain Oil, Inc. 's Bond # 60762

Contact Person: Julie Jensen

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

Signed Julie Jensen Title Agent Date 9/18/99

(State Use Only)

**OPERATOR CHANGE WORKSHEET**

**ROUTING**

1. GLH		4-KAS ✓
2. CDW ✓		5-SJ
3. JLT		6-FILE

Enter date after each listed item is completed

**X Change of Operator (Well Sold)**

Designation of Agent

Operator Name Change (Only)

Merger

The operator of the well(s) listed below has changed, effective: **9/1/1999**

<b>FROM:</b> (Old Operator):
ERHC/BASS AMERICAN PETROLEUM COMPANY
Address: P. O. BOX 1574
ROOSEVELT, UT 84066
Phone: 1-(435)-722-2992
Account No. N8210

<b>TO:</b> ( New Operator):
MOUNTAIN OIL INC
Address: P. O. BOX 1574
ROOSEVELT, UT
Phone: 1-(435)-722-2992
Account No. N5495

**CA No.**

**Unit:**

**WELL(S)**

NAME	API NO.	ENTITY NO.	SEC. TWN RNG	LEASE TYPE	WELL TYPE	WELL STATUS
DYE HALL 1-21A1	43-013-31163	10713	21-01S-01W	FEE	OW	P
LAWSON 1-21A1	43-013-30738	935	21-01S-01W	FEE	OW	S
NIELSON 1-20B1	43-013-30740	673	20-02S-01W	FEE	OW	P
MYRIN RANCH # 1	43-013-30176	1091	20-02S-03W	FEE	OW	P
WILKINS 1-24A5	43-013-30320	205	24-01S-05W	FEE	OW	S
WALKER 2-24A5	43-013-31085	218	24-01S-05W	FEE	OW	S
JOSIE 1-3B5	43-013-30273	215	03-02S-05W	FEE	OW	S
JOSIE 1A-3B5	43-013-30677	216	03-02S-05W	FEE	OW	S
FAUSETT 1-26A1E	43-047-30821	870	26-01S-01E	FEE	OW	P

**OPERATOR CHANGES DOCUMENTATION**

- (R649-8-10) Sundry or legal documentation was received from the **FORMER** operator on: 03/05/2001
- (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 03/05/2001
- The new company has been checked through the **Department of Commerce, Division of Corporations Database** on: 03/07/2001
- Is the new operator registered in the State of Utah: YES Business Number: 3-301306-0
- If **NO**, the operator was contacted on: N/A
- Federal and Indian Lease Wells:** The BLM and or the BIA has approved the (merger, name change, or operator change for all wells listed on Federal or Indian leases on: N/A
- Federal and Indian Units:** The BLM or BIA has approved the successor of unit operator for wells listed on: N/A

8. **Federal and Indian Communization Agreements ("CA"):** The BLM or the BIA has approved the operator change for all wells listed involved in a CA on: N/A

9. **Underground Injection Control ("UIC") Prog:** The Division has approved UIC Form 5, **Transfer of Authority to Inject**, for the enhanced/secondary recovery unit/project for the water disposal well(s) listed on: N/A

---

**DATA ENTRY:**

1. Changes entered in the **Oil and Gas Database** on: 03/07/2001
2. Changes have been entered on the **Monthly Operator Change Spread Sheet** on: 03/07/2001
3. Bond information entered in RBDMS on: 03/07/2001
4. Fee wells attached to bond in RBDMS on: 03/07/2001

---

**STATE BOND VERIFICATION:**

1. State well(s) covered by Bond No.: N/A

---

**FEE WELLS - BOND VERIFICATION/LEASE INTEREST OWNER NOTIFICATION:**

1. (R649-3-1) The **NEW** operator of any fee well(s) listed has furnished a bond No: LOC '00762
2. The **FORMER** operator has requested a release of liability from their bond on: 09/08/00  
The Division sent response by letter on: 03/08/2001
3. (R649-2-10) The **FORMER** operator of the Fee wells has been contacted and informed by a letter from the Division of their responsibility to notify all interest owners of this change on: 03/08/2001

---

**FILMING:**

1. All attachments to this form have been **MICROFILMED** on: 3-26-01

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**FILING:**

1. **ORIGINALS/COPIES** of all attachments pertaining to each individual well have been filed in each well file on: \_\_\_\_\_

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**COMMENTS:**

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STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

<b>SUNDRY NOTICE AND REPORTS ON WELLS</b>  <small>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.</small>		5. LEASE DESIGNATION AND SERIAL NUMBER: FEE
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
1. TYPE OF WELLS <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. UNIT or CA AGREEMENT NAME:
2. NAME OF OPERATOR MOUNTAIN OIL AND GAS, INC.		8. WELL NAME and NUMBER Josie 1-3B5
3. ADDRESS OF OPERATOR P.O. BOX 1574, ROOSEVELT, UT 84066		9. API NUMBER: 43-013-30273
PHONE NUMBER 435-722-2992	10. FIELD AND POOL, OR WILDCAT 55 ALTAMONT	

4. LOCATION OF WELLS  
T02S R05W Sec 03 SENE UPM

COUNTY: DUCHESNE  
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 <small>(Submit in Duplicate)</small> <small>Approximate date work will start</small> <hr/> <input type="checkbox"/> SUBSEQUENT REPORT <small>(Submit Original Form Only)</small> <small>Date of work completion:</small> <hr/>	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PRODUCTION (START/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"/> TEMPORARILY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUT-OFF <input checked="" type="checkbox"/> OTHER CHANGE OF OPERATOR

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

Effective MARCH 1, 2003, operation of this well was taken over by:

MOUNTAIN OIL AND GAS, INC.  
P.O. BOX 1574  
ROOSEVELT, UT 84066

*N 2485*

The previous operator was:

MOUNTAIN OIL, INC.  
3191 N CANYON ROAD  
PROVO, UT 84604

*N 5495*

*[Signature]*  
JOSEPH OLLIVIER  
PRESIDENT, MOUNTAIN OIL, INC.

Effective March 1, 2003 Mountain Oil & Gas, Inc. is responsible under the terms and conditions of the leases for operations conducted on the leased lands or a portion thereof under Mountain Oil, Inc.'s Utah Letter of Credit #001856 issued by Bonneville Bank

NAME (PLEASE PRINT) <u>Craig Phillips</u>	TITLE <u>President, Mountain Oil and Gas, Inc.</u>
SIGNATURE <i>[Signature]</i>	DATE <u>July 21, 2004</u>

(This space for State use only)

APPROVED 12/21/04

*Earlene Russell*  
Division of Oil, Gas and Mining  
Russell, Engineering Technician

RECEIVED  
SEP 08 2004

RECEIVED  
NOV 02 2004

DIV. OF OIL, GAS & MINING

Division of Oil, Gas and Mining  
**OPERATOR CHANGE WORKSHEET**

43-013-30273

**ROUTING**

- |        |
|--------|
| 1. DJJ |
| 2. CDW |

Change of Operator (Well Sold)

**X - Operator Name Change/Merger**

The operator of the well(s) listed below has changed, effective:

1/1/2006

<b>FROM: (Old Operator):</b> N2485-Mountain Oil & Gas, Inc. PO Box 1776 Ballard, UT 84066 Phone: 1 (435) 722-2992	<b>TO: ( New Operator):</b> N3130-Homeland Gas & Oil, Inc. PO Box 1776 Ballard, UT 84066 Phone: 1 (435) 722-2992
---	--

CA No.

Unit:

WELL NAME	SEC	TWN	RNG	API NO	ENTITY NO	LEASE TYPE	WELL TYPE	WELL STATUS
SEE ATTACHED LIST								

**OPERATOR CHANGES DOCUMENTATION**

Enter date after each listed item is completed

- (R649-8-10) Sundry or legal documentation was received from the **FORMER** operator on: 10/30/2006
- (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 10/30/2006
- The new company was checked on the **Department of Commerce, Division of Corporations Database** on: 6/19/2006
- 4a. Is the new operator registered in the State of Utah: yes Business Number: 6174726-0143
- 5a. (R649-9-2)Waste Management Plan has been received on: Requested 10/31/06
- 5b. Inspections of LA PA state/fee well sites complete on: n/a
- 5c. Reports current for Production/Disposition & Sundries on: \_\_\_\_\_
- Federal and Indian Lease Wells:** The BLM and or the BIA has approved the merger, name change, or operator change for all wells listed on Federal or Indian leases on: BLM not yet BIA not yet
- Federal and Indian Units:**  
The BLM or BIA has approved the successor of unit operator for wells listed on: n/a
- Federal and Indian Communization Agreements ("CA"):**  
The BLM or BIA has approved the operator for all wells listed within a CA on: n/a
- Underground Injection Control ("UIC")** The Division has approved UIC Form 5, **Transfer of Authority to Inject**, for the enhanced/secondary recovery unit/project for the water disposal well(s) listed on: n/a

**DATA ENTRY:**

- Changes entered in the **Oil and Gas Database** on: 10/31/2006
- Changes have been entered on the **Monthly Operator Change Spread Sheet** on: 10/31/2006
- Bond information entered in RBDMS on: 10/31/2006
- Fee/State wells attached to bond in RBDMS on: 10/31/2006
- Injection Projects to new operator in RBDMS on: n/a
- Receipt of Acceptance of Drilling Procedures for APD/New on: n/a

**BOND VERIFICATION:**

- Federal well(s) covered by Bond Number: 310279523
  - Indian well(s) covered by Bond Number: SB-509795
  - 3a. (R649-3-1) The **NEW** operator of any fee well(s) listed covered by Bond Number F16420
  - 3b. The **FORMER** operator has requested a release of liability from their bond on: n/a
- The Division sent response by letter on: \_\_\_\_\_

**LEASE INTEREST OWNER NOTIFICATION:**

- (R649-2-10) The **FORMER** operator of the fee wells has been contacted and informed by a letter from the Division of their responsibility to notify all interest owners of this change on: 10/31/2006

**COMMENTS:** Homeland Gas and Oil, Inc was added as a principal on the Mountain Oil & Gas Inc Bond - no release possible. All wells moved to Homeland, except three "Stripper Wells".



GARY R. HERBERT  
Governor

GREGORY S. BELL  
Lieutenant Governor

# State of Utah

DEPARTMENT OF NATURAL RESOURCES

MICHAEL R. STYLER  
Executive Director

Division of Oil, Gas and Mining

JOHN R. BAZA  
Division Director

December 20, 2010

Certified Mail No. 7004 1160 0003 0190 4802

Craig Phillips  
Homeland Gas & Oil, Inc  
P.O. Box 1574  
Roosevelt, Utah 84066

Subject: Homeland Gas and Oil, Inc. Escrow Account

Dear Mr. Phillips:

This letter is in response to the e-mail you sent me on December 8, 2010, regarding Homeland Gas & Oil, Inc. (Homeland) proposal to place \$280,000.00 in an escrow account specifically for the plugging and performing of Mechanical Integrity Tests (MIT's) on Shut-in and Temporarily Abandoned Wells (SI/TA) currently operated by Homeland.

The Division of Oil, Gas and Mining (Division) grants Homeland 30 days from receipt of this letter to submit a formal escrow account agreement and plan of action, for Division review and approval, for the eighteen (18) Homeland Fee and State operated wells (see Attachment A – Subject Wells) in non-compliance with Utah Oil and Gas Conservation General Rule R649-3-36.

The Division requests that Homeland's escrow account agreement and/or plan of action submittals include, but not restricted to the following:

- Prioritized work plans for all eighteen Shut-in and Temporarily Abandoned Wells.
- Identify and prioritize wells with landowner complaints.
- Identify the specific wells to be plugged and plugging deadlines for each well.
- Identify the specific wells for MIT and MIT performance deadlines for each well.
- Plan for any well failing a MIT.
- Proof of funding.
- When the funds will be available for placement into the escrow account.
- Parameters for withdrawals from the escrow account.
- Additional placement of funds into the escrow account.
- Show that the Homeland and the escrow manager have no conflict of interest.



Page 2

Homeland Gas and Oil, Inc. Escrow Account  
December 20, 2010

Questions regarding this matter may be directed to Mr. Clinton Dworshak, Compliance Manager, at 801 538-5280, or to Mr. Dustin Doucet, Engineer, at 801 538-5281.

Sincerely,



Clinton Dworshak  
Compliance Manager

CLD/js

Enclosures

cc: Compliance File  
Well Files  
Steve Alder, Attorney General  
John Rogers, Associate Director  
Dustin Doucet, Petroleum Engineer  
Randy Thackeray, Lead Auditor

N:\O&G Reviewed Docs\ChronFile\Compliance

# Attachment A Subject Wells

<b>Well Name</b>	<b>API</b>	<b>SI/TA (Years and Months) 10/2010</b>
Brown 3-2	43-013-30986	3 years 0 Months
Fausett 1-26A1E	43-047-30821	3 years 7 Months
Myrin Ranch 1	43-013-30176	4 years 1 Month
Wilkins 1-24A5	43-013-30320	4 Years 1 Month
Wesley Bastian Fee 1	43-013-10496	5 Years 2 Months
Josie 1A-3B5	43-013-30677	5 Years 5 Months
Dye-Hall 2-21A1	43-013-31163	5 Years 6 Months
Bates 9-1	43-013-30469	5 Years 11 Months
V Miles 1	43-013-30275	6 Years 3 Months
Rust 3-22A4	43-013-31266	6 Years 6 Months
Gusher 2-17B1	43-013-30846	6 Years 8 Months
CJ Hackford 1-23	43-047-30279	6 years 9 Months
Knight 1	43-013-30184	7 Years 0 Months
→ Josie 1-3B5	43-013-30273	9 Years 5 Months
A Rust 2	43-013-30290	10 Years 4 Months
Reiman 10-1	43-013-30460	14 years 0 Months
Dustin 1	43-013-30122	17 Years 3 Months
Walker 2-24A5	43-013-31085	20 years 8 Months

7004 1160 0003 0190 4802

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)  
**OFFICIAL USE**

Postage	\$	12/20/10 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total Postage: \_\_\_\_\_

Sent To: **CRAIG PHILLIPS**  
**HOMELAND GAS & OIL INC**  
 Street, Apt. No. or PO Box No. **P O BOX 1574**  
 City, State, ZIP **ROOSEVELT UT 84066**

PS Form 3800, June 2002 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**CRAIG PHILLIPS**  
**HOMELAND GAS & OIL INC**  
**P O BOX 1574**  
**ROOSEVELT UT 84066**

2. Article Number  
 (Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
 X *[Signature]*

B. Received By (Printed Name) **Amber Simpsa** C. Date of Delivery **12/2/10**

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

USPS  
 ROOSEVELT UT 84066  
 12 2 2010

3. Service Type
- Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

7004 1160 0003 0190 4802

**STATE OF UTAH**  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

FORM 9

5 LEASE DESIGNATION AND SERIAL NUMBER  
see attached list

**SUNDRY NOTICES AND REPORTS ON WELLS**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:  
see attached list

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

7. UNIT or CA AGREEMENT NAME:  
see attached list

1 TYPE OF WELL  
OIL WELL  GAS WELL  OTHER \_\_\_\_\_

8. WELL NAME and NUMBER:  
see attached list

2 NAME OF OPERATOR  
Homeland Gas & Oil

9. API NUMBER  
attached

3 ADDRESS OF OPERATOR  
3980 East Main, HWY 40 Ballard UT 84066

PHONE NUMBER:  
(435) 722-2992

10. FIELD AND POOL, OR WILDCAT

4 LOCATION OF WELL  
FOOTAGES AT SURFACE see attached list

COUNTY

QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN

STATE

UTAH

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

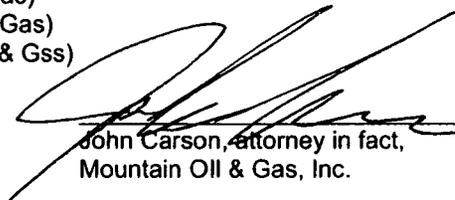
TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input checked="" type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion _____	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

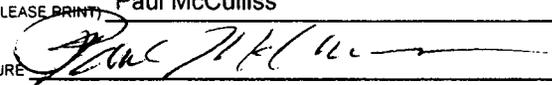
12 DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Effective January 1, 2006, operation of attached well list was taken over by:  
Homeland Gas & Oil  
3980 E Main ST HWY 40 *N3130*  
Ballard, UT 84066

Previous operator was: Mountain Oil & Gas *N2485*  
PO Box 1574  
Roosevelt, UT 84066

BIA Bond: SB-509795 (to be transferred from Mountain Oil & Gas)  
BLM Bond: 0310279523 (to be transferred from Mountain Oil & Gas)  
SITLA Bond: Dated 09/14/04 (to be transferred from Mountain Oil & Gss)

  
John Carson, attorney in fact,  
Mountain Oil & Gas, Inc.

NAME (PLEASE PRINT) Paul McCulliss  
  
SIGNATURE

TITLE Director  
DATE *10/26/06*

(This space for State use only)

**APPROVED** *10/31/06*  
*Earlene Russell*  
Division of Oil, Gas and Mining  
Earlene Russell, Engineering Technician

(See Instructions on Reverse Side)

**RECEIVED**  
**OCT 30 2006**

DIV. OF OIL, GAS & MINING

well_name	sec	tpw	rng	api	entity	qtr_qtr	well	stat	lease	l_num
UTE TRIBAL 1-34B	34	010N	020W	4301310494	775	SWNE	OW	P	Indian	14-20-H62-1704
WESLEY BASTIAN FEE 1	08	010S	010W	4301310496	942	SWNE	OW	S	Fee	FEE
UTE TRIBE 1-13	13	050S	040W	4301320073	1225	SWSW	OW	P	Indian	14-20-H62-4894
UTE TRIBAL 2	08	010S	010W	4301330020	690	NWSW	OW	S	Indian	14-20-H62-2117
UTE TRIBAL 2-35B	35	010N	020W	4301330106	705	NWSE	OW	P	Indian	14-20-H62-1614
DUSTIN 1	22	020S	030W	4301330122	1092	NESW	OW	S	Fee	FEE
HANSEN 1	23	020S	030W	4301330161	1093	SENE	OW	P	Fee	FEE
UTE TRIBAL 1-26B	26	010N	020W	4301330168	715	SWNE	OW	P	Indian	INDIAN
MYRIN RANCH 1	20	020S	030W	4301330176	1091	SWNE	OW	S	Fee	FEE
KNIGHT 1	28	020S	030W	4301330184	1090	SENE	OW	S	Fee	FEE
UTE 1-12B6	12	020S	060W	4301330268	1866	SENE	OW	S	Indian	14-20-H62-4951
JOSIE 1-3B5	03	020S	050W	4301330273	215	SENE	OW	S	Fee	FEE
V MILES 1	20	010S	040W	4301330275	740	NWNE	OW	S	Fee	FEE
A RUST 2	22	010S	040W	4301330290	745	NENE	OW	S	Fee	FEE
SINK DRAW 7	21	030S	070W	4301330302	6360	SENE	OW	S	Indian	14-20-H62-1141
UTE TRIBAL 1-32Z1	32	010N	010W	4301330324	755	NESW	OW	S	Indian	14-20-H62-2457
REIMANN 10-1	10	040S	060W	4301330460	6410	NESW	OW	S	Fee	FEE
TEXACO TRIBAL 3-1	03	040S	060W	4301330468	10959	NWNE	OW	S	Indian	14-20-H62-1939
BATES 9-1	09	040S	060W	4301330469	530	SENE	OW	S	Fee	FEE
UTE 1-14D6	14	040S	060W	4301330480	5275	SWNE	OW	P	Indian	14-20-H62-4893
1-31C5	31	030S	050W	4301330501	2330	SENE	OW	P	Indian	14-20-H62-4890
JOSIE 1A-3B5	03	020S	050W	4301330677	216	NESW	OW	S	Fee	FEE
LAWSON 1-21A1	21	010S	010W	4301330738	935	NESW	OW	S	Fee	FEE
UTE TRIBAL 11-25	25	040S	030W	4301330743	2645	NESW	OW	S	Indian	14-20-H62-4892
UTE TRIBAL 16-2	02	050S	040W	4301330756	2610	SESE	OW	P	Indian	14-20-H62-3404
UTE TRIBAL 7-24	24	040S	030W	4301330768	2625	SWNE	OW	P	Indian	14-20-H62-4891
UTE TRIBAL 24-12	24	050S	040W	4301330830	9104	NWSW	OW	S	Indian	14-20-H62-4716
UTE TRIBAL 13-15X	13	050S	040W	4301330844	9100	SWSE	OW	S	Indian	14-20-H62-4715
GUSHER 2-17B1	17	020S	010W	4301330846	8436	NENE	OW	S	Fee	FEE
COYOTE UTE TRIBAL 10-9	09	040S	040W	4301330861	9900	NWSE	OW	S	Indian	I-109-IND-5351
BROWN 3-2	03	010S	020W	4301330986	10290	NWNW	GW	P	Fee	FEE
L E FONT 3-27Z2	27	010N	020W	4301331052	9464	SESE	OW	P	Indian	14-20-H62-4733
BADGER UTE H E MANN 2-28Z2	28	010N	020W	4301331053	9459	SWSE	OW	P	Indian	14-20-H62-4305
WALKER 2-24A5	24	010S	050W	4301331085	218	SESW	OW	S	Fee	FEE
DYE-HALL 2-21A1	21	010S	010W	4301331163	10713	SENE	OW	S	Fee	FEE
BASTIAN 3-8A1	08	010S	010W	4301331181	10758	NWSE	OW	P	Fee	FEE
RUST 3-22A4	22	010S	040W	4301331266	11194	NESW	OW	S	Fee	FEE
BEND UNIT 2	08	070S	220E	4304715416	2475	NENE	GW	S	Federal	U-0647
MONADA STATE 1	02	060S	190E	4304730080	11089	NWNW	OW	PA	State	ML-40730
UTE TRIBAL 1-16A1E	16	010S	010E	4304730231	780	SESE	OW	P	Indian	14-20-H62-4888
C J HACKFORD 1-23	23	010S	010E	4304730279	790	SENE	OW	S	Fee	FEE
UTE TRIBAL 1-14-B1E	14	020S	010E	4304730774	4521	NWNE	OW	P	Indian	14-20-H62-2931
RIVER JUNCTION 11-18	18	090S	200E	4304731316	9705	NESW	OW	S	Federal	U-27041A
BRENNAN FED 4-15	15	070S	200E	4304731332	9760	NESE	GW	S	Federal	U-14219
PENNY 16-7	07	090S	200E	4304731360	2680	SESE	OW	S	Federal	U-27041
HORSESHOE BEND 34-E	34	060S	210E	4304731595	10203	SWNW	OW	S	Federal	U-74499

<b>STATE OF UTAH</b> DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING	<b>FORM 9</b>
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b>	5. LEASE DESIGNATION AND SERIAL NUMBER: FEE
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:
1. TYPE OF WELL Oil Well	8. WELL NAME and NUMBER: JOSIE 1-3B5
2. NAME OF OPERATOR: HOMELAND GAS & OIL, INC.	9. API NUMBER: 43013302730000
3. ADDRESS OF OPERATOR: P.O. Box 1776 , Roosevelt, UT, 84066	9. FIELD and POOL or WILDCAT: ALTAMONT
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1689 FNL 1259 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SENE Section: 03 Township: 02.0S Range: 05.0W Meridian: U	COUNTY: DUCHESNE
	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: <b>5/29/2012</b>	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> CASING REPAIR
<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:	<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 checked="" type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> PLUG BACK
	<input 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.

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

Date: May 28, 2012

By: *Derek Duff*

NAME (PLEASE PRINT) Craig S. Phillips	PHONE NUMBER 435 722-2992	TITLE Manager
SIGNATURE N/A	DATE 5/25/2012	



**The Utah Division of Oil, Gas, and Mining**

- State of Utah
- Department of Natural Resources

**Electronic Permitting System - Sundry Notices**

**Sundry Conditions of Approval Well Number 43013302730000**

**See conditions of approval attached dated May 10, 2012.**



GARY R. HERBERT  
Governor

GREGORY S. BELL  
Lieutenant Governor

# State of Utah

## DEPARTMENT OF NATURAL RESOURCES

MICHAEL R. STYLER  
Executive Director

### Division of Oil, Gas and Mining

JOHN R. BAZA  
Division Director

## ***CONDITIONS OF APPROVAL TO PLUG AND ABANDON WELL***

Well Name and Number: Josie 1-3B5  
API Number: 43-013-30273  
Operator: Homeland Gas & Oil, Inc.  
Reference Document: Original Sundry Notice dated May 10, 2012,  
received by DOGM on May 10, 2012.

### Approval Conditions:

1. Notify the Division at least 24 hours prior to conducting abandonment operations. Please call Dan Jarvis at 801-538-5338.
2. **Amend Plug #2:** After perforating @ 7450'. Establish circulation down the 7 5/8" casing back up the 7 5/8" x 9 5/8" annulus. If injection into the perfs cannot be established a 200' plug ( $\pm 48$  sx) shall be balanced from  $\pm 7600'$  to  $7400'$ . If injection is established: RIH with CICR and set at 7450'. M&P 60 sx cement, sting into CICR pump 48 sx, sting out and dump 12 sx on top of CICR. This will isolate the offsetting injection zones and top of Green River formation.
3. **Amend Plug #3:** After perforating @ 4855'. Establish circulation down the 7 5/8" casing back up the 7 5/8" x 9 5/8" annulus. If injection into the perfs cannot be established a 200' plug ( $\pm 48$  sx) shall be balanced from  $\pm 4950'$  to  $4750'$ . If injection is established: RIH with CICR and set at 4805'. M&P 60 sx cement, sting into CICR pump 48 sx, sting out and dump 12 sx on top of CICR. This will isolate the base of the Moderately Saline Groundwater as required by rule R649-3-24-3.3.
4. All balanced plugs shall be tagged to ensure that they are at the depth specified.
5. All annuli shall be cemented from a minimum depth of 100' to the surface.
6. Surface reclamation shall be done in accordance with R649-3-34 – Well Site Restoration.
7. All requirements in the Oil and Gas Conservation General Rule R649-3-24 shall apply.
8. If there are any changes to the procedure or the wellbore configuration, notify Dustin Doucet at 801-538-5281 (ofc) or 801-733-0983 (home) prior to continuing with the procedure.
9. All other requirements for notice and reporting in the Oil and Gas Conservation General Rules shall apply.

Dustin K. Doucet  
Petroleum Engineer

May 10, 2012

Date

*emailed procedure May 10, 2012*



3/24/2011

# Wellbore Diagram

r263

API Well No: 43-013-30273-00-00 Permit No:

Well Name/No: JOSIE 1-3B5

Company Name: HOMELAND GAS & OIL, INC.

Location: Sec: 3 T: 2S R: 5W Spot: SENE

Coordinates: X: 548352 Y: 4465341

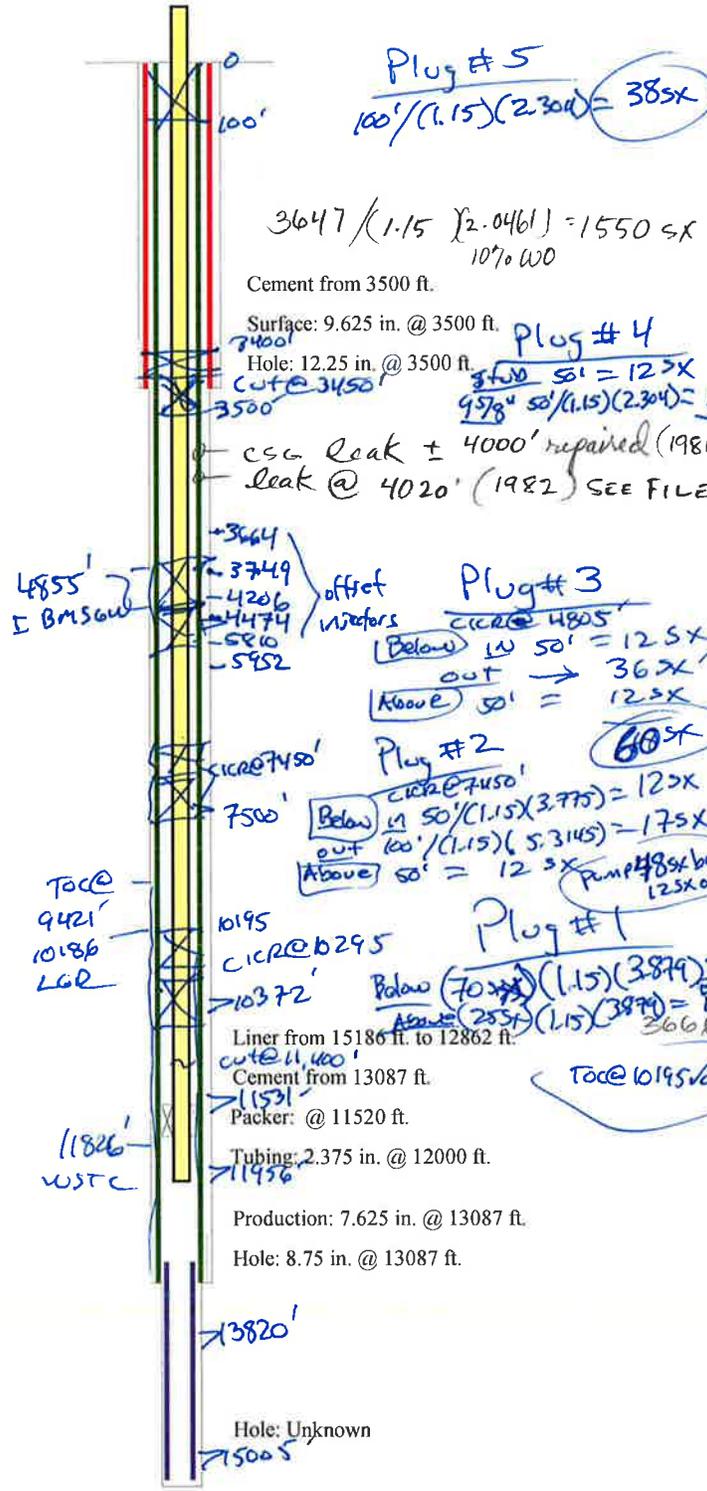
Field Name: ALTAMONT

County Name: DUCHESNE

### String Information

String	Bottom (ft sub)	Diameter (inches)	Weight (lb/ft)	Length (ft)	Capacity (ft/cf)
HOL1	3500	12.25			
SURF	3500	9.625	36		2,304
HOL2	13087	8.75			
PROD	13087	7.625	26.4		3,775
PROD	13087	7.625	29.7		3,879
L1	15186	5.5			
T1	12000	2.375			
CIBP	12001	- (12/1981)			
PKR	11520				

8 3/4" x 7 7/8" (10%) → 5,3145



### Cement Information

String	BOC (ft sub)	TOC (ft sub)	Class	Sacks
PROD	13087	9421	UK	600
SURF	3500	SFC	UK	1550

### Perforation Information

Top (ft sub)	Bottom (ft sub)	Shts/Ft	No Shts	Dt Squeeze
13820	15005			
11531	11956			
10372	11934			

### Formation Information

Formation	Depth
LGRRV	10186
WSTC	11826

6855  
 - 2000  
 \* 4855' BASE MOD

TD: 15248 TVD: PBD: 15186



**Homeland Gas & OIL**  
**Proposed Plugging Procedure**

Josie 1-3B5

API- 43-013-30273

Sec. 3-2S-5W

Duchesne County, Utah

Prod Csg: 7-5/8" 26.4#-29.7#-33.7# S-95@ 13,087'

Liner: 5-1/2" 23# P110SFJ HydrillN-80 @ 12862 to 13087

Tubing: 2 7/8" 6.5# N-80Newlock @ 11520

Perfs: 10372-11934

TOC 9421'

CICR 12001 with cement on it

1. Notify DOGM of P&A operations at least 24 hours prior to starting abandonment operations.
2. MIRU plugging equipment. Blow well down if necessary. Remove wellhead equipment. NU 5.000# BOP TOH with 2 3/8" N80 side string tubing. Check tubing.
- 3 : Shoot off 2-7/8 at 11400 and TOH
4. TIH with CICR and set at 10,295'
5. Establish injection rate. Mix and pump 95sks Class G 15.8# cement, 70sks (300')under CICR, and spot 25sks (100')on top.
6. TOH 500'
7. Reverse out.
8. Roll hole with (corrosion inhibitor treated) clean production water TOH
9. Perforate at 7500
10. TIH to 7500 pump 100' inside outside plug. 60 sacks 15.8# cement
11. TOH perforate 4855' (the BMSW)and place a 100' inside outside plug 60 sacks. TOH
12. Cut 7-5/8" casing @ 3450
13. Lay down casing
14. RIH to casing stub at 3450' and place a 100' balance plug 50' below

stub and 50' above stub. 1/2 in and 1/2 out

**15.** TOH/WOC

**16.** TIH and tag plug. Cement should be a minimum of 50' above stub.  
Add cement if necessary.

**17.** TOH to 100' and circulate cement to surface.

**18.** Cut off wellhead 4' below ground level and top off cement then  
install dry hole plate containing well information

**19.** RDMO

<b>STATE OF UTAH</b> DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		<b>FORM 9</b>
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		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b>
<b>1. TYPE OF WELL</b> Oil Well		<b>7. UNIT or CA AGREEMENT NAME:</b>
<b>2. NAME OF OPERATOR:</b> HOMELAND GAS & OIL, INC.		<b>8. WELL NAME and NUMBER:</b> JOSIE 1-3B5
<b>3. ADDRESS OF OPERATOR:</b> P.O. Box 1776 , Roosevelt, UT, 84066		<b>9. API NUMBER:</b> 43013302730000
<b>PHONE NUMBER:</b> 435 722-2992 Ext		<b>9. FIELD and POOL or WILDCAT:</b> ALTAMONT
<b>4. LOCATION OF WELL</b> <b>FOOTAGES AT SURFACE:</b> 1689 FNL 1259 FEL <b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b> Qtr/Qtr: SENE Section: 03 Township: 02.0S Range: 05.0W Meridian: U		<b>COUNTY:</b> DUCHESNE
		<b>STATE:</b> 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: 5/31/2013	<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
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	<input type="checkbox"/> WATER SHUTOFF	<input type="checkbox"/> SI TA STATUS EXTENSION	<input type="checkbox"/> APD EXTENSION
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	<input checked="" type="checkbox"/> OTHER	OTHER: <input type="text"/>

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

TBG PSI 0 CSG PSI 0

**Accepted by the  
Utah Division of  
Oil, Gas and Mining  
FOR RECORD ONLY  
June 19, 2013**

<b>NAME (PLEASE PRINT)</b> Craig S. Phillips	<b>PHONE NUMBER</b> 435 722-2992	<b>TITLE</b> Manager
<b>SIGNATURE</b> N/A	<b>DATE</b> 6/3/2013	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
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		<b>7. UNIT or CA AGREEMENT NAME:</b>
<b>1. TYPE OF WELL</b> Oil Well	<b>8. WELL NAME and NUMBER:</b> JOSIE 1-3B5	
<b>2. NAME OF OPERATOR:</b> HOMELAND GAS & OIL, INC.	<b>9. API NUMBER:</b> 43013302730000	
<b>3. ADDRESS OF OPERATOR:</b> P.O. Box 1776 , Roosevelt, UT, 84066	<b>PHONE NUMBER:</b> 435 722-2992 Ext	<b>9. FIELD and POOL or WILDCAT:</b> ALTAMONT
<b>4. LOCATION OF WELL</b> <b>FOOTAGES AT SURFACE:</b> 1689 FNL 1259 FEL <b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b> Qtr/Qtr: SENE Section: 03 Township: 02.0S Range: 05.0W Meridian: U	<b>COUNTY:</b> DUCHESNE	
	<b>STATE:</b> UTAH	
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
<b>TYPE OF SUBMISSION</b>	<b>TYPE OF ACTION</b>	
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:  <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 6/30/2012  <input type="checkbox"/> SPUD REPORT Date of Spud:  <input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> WILDCAT WELL DETERMINATION <input type="checkbox"/> OTHER	
<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>		
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.		
Cement to surface 65 SKS 15.8 # class G Perf squeeze hole @ 100 CICR 3416 60 SKS 15.8 # 48 Below 12 on top Perf squeeze holes @3450 CICR 4805 60 SKS 15.8 # 48 Below 12 on top Perf squeeze holes @4885 CICR 7464 60 SKS 15.8# class G cement Perf squeeze holes @7500 CICR 10374 test to 1000PSI 110 SKS class G 15.8# 10 on top 100 below See well diagram Equipment removed 10/15/2012		<b>Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY</b> August 19, 2013
<b>NAME (PLEASE PRINT)</b> Craig S. Phillips	<b>PHONE NUMBER</b> 435 722-2992	<b>TITLE</b> Manager
<b>SIGNATURE</b> N/A	<b>DATE</b> 8/16/2013	



STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
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<b>PHONE NUMBER:</b> 435 722-2992 Ext		<b>9. FIELD and POOL or WILDCAT:</b> ALTAMONT
<b>4. LOCATION OF WELL</b> <b>FOOTAGES AT SURFACE:</b> 1689 FNL 1259 FEL <b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b> Qtr/Qtr: SENE Section: 03 Township: 02.0S Range: 05.0W Meridian: U		<b>COUNTY:</b> DUCHESNE
		<b>STATE:</b> UTAH
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> <b>NOTICE OF INTENT</b> Approximate date work will start: 11/4/2013  <input type="checkbox"/> <b>SUBSEQUENT REPORT</b> Date of Work Completion:  <input type="checkbox"/> <b>SPUD REPORT</b> Date of Spud:  <input type="checkbox"/> <b>DRILLING REPORT</b> 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 style="width: 100px;" type="text"/>
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.		
TBG 0 CSG 0		
<b>Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY November 18, 2013</b>		
<b>NAME (PLEASE PRINT)</b> Craig S. Phillips	<b>PHONE NUMBER</b> 435 722-2992	<b>TITLE</b> Manager
<b>SIGNATURE</b> N/A	<b>DATE</b> 11/6/2013	