

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

5. Lease Designation and Serial No.
ML-22060

6. If Indian, Allottee or Tribe Name

7. Unit Agreement Name

8. Farm or Lease Name

State

9. Well No.
2-32

10. Field and Pool, or Wildcat

Wildcat Monument Butte

11. Sec., T., R., M., or Blk. and Survey or Area
Sec. 32-, T8S, R17E

12. County or Parrish 13. State
Duchesne County, Utah

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work
DRILL DEEPEN PLUG BACK

b. Type of Well
Oil Well Gas Well Other Single Zone Multiple Zone

2. Name of Operator
Lomax Exploration Company

3. Address of Operator
333 North Belt East, Suite 880, Houston, Texas

4. Location of Well (Report location clearly and in accordance with any State requirements.)*
At surface 517'FSL 686'FWL Sec. 32 T8S, R17E
At proposed prod. zone *SWSW*

14. Distance in miles and direction from nearest town or post office*
11 miles south of Myton, Utah

15. Distance from proposed* location to nearest property or lease line, ft. (Also to nearest drlg. line, if any)
517

16. No. of acres in lease
598.67

17. No. of acres assigned to this well
~~80~~ 40

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

19. Proposed depth
6300'

20. Rotary or cable tools
Rotary

21. Elevations (Show whether DF, RT, GR, etc.)
GR-5241'

22. Approx. date work will start*
October 1, 1981

23. PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
12-1/4"	8-5/8"	24#	300'	175 Sks.
7-7/8"	5-1/2"	15.50#	6300'	500 Sks. <i>cemented to surface</i>

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

DATE: 10-2-81
BY: M. J. Minder

RECEIVED
OCT 20 1981

DIVISION OF
OIL, GAS & MINING

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. *[Signature]*
Signed: _____ Title: Manager Drilling & Production Date: 9/15/81

(This space for Federal or State office use)

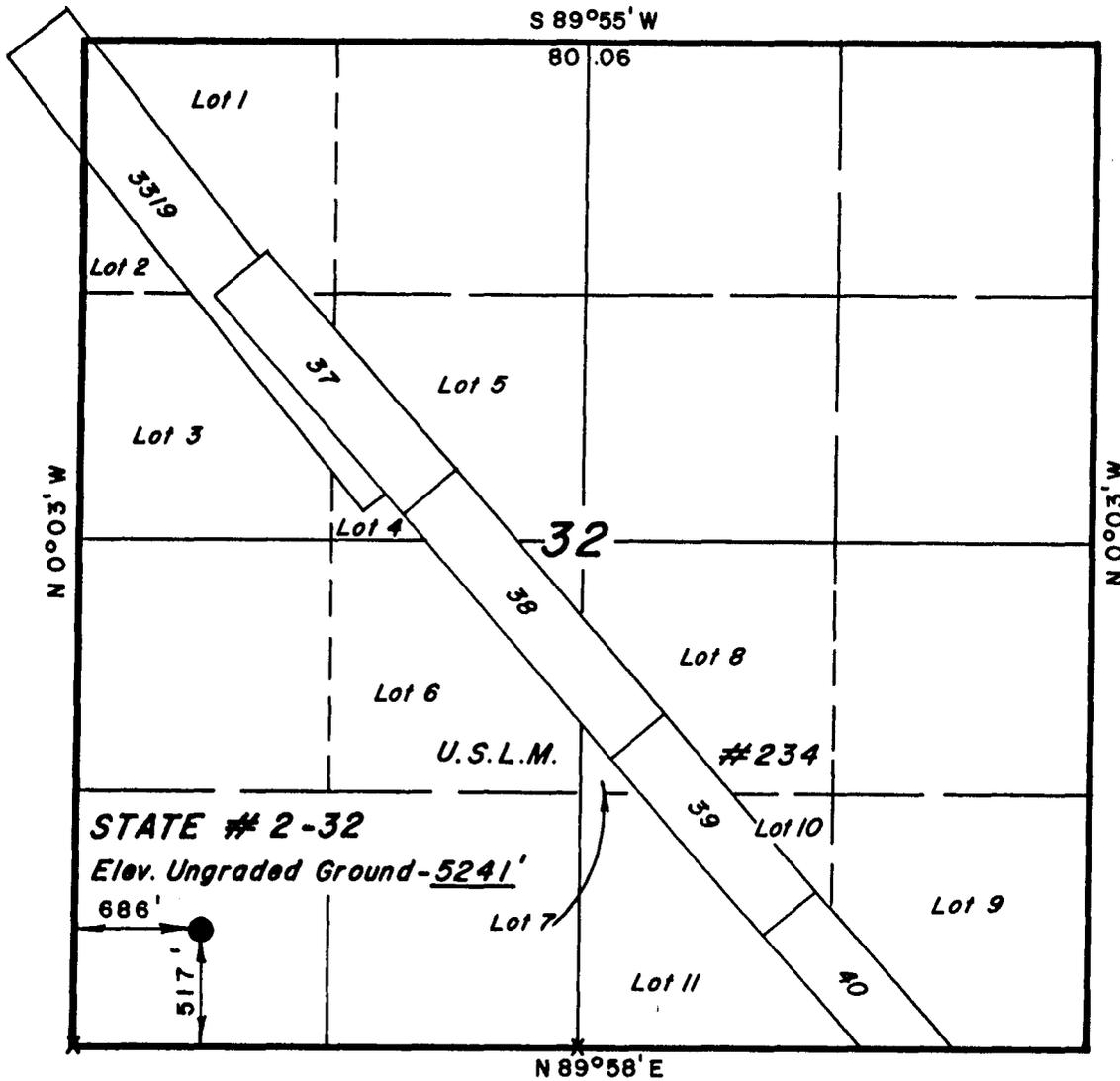
Permit No. _____ Approval Date _____

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

T 8 S, R 17 E, S.L.B. & M.

PROJECT
LOMAX EXPLORATION CO.

Well location, STATE # 2-32,
located as shown in the SW 1/4 SW 1/4,
Section 32, T 8 S, R 17 E, S.L.B. & M.
Duchesne County, Utah



X = Section Corner Located

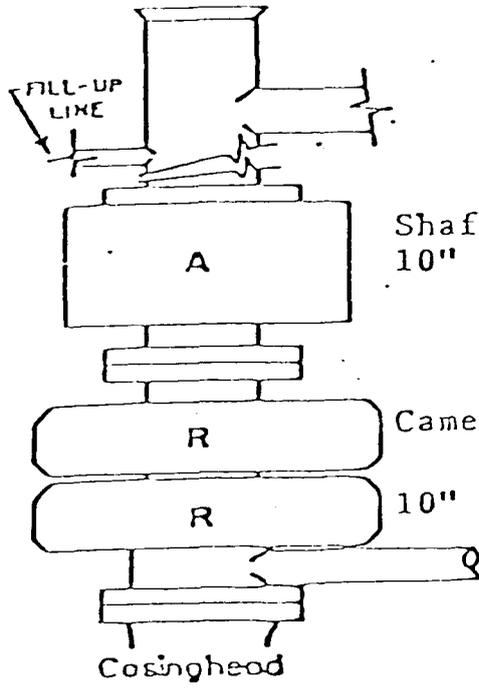
CERTIFICATE

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.

Lawrence P. [Signature]
REGISTERED LAND SURVEYOR
REGISTRATION NO 3137
STATE OF UTAH

UINTAH ENGINEERING & LAND SURVEYING
P. O. BOX Q - 85 SOUTH - 200 EAST
VERNAL, UTAH - 84078

SCALE, 1" = 1000'	DATE 9/8/81
PARTY DB, TE, KR, JH	REFERENCES GLO PLAT
WEATHER COOL / CLOUDY	FILE LOMAX

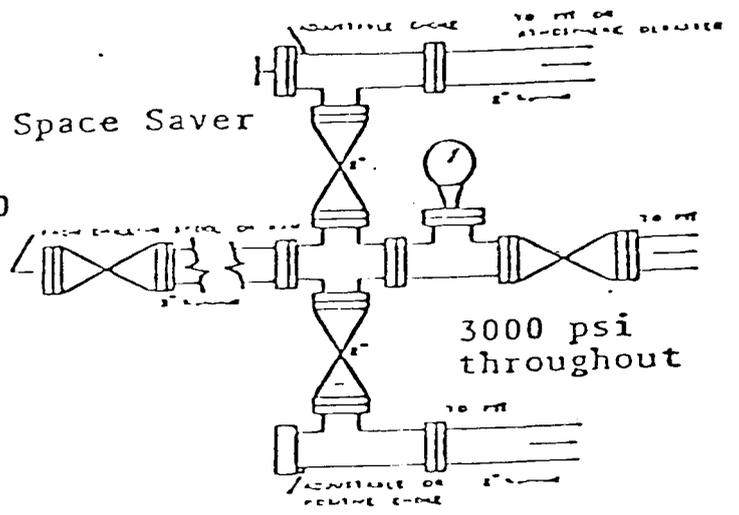


Shaffer Spherical
10" 900

Cameron Space Saver

10" 900

Casinghead



3000 psi
throughout

SEP 23 1981
DIVISION OF
OIL, GAS & MINING

September 16, 1981

RECEIVED
SEP 23 1981

Division of Oil, Gas and Mining
1588 W. North Temple
Salt Lake City, Utah 84116

DIVISION OF
OIL, GAS & MINING

Attention: Mr. Mike Minder

State #2-32
Section 32, T8S, R17E
Duchesne County, Utah

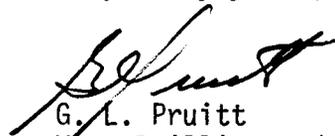
Gentlemen:

Please find enclosed our Application for Permit to Drill State #2-32, location plot, and a schematic of our BOP's.

Our drilling bond will be forwarded from Jordan Valley Insurance Agency of Midvale, Utah.

Please advise if you need additional information.

Very truly yours,



G. L. Pruitt
Mgr. Drilling and Production

GLP/ps
Enclosures



** FILE NOTATIONS **

DATE: Sept. 28, 1981

OPERATOR: Tomax Exploration Co.

WELL NO: State #2-32

Location: Sec. 32 T. 8S R. 17E County: Duchesne

File Prepared:

Entered on N.I.D:

Card Indexed:

Completion Sheet:

API Number 43-013-30604

CHECKED BY:

Petroleum Engineer: M. J. Minder 10-2-81

Director: _____

Administrative Aide: As Per Rule C-3,

APPROVAL LETTER:

Bond Required:

Survey Plat Required:

Order No. _____

O.K. Rule C-3

Rule C-3(c), Topographic Exception - company owns or controls acreage within a 660' radius of proposed site

Lease Designation

Plotted on Map

Approval Letter Written

Hot Line

P.I.

October 2, 1981

Lomax Exploration Company
333 N. Belt East, Suite #880
Houston, Texas 77060

RE: Well No. State #2-32,
Sec. 32, T. 8S, R. 17E,
Duchesne County, Utah

Insofar as this office is concerned, approval to drill the above referred to oil well is hereby granted in accordance with Rule C-3, General Rules and Regulations and Rules of Practice and Procedure.

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

MICHAEL T. MINDER - Petroleum Engineer
Office: 533-5771
Home: 876-3001

Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling. Your cooperation in completing this form will be appreciated.

Further, it is requested that this Division be notified within 24 hours after drilling operations commence, and that the drilling contractor and rig number be identified.

The API number assigned to this well is 43-013-30604.

Sincerely,

DIVISION OF OIL, GAS AND MINING



Michael T. Minder
Petroleum Engineer

MTM/db
CC: State Lands

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

22060

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

State

9. WELL NO.

2-32

10. FIELD AND POOL, OR WILDCAT

Monument Butte

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

Sec. 32, T8S, R17E

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 PLDG BACK DIFF. RESVR. Other _____

2. NAME OF OPERATOR
Lomax Exploration Company

3. ADDRESS OF OPERATOR
P.O. Box 4503, Houston, TX 77210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 517' FSL & 686' FWL, Section 32, T8S, R17E
At top prod. interval reported below
At total depth

14. PERMIT NO.
43-013-30604

DATE ISSUED
10/02/81

12. COUNTY OR PARISH
Duchesne

13. STATE
Utah

15. DATE SPUNDED
12/20/81

16. DATE T.D. REACHED
12/27/81

17. DATE COMPL. (Ready to prod.)
2/09/82

18. ELEVATIONS (DF, RKB, RT, SE, ETC.)
5241' GR

19. ELEV. CASINGHEAD
5241

20. TOTAL DEPTH, MD & TVD
5523

21. PLUG, BACK T.D., MD & TVD
5481

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY
ROTARY TOOLS
Yes

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)
4943-5284 Green River

25. WAS DIRECTIONAL SURVEY MADE
Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN
DIL-GR, CNL-FDC, CBL-GR

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
8 5/8	24	298	12 1/4	Cemented to surface	
5 1/2	15.50	5523	7 7/8	485 sx 50/50 Pozmix	

29. LINER RECORD

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

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 7/8	5323	None

31. PERFORATION RECORD (Interval, size and number)
4943-48 (5 shots) 5274-84 (10 shots)
4951-61 (10 shots)
5123-35 (12 shots)
5151-55 (4 shots)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4943-5284	46,500 gal gelled diesel
	85,000# sand

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)					
2/20/82	Pumping	Producing					
DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3/12/82	24	-	→	183	N/M	0	N/M
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
N/A	30	→	183	N/M	0	38.2	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Used for fuel & vented
TEST WITNESSED BY
Charley Scott

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 *G. L. Pruitt* G. L. Pruitt TITLE Mgr. Drilling & Production DATE 4/29/82

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

INSTRUCTIONS

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

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

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

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

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

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

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

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38.

GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Top Green River	1580	+3678
Oil Shale Marker	3782	+1476
Top Douglass Crk	4753	+505

April 30, 1982

RECEIVED
MAY 04 1982
DIVISION OF
OIL, GAS & MINING

State of Utah
Division of Oil & Gas Conservation
1588 West Temple
Salt Lake City, Utah 84116

RE: State #2-32
Section 32, T8S, R17E
Duchesne County, Utah

Gentlemen:

Enclosed please find the Well Completion Report for the subject well.

Please advise if you need additional information.

Very truly yours,

Michele Tisdell
Michele Tisdell
Sec. Drilling & Production

/mt
Enclosures (2)

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

1500 East 1000 North, Suite 100
Temple A, Reynolds Building, 2nd Floor
Cleon B. Feight, Division Director

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

July 14, 1982

Lomax Exploration Company
P. O. Box 4503
Houston, Texas 77210

Re: Well No. State #2-32
Sec. 32, T. 8S, R. 17E.
Duchesne County, Utah

Gentlemen:

According to our records, a "Well Completion Report" filed with this office April 29, 1982, from above referred to well, indicates the following electric logs were run: DIL-GR, CNL-FDC, CBL-GR. As of todays 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.

Your prompt attention to the above will be greatly appreciated.

Sincerely,

DIVISION OF OIL, GAS AND MINING



Cari Furse
Clerk Typist

POOR COPY

Board/Charles R. Henderson, Chairman • John L. Bell • E. Steele McIntyre • Edward T. Beck
Robert R. Norman • Margaret R. Bird • Herm Olsen

an equal opportunity employer • please recycle paper

July 19, 1982

RECEIVED

JUL 22 1982

State of Utah
Oil, Gas & Mining
4241 State Office Building
Salt Lake City, Utah 84114

**DIVISION OF
OIL, GAS & MINING**

Attention: Ms. Cari Furse

State #2-32
Section 32, T8S, R17E
Duchesne County, Utah

Gentlemen:

Please find enclosed the copies of the logs you requested
on the subject well.

Very truly yours,

Michele Tisdell

Michele Tisdell
Sec. Drilling & Production

/mt
Enclosures



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

November 8, 1983

Lomax Exploration Company
P.O. Box 4503
Houston Texas 77210

RE: See Attached Sheet

Gentlemen:

According to our records, "Well Completion Reports" filed with this office April 29, 1982, February 1, 1983, July 14, 1983 and March 18, 1983 from the above referred to wells, indicate the following electric logs were run: State # 2-32 DIL-GR, CNL-FDC, CBL-GR; Federal # 3-35 CNL-FDC, DLL-MSFL, GR-CBL; Red Wash Fed. #12-11 DLL-MSFL, CNL-LDL, CBL; and State # 9-32 CNL-FDC, DLL-MSFL, CBL. As of todays date, this office has not received these logs: State #2-32 DIL-GR; Fed. #3-35 CNL-FDC, DLL-MSFL, GR-CBL; Red Wash Fed. #12-11 DLL-MSFL, CNL-LDL, CBL; and State #9-32 DNL-FDC, DLL-MSFL, CBL.

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

A handwritten signature in cursive script that reads "Claudia Jones".

Claudia Jones
Well Records Specialist

CJ/cj

Attachment

Well No. State #2-32
API # 43-013-30604
Sec. 32, T. 8S, R. 17E.
Duchesne County, Utah

Well No. Federal #3-35
API # 43-013-30608
Sec. 35, T. 8S, R. 16E.
Duchesne County, Utah

Well No. State #9-32
API # 43-013-30713
Sec. 32, T. 8S, R. 17E.
Duchesne County, Utah

Well No. Red Wash Federal #12-11
API # 43-047-31300
Sec. 11, T. 7S, R. 22E.
Uintah County, Utah

STATE OF UTAH

DEPARTMENT OF HEALTH
 DIVISION OF ENVIRONMENTAL HEALTH
 Utah Water Pollution Control Committee

150 West North Temple, P.O. Box 2500, Salt Lake City, Utah 84110-2500

Scott M. Matheson
 Governor



James O. Mason, M.D., Dr.P.H.
 Executive Director
 Department of Health
 801-533-6111

Kenneth L. Alkema
 Director

Division of Environmental Health
 801-533-6121

MEMBERS

Grant K. Borg, Chairman
 W. Lynn Cottrell
 Harold B. Lamb
 Kenneth L. Alkema
 Franklin N. Davis
 Dale P. Bateman
 Joseph A. Urbanik
 C. Arthur Zeldin
 Mrs. Lloyd G. Bliss

March 21, 1985

Calvin K. Sudweeks
 Executive Secretary
 Rm 410 (801) 533-6146

Lomax Exploration Company
 P. O. Box 4503
 Houston, Texas 77210-4503

ATTENTION: Paul Curry,
 Engineering Assistant

Gentlemen:

We acknowledge receipt of your letter dated May 30, 1984 notifying us of the location of the ponds for the wells described below and sources of produced water in accordance with Part VI, Utah Wastewater Disposal Regulations, Section 6.5.1.b. The regulations require that the disposal ponds...."shall be constructed such that no surface discharge or significant migration to subsurface will result."

As time and weather allows, a brief inspection of these ponds will be made by members of our staff during this next month. The wells are:

Well Number	Location			Average Quantity(BWPD) Produced Water
	Section	Township	Range	
Monument Butte St. #1-2	2	9S	16E	0.5
Monument Butte St. #3-2	2	9S	16E	0.1
Gilsonite State #1-32	32	8S	17E	1.6
Gilsonite State #1A-32	32	8S	17E	1.1
Gilsonite State #2-32	32	8S	17E	0.1
Gilsonite State #4-32	32	8S	17E	0.3
Gilsonite State #5-32	32	8S	17E	0.2
Gilsonite State #6-32	32	8S	17E	4.0
Gilsonite State #7-32	32	8S	17E	1.3
Gilsonite State #9-32	32	8S	17E	0.1
Gilsonite State #11-32	32	8S	17E	0.4
Gilsonite State #12-32	32	8S	17E	0.3
Monument Butte St. #1-36	36	8S	16E	0.1
Monument Butte St. #5-36	36	8S	16E	0.1
Monument Butte St. #12-36	36	8S	16E	0.1
Monument Butte St. #13-36	36	8S	16E	0.9

If you have any questions regarding this matter, please contact us.

Sincerely,
 UTAH WATER POLLUTION CONTROL COMMITTEE

Calvin K. Sudweeks
 Calvin K. Sudweeks
 Executive Secretary

RECEIVED

MAR 22 1985

BLN:pa
 cc: Division of Oil, Gas and Mining
 Uintah Basin District Health Department
 BLM/Oil and Gas Operation - Vernal District
 272-10

DIVISION OF OIL
 GAS & MINING

Lomax



RECEIVED

APR 16 1985

DIVISION OF OIL
GAS & MINING

April 15, 1985

Bureau of Land Management
Post Office Box 1037
170 South 500 East
Vernal, Utah 84078

Re: Workover Report
Gilsonite State 2-32
Sec. 32, T8S, R17E

Gentlemen:

Please find enclosed, two (2) copies of the Workover Report on the above captioned well.

If you have any questions, please advise.

Very truly yours,

LOMAX EXPLORATION COMPANY

Jodie S. Faulkner
Production Technician

cc: Lomax Exploration
Houston, Texas

Lomax Exploration
Roosevelt, Utah

State of Utah
Division of Oil, Gas & Mining
355 W. N. Temple
Three Triad Center - Suite 350
Salt Lake City, Utah 84180-1203

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE
(See instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

19

WELL COMPLETION OR RECOMPLETION REPORT AND LOGS

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

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

2. NAME OF OPERATOR
Lomax Exploration Company

3. ADDRESS OF OPERATOR
Post Office Box 4503, Houston, Texas 77210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 517' FSL & 686' FWL, Sec. 32, T8S, R17E SWSW

At top prod. interval reported below _____
At total depth _____

5. LEASE DESIGNATION AND SERIAL NO.
22060

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME
State

9. WELL NO.
2-32

10. FIELD AND POOL, OR WILDCAT
Gilsonite State

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 32, T8S, R17E

12. COUNTY OR PARISH
Duchesne

13. STATE
Utah

14. PERMIT NO. 43-013-30604 **DATE ISSUED** 10/02/81

15. DATE SPUDDED 12/20/81 **16. DATE T.D. REACHED** 12/27/81 **17. DATE COMPL. (Ready to prod.)** 03/27/85 **18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*** 5241 GR **19. ELEV. CASINGHEAD** 5241'

20. TOTAL DEPTH, MD & TVD 5523 **21. PLUG, BACK T.D., MD & TVD** 5481 **22. IF MULTIPLE COMPL., HOW MANY*** _____ **23. INTERVALS DRILLED BY** _____ **ROTARY TOOLS** Yes **CABLE TOOLS** _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
4234-76, 4943-5284 Green River

25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN
DIL-GR, CNL-FDC, CBL-GR

27. WAS WELL CORED No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	24	298	12-1/4	Cemented to surface	
5-1/2	15.50	5523	7-7/8	485 sx 50/50 Pozmix	

29. LINER RECORD

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

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8	5218'	None

31. PERFORATION RECORD (Interval, size and number)

Interval	Shots
4943-48	5 shots
4951-61	10 shots
5123-35	12 shots
5151-55	4 shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4943-5284	46,500 gal gelled diesel
	85,000# sand
4234-76	16,000 gal KCL & 70,000 20/40 sand & 20,000 10/20 sand

33.* PRODUCTION

DATE FIRST PRODUCTION 03/28/85 **PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)** Pumping **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
4/10/85	72	-	→	135	195	84	1444

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
N/A	N/A	→	45	65	28	36.5

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

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 J. Faulkner TITLE Production Technician DATE April 15, 1985

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

=====
State : Utah SL Merid 8S - 17E - 32 sw sw
=====

59

County: DUCHESNE Oper: LOMAX EXPL CO

Field : MONUMENT BUTTE Compl: 03/12/1982 D O OIL

=====
Well: STATE #2-32 Last Info: 09/29/1988

Ftg: 517 fsl 686 fwl
Oper Address: PO Box 1446, Roosevelt UT 84066 - 801/322-5009
Obj: 6300 Test Permit #: 10/05/1981 API: 43-013-3060400
Elev: 5258KB

=====
Spud: 12/20/1981
TD: 5523 on 12/27/1982 Douglas Creek PB: 5481
=====

Elev: 5258KB FORMATION TOPS (Type: L=Log S=Sample V=True Vertical)
(Source: H=Scout,T=Govt,S=Shell,G=USGS,N=NDGS)

Formation	Depth	Elev	T/S	Formation	Depth	Elev	T/S
Green River	1580	3678	L H	Douglas Creek	4753	505	L H
oil shale mkr	3782	1476	L H				

=====
Casing: 8 5/8 @ 307 - 5 1/2 @ 5523 w/485

Core : None
DST : None reported

Logs : DIL-GR CNL-FDC

Tubing: 2 7/8 @ 5323

Perfs : 4943-5284 (Green River/Douglas Cr)
w/1 SPF @ 4943-48 4951-61 5123-35 5151-55 5274-84 - frac w/46,500 gal
gel diesel 85,000# sd

PZone : 4943-5284 (Green River)

IP : P 183 BOPD grav 38, gas not meas, no wtr

Journl: 3/23/82 completed 2/9/82; producing - no details available.
5/24/82 completed oil well.

OPERATOR LOMAX EXPLORATION COMPANY

OPERATOR ACCT. NO. N 0580

ADDRESS (PAGE 1 OF 2)

KEBBIE/1-722-5103

ACTION CODE	CURRENT ENTITY NO.	NEW ENTITY NO.	API NUMBER	WELL NAME	WELL LOCATION					SPUD DATE	EFFECTIVE DATE
					QQ	SC	TP	RG	COUNTY		
D	2706	11486	43-013-30604	GILSONITE STATE 2-32	SWSW	32	8S	17E	DUCHESNE	12-20-81	5-1-93
WELL 1 COMMENTS: *GILSONITE UNIT EFF. 4-12-93, PER OPERATOR REQUEST MAKE NEW ENTITY EFFECTIVE 5-1-93.											
D	9000	11486	43-013-30599	STATE 1-32	NENW	32	8S	17E	DUCHESNE	10-08-81	5-1-93
WELL 2 COMMENTS:											
D	9001	11486	43-013-30658	STATE 7-32	SWNE	32	8S	17E	DUCHESNE	5-24-82	5-1-93
WELL 3 COMMENTS:											
D	9002	11486	43-013-30685	STATE 11-32	NESW	32	8S	17E	DUCHESNE	9-19-82	5-1-93
WELL 4 COMMENTS:											
D	9003	11486	43-013-30691	STATE 1A-32	NENE	32	8S	17E	DUCHESNE	10-14-82	5-1-93
WELL 5 COMMENTS:											

- ACTION CODES (See instructions on back of form)
- A - Establish new entity for new well (single well only)
 - B - Add new well to existing entity (group or unit well)
 - C - Re-assign well from one existing entity to another existing entity
 - D - Re-assign well from one existing entity to a new entity
 - E - Other (explain in comments section)

NOTE: Use COMMENT section to explain why each Action Code was selected.

L. CORDOVA (DOGM)
Signature
ADMIN. ANALYST
Title
6-16-93
Date
Phone No. ()

Lomax Exploration Company

A subsidiary of Inland Resources Inc.



July 13, 1995

State of Utah Department of Natural Resources
Attention: Ms Becky Pritchett
355 W. North Temple
3 Triad Center, Suite 400
Salt Lake City, Utah 84180-1204

RE: Corporate Name Change

Dear Sir or Madame:

Effective July 1, 1995, Lomax Exploration Company will have taken the steps necessary to change its name to **Inland Production Company**. A Certificate issued by the Texas Secretary of State evidencing the name change is attached for your files. We have also attached to this letter those Utah State leases (Exhibit "B") and wells (Exhibit "A") affected by this name change. We have attempted to provide a complete list from the records we have. The intent is to include all leases and wells that Lomax Exploration Company operates or has an interest in.

Riders changing the Principal from Lomax Exploration Company to Inland Production Company under Nationwide Oil and Gas Bond # 4488944 for Lomax Exploration Company will be furnished to the State of Utah in the very near future.

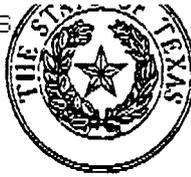
Please amend your records by substituting Inland Production Company in place of Lomax Exploration Company on the leases and wells listed on the attached exhibits. In the future we will begin submitting notices and permits for new operations after July 1, 1995 in the name of Inland Production Company.

Should a fee be required or should you need further information or documents relating to our name change please contact the undersigned at your convenience at the following number: (303) 292-0900 or Cheryl Cameron at our Roosevelt, Utah office (801) 722-5103.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Chris A Potter".

Chris A Potter, CPL
Manager of Land



The State of Texas

Secretary of State
JUNE 30, 1995

MIKE PARSONS...GLAST, PHILLIPS & MURRAY
2200 ONE GALLERIA TWR, 13355 NOEL RD, LB48
DALLAS ,TX 75240-6657

RE:
INLAND PRODUCTION COMPANY
CHARTER NUMBER 00415304-00

IT HAS BEEN OUR PLEASURE TO APPROVE AND PLACE ON RECORD YOUR ARTICLES OF AMENDMENT. A COPY OF THE INSTRUMENT FILED IN THIS OFFICE IS ATTACHED FOR YOUR RECORDS.

THIS LETTER WILL ACKNOWLEDGE PAYMENT OF THE FILING FEE.

IF WE CAN BE OF FURTHER SERVICE AT ANY TIME, PLEASE LET US KNOW.

VERY TRULY YOURS,




Antonio Q. Garza, Jr., Secretary of State



The State of Texas

Secretary of State

CERTIFICATE OF AMENDMENT

FOR

INLAND PRODUCTION COMPANY

FORMERLY

LOMAX EXPLORATION COMPANY
CHARTER NUMBER 00415304

THE UNDERSIGNED, AS SECRETARY OF STATE OF THE STATE OF TEXAS,
HEREBY CERTIFIES THAT THE ATTACHED ARTICLES OF AMENDMENT FOR THE ABOVE
NAMED ENTITY HAVE BEEN RECEIVED IN THIS OFFICE AND ARE FOUND TO
CONFORM TO LAW.

ACCORDINGLY THE UNDERSIGNED, AS SECRETARY OF STATE, AND BY VIRTUE
OF THE AUTHORITY VESTED IN THE SECRETARY BY LAW, HEREBY ISSUES THIS
CERTIFICATE OF AMENDMENT.

DATED JUNE 29, 1995

EFFECTIVE JUNE 29, 1995




Antonio O. Garza, Jr., Secretary of State

ARTICLES OF AMENDMENT
TO THE
ARTICLES OF INCORPORATION
OF
LOMAX EXPLORATION COMPANY

FILED
In the Office of the
Secretary of State of Texas

JUN 29 1995

Corporations Section

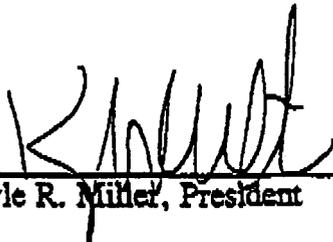
Pursuant to the provisions of Part Four of the Texas Business Corporation Act, the undersigned corporation adopts the following articles of amendment to its Articles of Incorporation:

1. **Name.** The name of the corporation is LOMAX EXPLORATION COMPANY.
2. **Statement of Amendment.** The amendment alters or changes Article One of the original Articles of Incorporation to read in full as follows:

"Article One. The name of the corporation is INLAND PRODUCTION COMPANY."

3. **Shareholders.** The number of shares of the corporation outstanding at the time of such adoption was 205,315, there being 107,546 Common Shares and 97,769 Non-voting Preferred Shares; and the number of shares entitled to vote thereon was 107,546.
4. **Adoption by Shareholders.** Only the holders of Common Shares of the corporation are entitled to vote on the amendment. The shareholders adopted the foregoing amendment by unanimous written consent dated June 23, 1995, pursuant to the provisions of Article 9.10 of the Texas Business Corporation Act and, therefore, no notice was required to be delivered under said Article 9.10.
5. **Adoption by Board of Directors.** The Board of Directors adopted said amendment by a consent in writing signed by all Directors.
6. **Future Effective Date.** This amendment will become effective on July 1, 1995, at 12:01 a.m.

EXECUTED June 26, 1995.



Kyle R. Miller, President

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING
 355 West North Temple, 3 Triad, Suite 350, Salt Lake City, UT 84180-1203

MONTHLY OIL AND GAS PRODUCTION REPORT

OPERATOR NAME AND ADDRESS:

KEBBIE JONES
 LOMAX EXPLORATION COMPANY
 PO BOX 1446
 ROOSEVELT UT 84066

UTAH ACCOUNT NUMBER: N0580

REPORT PERIOD (MONTH/YEAR): 6 / 95

AMENDED REPORT (Highlight Changes)

Well Name			Producing Zone	Well Status	Days Oper	Production Volumes		
API Number	Entity	Location				OIL(BBL)	GAS(MCF)	WATER(BBL)
✓	FEDERAL 10-35							
4301330801	10835 08S 16E 35	GRRV			116535			
✓	FEDERAL 1-34				"			
4301330808	10835 08S 16E 34	GRRV			"			
✓	FEDERAL 14-35				"			
4301330812	10835 08S 16E 35	GRRV			"			
✓	MONUMENT FEDERAL 8-35				"			
4301331263	10835 08S 16E 35	GRRV			"			
✓	MONUMENT FEDERAL 10-34				"			
4301331371	10835 08S 16E 34	GRRV			"			
✓	MONUMENT FEDERAL 9-34				"			
4301331407	10835 08S 16E 34	GRRV			"			
✓	NUMENT FED 2A-35				"			
4301331437	10835 08S 16E 35	GRRV			"			
✓	MONUMENT FEDERAL 7-34				"			
4301331471	10835 08S 16E 34	GRRV			"			
✓	BOUNDARY FED 5-21							
4301330822	11162 08S 17E 21	GRRV			150376			
✓	STATE 1-32							
4301330599	11486 08S 17E 32	GRRV			ML22060			
✓	GILSONITE STATE 2-32							
4301330604	11486 08S 17E 32	GRRV			ML22060			
✓	STATE 11-32				"			
4301330685	11486 08S 17E 32	GRRV			"			
✓	STATE 1A-32				"			
4301330691	11486 08S 17E 32	GRRV			"			
TOTALS								

COMMENTS: _____

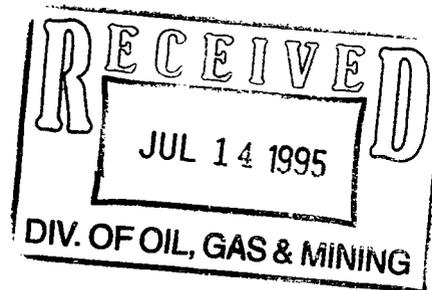
I hereby certify that this report is true and complete to the best of my knowledge. Date: _____

Name and Signature: _____ Telephone Number: _____

Lomax Exploration Company

A subsidiary of Inland Resources Inc.

Lomax

Announcing
Our Name Change

From

Lomax Exploration Company

To

**Inland Production
Company**

** N 5160 assigned 7/26/95. Lee*

Field And Corporate Office Locations Remain The Same:

Corporate Office:

Inland Resources Inc.

475 Seventeenth Street, Suite 1500

Denver, CO 80202

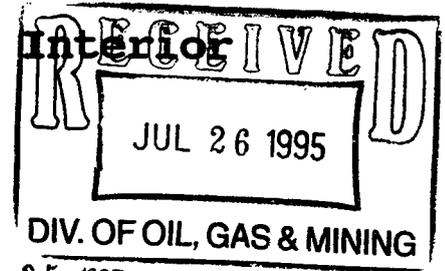
Field Office:

W. Pole Line Road

P.O. Box 1446

Roosevelt, Utah 84066

United States Department of the
BUREAU OF LAND MANAGEMENT
Utah State Office
P.O. Box 45155
Salt Lake City, Utah 84145-0155



IN REPLY REFER TO:
3100
SL-065914 et al
(UT-923)

NOTICE

Inland Production Company : Oil and Gas Leases
475 Seventeenth St., Ste. 1500 : SL-065914 et al
Denver, Colorado 80202 :

Name Change Recognized

Acceptable evidence has been received in this office concerning the change of name of Lomax Exploration Company to Inland Production Company on Federal oil and gas leases.

The oil and gas lease files identified on the enclosed exhibit have been noted as to the name change. We are notifying the Minerals Management Service and all applicable Bureau of Land Management offices of the name change by a copy of this notice. If additional documentation for changes of operator are required by our Field Offices, you will be contacted by them.

For our purposes, the name change is recognized effective June 29, 1995 (Secretary of State's approval date).

Due to the name change, the name of the principal/obligor on the bond is required to be changed from Lomax Exploration Company to Inland Production Company on Bond No. 4488944 (BLM Bond No. UT0056). You may accomplish this name change either by consent of the surety on the original bond or by a rider to the original bond. Otherwise, a replacement bond with the new name should be furnished to this office. BLM Bond Nos. MT0771 and WY0821 should also be changed for the bonds held by Montana and Wyoming respectively.

/s/ ROBERT LOPEZ

Chief, Branch of Mineral
Leasing Adjudication

Enclosure
1-Exhibit (1 p)

cc: Hartford Accident & Indemnity Co.
Hartford Plaza
Hartford, CT 06115

bc: Moab District Office
Vernal District Office
Montana State Office
Wyoming State Office
Eastern States Office
MMS--Data Management Division, MS 3113, P.O. Box 5860, Denver, CO 80217
State of Utah, Attn: Lisha Cordova, Division of Oil, Gas & Mining,
355 West North Temple, 3 Triad Center, Suite 350, SLC, UT 84180
Teresa Thompson (UT-922)
Dianne Wright (UT-923)

EXHIBIT

SL-065914	U-36846	UTU-66185
SL-071572A	U-38428	UTU-67170
U-02458	U-45431	UTU-68548
U-15855	U-47171	UTU-69060
U-16535	U-50376	UTU-69061
U-26026	U-62848	UTU-72103
U-34173	UTU-65965	UTU-72104
U-36442	UTU-66184	UTU-73088

FAX COVER SHEET



475 17th Street, Suite 1500
Denver, CO 80202
303-292-0900, Fax #303-296-4070

DATE: August 8, 1995
TO: Lisha Cordova
COMPANY: State of Utah - Division of Oil, Gas and Mining
FAX NUMBER: 801 359 3940
FROM: Chris A Potter

NUMBER OF PAGES: 1 (INCLUDING COVER SHEET):

RE: Transfer of Authority to Inject
Lomax Exploration Company to Inland Production Company

I hope the info I sent to you August 1st was acceptable regarding our name change and your phone call to me last week.....

If there is anything missing or you need additional info, please let me know. I am located in our Denver office.....

Division of Oil, Gas and Mining
OPERATOR CHANGE WORKSHEET

Routing: (GIL) *1*

1- ME 7-PL
2-LWP 8-SJ
3- DT 9-FILE
4-VLO
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

(MERGER)

The operator of the well(s) listed below has changed (EFFECTIVE DATE: 6-29-95)

TO (new operator)	<u>INLAND PRODUCTION COMPANY</u>	FROM (former operator)	<u>LOMAX EXPLORATION COMPANY</u>
(address)	<u>PO BOX 1446</u>	(address)	<u>PO BOX 1446</u>
	<u>ROOSEVELT UT 84066</u>		<u>ROOSEVELT UT 84066</u>
	<u>KEBBIE JONES</u>		<u>KEBBIE JONES</u>
	phone (<u>801</u>) <u>722-5103</u>		phone (<u>801</u>) <u>722-5103</u>
	account no. <u>N 5160</u>		account no. <u>N 0580</u>

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

Name: **SEE ATTACHED**	API: <u>013-30604</u>	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
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

- Sec* 1. (Rule R615-8-10) Sundry or other legal documentation has been received from former operator (Attach to this form). *(Rec'd 7-14-95)*
- N/A* 2. (Rule R615-8-10) Sundry or other legal documentation has been received from new operator (Attach to this form).
- Sec* 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: ____ *(7-28-95)*
- Sec* 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.
- Sec* 5. Changes have been entered in the Oil and Gas Information System (Wang/IBM) for each well listed above. *(7-31-95)*
- Sup* 6. Cardex file has been updated for each well listed above. *8-16-95*
- Sup* 7. Well file labels have been updated for each well listed above. *8-22-95*
- Sec* 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to State Lands and the Tax Commission. *(7-31-95)*
- Sec* 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) ____ (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~~) *Trust Lands Admin. / Rider or Repl. in Progress.*

- N/A / 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.
- ____ 3. The former operator has requested a release of liability from their bond (yes/no) ____ . Today's date _____ 19____. 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.
- OTS 2. Copies of documents have been sent to State Lands for changes involving State leases.
8/23/95 sent to Ed Bohner

FILMING

- ✓ 1. All attachments to this form have been microfilmed. Date: August 30 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

950726 BLM/SL Aprv. eff. 6-29-95.

Speed Letter®

To Ed Bonner

From Don Staley

~~XXXXXX~~ SCHOOL & INSTITUTIONAL
TRUST LANDS ADMIN.

Oil, Gas and Mining

Subject Operator Change

- No. 8 & 10 FOLD
MESSAGE

Date 8/23 19 95

Ed,

For your information, attached are copies of documents regarding an operator change on a state lease(s). These companies have complied with our requirements. Our records have been updated. Bonding should be reviewed by State Lands ASAP.

Former Operator: LOMAX EXPLORATION CO. (N 0580)

New Operator : INLAND PRODUCTION CO. (N 5160)

Well:

API:

Entity:

S-T-R:

(SEE ATTACHED LIST)

- No. 9 FOLD
- No. 10 FOLD
CC: Operator File

Signed

Don Staley

REPLY

Date _____ 19 _____

Signed

WELL NAME	API	ENTITY	LOCATION	LEASE
GILSONITE STATE 10-32	43-013-31485	99999	32-8S-17E	ML22061
GILSONITE STATE 8-32	43-013-31498	99999	32-8S-17E	ML22061
MONUMENT BUTTE STATE 16-2	43-013-31510	99999	2-9S-16E	ML21839
MONUMENT BUTTE STATE 8-2	43-013-31509	99999	2-9S-16E	ML21839
SUNDANCE STATE 5-32	43-047-32685	11781	32-8S-18E	ML22058
MONUMENT BUTTE STATE 14-36	43-013-31508	11774	36-8S-16E	ML22061
GILSONITE STATE 14I-32	43-013-31523	11788	32-8S-17E	ML21839
MONUMENT BUTTE STATE 16-36R	43-013-10159	99999	36-8S-16E	ML22061
STATE 5-36	43-013-30624	10835	36-8S-16E	ML22061
STATE 1-36	43-013-30592	10835	36-8S-16E	ML22061
12-32	43-013-30787	11486	32-8S-17E	ML22060
GILSONITE STATE 13-32	43-013-31403	99990	32-8S-17E	ML22060
GILSONITE STATE 7-32	43-013-30658	11486	32-8S-17E	ML22060
WELLS DRAW STATE 7-36	43-013-30934	09730	36-8S-15E	ML21835
STATE 1-2	43-013-30596	10835	2-9S-16E	ML21839
STATE 13-36	43-013-30623	10835	36-8S-16E	ML22061
STATE 3-2	43-013-30627	10835	2-9S-16E	ML21839
STATE 12-36	43-013-30746	10835	36-8S-16E	ML22061
STATE 1-32	43-013-30599	11486	32-8S-17E	ML22060
GILSONITE STATE 2-32	43-013-30604	11486	32-8S-17E	ML22060
STATE 11-32	43-013-30685	11486	32-8S-17E	ML22060
STATE 1A-32	43-013-30691	11486	32-8S-17E	ML22060
STATE 9-32	43-013-30713	11486	32-8S-17E	ML22060
STATE 5-32	43-013-30714	11486	32-8S-17E	ML22060
STATE 6-32	43-013-30748	11486	32-8S-17E	ML22060
STATE 4-32	43-013-30800	11486	32-8S-17E	ML22060
GILSONITE STATE 14-32	43-013-31480	11486	32-8S-17E	ML22061

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 deepen or reentry to a different reservoir.
 Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas well Other

2. Name of Operator
Inland Production Company

3. Address and Telephone No.
P.O. Box 1446 Roosevelt, Utah 8 4 0 6 6 (801) 722-5103

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
**SW/SW 517' FSL & 686' FWL
 Sec. 32, T8S, R17E**

5. Lease Designation and Serial No.
ML-22060

6. If Indian, Allottee or Tribe Name

7. If unit or CA, Agreement Designation
Gilsonite Unit

8. Well Name and No.
Gilsonite #2-32

9. API Well No.
43-013-30604

10. Field and Pool, or Exploratory Area

11. County or Parish, State
DUCHESNE, UT

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing repair	<input type="checkbox"/> Water Shut-off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Re-Completion</u>	<input type="checkbox"/> Dispose Water

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

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

RE-PERFORATE 1/11/96 - 1/20/96:

Back on Production @ 3:00 PM 1/21/96

- A sd 5274'-5284' Pump 500 gal 15% FE acid w/ 250 gal parafin inhibitor & 500 gal overflush**
- B sd 5123'-5136' Pump 500 gal acid w/ 250 gal inhibitor & 500 gal overflush**
- C sd 4943'-4948' Pump 500 gal acid w/ 250 gal inhibitor & 500 gal overflush**
4951'-4961'
- GB-4 4234'-4247' Pump 500 gal acid w/ 500 gal inhibitor & 1000 gal overflush & 100 ball sealers**
GB-6 4264'-4276' Pumped total 327 bbls treatment & displacement

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

Signed *Cheryl Cameron* Title Regulatory Compliance Specialist Date 2/2/96
Cheryl Cameron

(This space of Federal or State office use.)

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

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

OIL & GAS CONSERVATION COMMISSION

5. LEASE DESIGNATION AND SERIAL NO.

ML-22060

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

7. UNIT AGREEMENT NAME

Gilsonite Unit

8. FARM OR LEASE NAME

Gilsonite State

9. WELL NO.

#2-32

10. FIELD AND POOL, OR WILDCAT

Gilsonite

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

Sec. 32, T8S, R17E

12. COUNTY OR PARISH

Duchesne

13. STATE

UT

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 Re-perf/Acid

2. NAME OF OPERATOR
Inland Production Company

3. ADDRESS OF OPERATOR
P.O. Box 1446 Roosevelt, UT 84066 PERM 9 1996

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface SW/SW
At top prod. interval reported below 517' FSL & 686' FWL
At total depth _____

14. PERMIT NO. 43-013-30604 DATE ISSUED 10/2/81

15. DATE SPUDDED 12/20/81 16. DATE T.D. REACHED 12/27/81 17. DATE COMPL. (Ready to prod.) 3/27/85 18. ELEVATIONS (DP, R&B, RT, GR, ETC.)* 5241' GR 19. ELEV. CASINGHEAD 5241'

20. TOTAL DEPTH, MD & TVD 5523' 21. PLUG, BACK T.D., MD & TVD 5470' 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS X CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
5274'-5284'; 5123'-5136'; 4943'-4948' & 4951'-4961'; 4234'-4247' & 4264'-4276' Green River 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN CBL, DLL, CNL 27. WAS WELL CORED No

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	298'	12 1/4	Cmt to surf	
5 1/2	15.5#	5523'	7 7/8	485 Sx 50/50 Pozmix	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	5218'	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
Interval	Size	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
<u>Re-Perf</u>		<u>*See Back</u>	
<u>A sd @</u>	<u>5274'-5284'</u>		
<u>B sd @</u>	<u>5123'-5136'</u>		
<u>C sd @</u>	<u>4943'-4948' & 4951'-4961'</u>		
<u>GB-4 sd @</u>	<u>4234'-4247'</u>		
<u>GB-6 sd @</u>	<u>4264'-4276'</u>		

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
<u>1/21/96</u>		<u>Pumping</u>				<u>Producing</u>	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
<u>1/21/96</u>	<u>24</u>	<u>N/A</u>	<u>→</u>	<u>7</u>	<u>12</u>	<u>1</u>	<u>1.7</u>
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
<u>N/A</u>	<u>N/A</u>	<u>→</u>					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold & used for fuel TEST WITNESSED BY _____

35. LIST OF ATTACHMENTS
None

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED Brad Mecham Brad Mecham TITLE Operations Manager DATE 2/26/96

INSTRUCTIONS

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

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

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

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

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

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

FORMATION	TOP	BOTTOM	#32. DESCRIPTION, CONTENTS, ETC.	NAME	GEOLOGIC MARKERS
			<p>A sd 5274'-5284' Pump 500 gal 15% FE acid w/250 gal paraffin inhib & 500 gal overflush</p> <p>B sd 5123'-5136' pump 500 gal acid w/250 gal inhib & 500 gal overflush</p> <p>C sd 4943'-4948' & 4951'-4961' pump 500 gal acid w/250 gal inhib & 500 gal overflush</p> <p>GB-4 & GB-6 sd 4234'-4247' & 4264'-4276' pump 500 gal acid w/500 gal inhib & 1000 gal overflush & 100 ball sealers</p> <p>pumped a total 327 bbls treatment & displacement</p>		

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUMULON USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

MEAS. DEPTH TROP. DEPTH

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

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. Lease Designation and Serial No.
ML-22060

6. If Indian, Allottee or Tribe Name
NA

7. If Unit or CA, Agreement Designation
NA

8. Well Name and No.
GILSONITE STATE 2-32

9. API Well No.
43-013-30604

10. Field and Pool, or Exploratory Area
MONUMENT BUTTE

11. County or Parish, State
DUCHESNE COUNTY, UTAH

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
INLAND PRODUCTION COMPANY

3. Address and Telephone No.
475 17TH STREET, SUITE 1500, DENVER, COLORADO 80202 (303) 292-0900

4. Location of Well (Footage, Sec., T., R., m., or Survey Description)
0517 FSL 0686 FWL SW/SW Section 32, T08S R17E

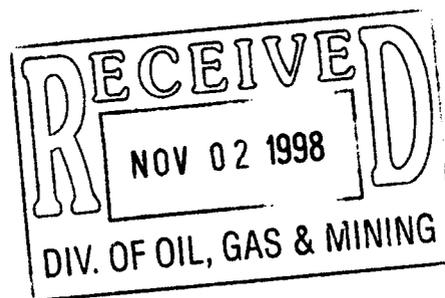
12. **CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Site Security
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

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

Attached please find the site security diagram for the above referenced well.



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

Signed *Debbie E. Knight* Title Manager, Regulatory Compliance Date 10/28/98

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

CC: UTAH DOGM

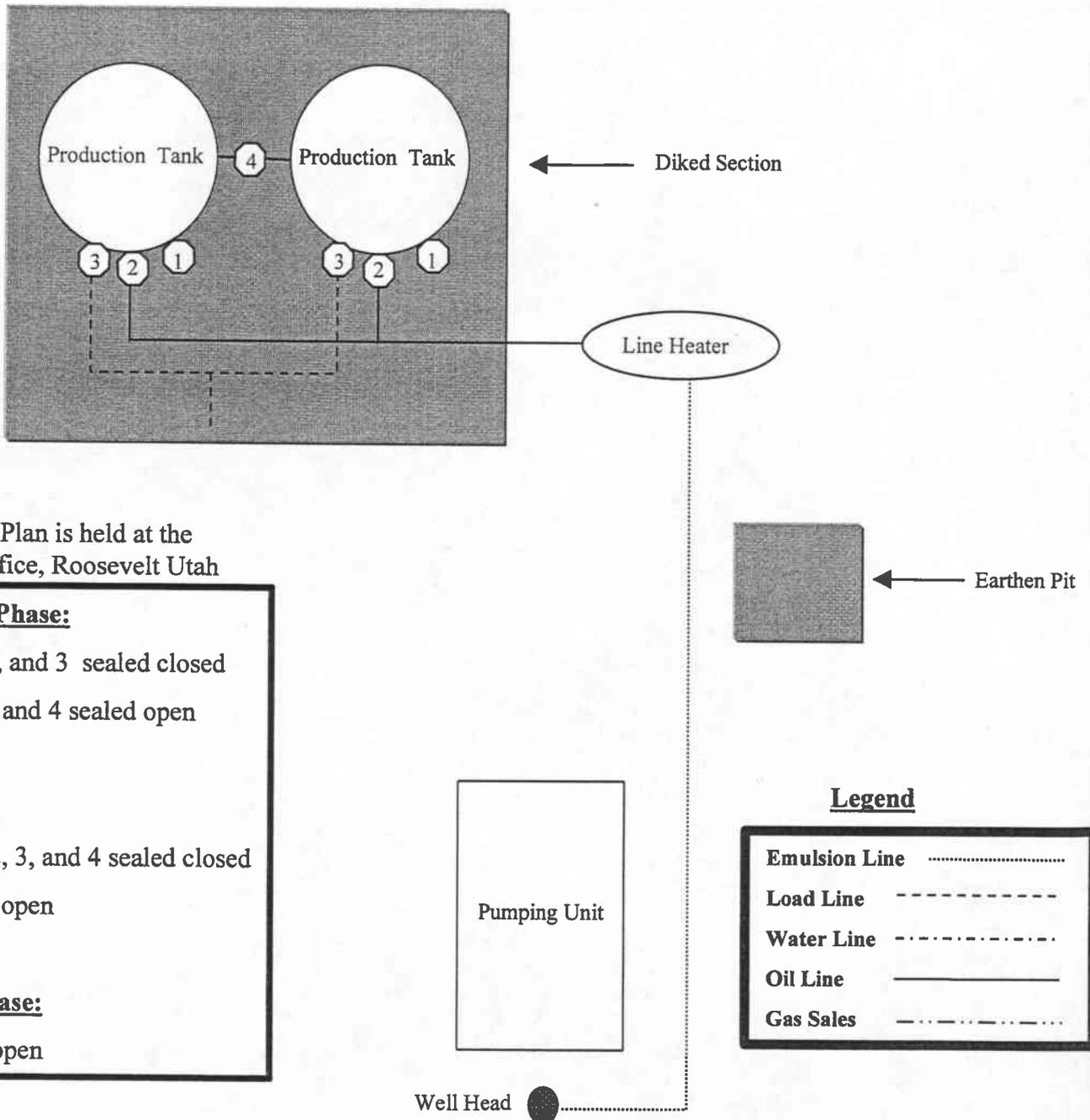
Inland Production Company Site Facility Diagram

Gilsonite 2-32

SW/SW Sec. 32, T8S, 17E

Duchesne County

Sept. 17, 1998



Site Security Plan is held at the
Roosevelt Office, Roosevelt Utah

Production Phase:

- 1) Valves 1, and 3 sealed closed
- 2) Valves 2 and 4 sealed open

Sales Phase:

- 1) Valves 2, 3, and 4 sealed closed
- 2) Valves 1 open

Draining Phase:

- 1) Valve 3 open

Legend

Emulsion Line
Load Line	-----
Water Line	- . - . - .
Oil Line	—————
Gas Sales	-----

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

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NUMBER:
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:
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Pipeline Work</u>	7. UNIT or CA AGREEMENT NAME: Gilsonite Unit	
2. NAME OF OPERATOR: Inland Production Company	8. WELL NAME and NUMBER: State Wells in Unit	
3. ADDRESS OF OPERATOR: 1401 17th St #1000 CITY Denver STATE CO ZIP 80211	PHONE NUMBER: (303) 893-0102	9. API NUMBER: 43-013-30604
4. LOCATION OF WELL FOOTAGES AT SURFACE:	10. FIELD AND POOL, OR WILDCAT:	
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SWSW 5-32 T08S R19E	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 (Submit in Duplicate) Approximate date work will start: <u>5/1/2004</u>	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
<input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion:	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input checked="" type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input checked="" type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input 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"/> 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: <u>Comingle Production w common tank</u>
	<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.

Inland Production requests permission to add the following wells to a common tank battery system; Gilsonite St 2-32, State 4-32, State 6-32, State 7-32, Gilsonite St 8-32, Gilsonite St 10-32, Gilsonite St 12-32, Gilsonite St 14-32. Each well will have a pumping unit and line heater. The Common tank battery will consist of 2 400 Bbl oil tanks, 1 200 Bbl water tank, a heater treater and a line heater all located at the Gilsonite 7-32. There will be a test facility located at the Gilsonite 7-32 that will consist of a heater treater, 1 400 Bbl tank and 1 400 Bbl water tank. Each well will have a production test once every 2 months. The Gilsonite 7-32 location will be expanded by 75' to the south and 50' to the west to allow for transportation at the central gathering point. The flow bundles will consist of 4 2" flow lines that will be wrapped and insulated. 2 lines will have glycol for a trace system, 1 line will be the production line, and 1 line will be the well test line. There will be approximately 2.4 miles of the production bundle installed.

COPY SENT TO OPERATOR

Date: 4-21-04
Initials: CHD

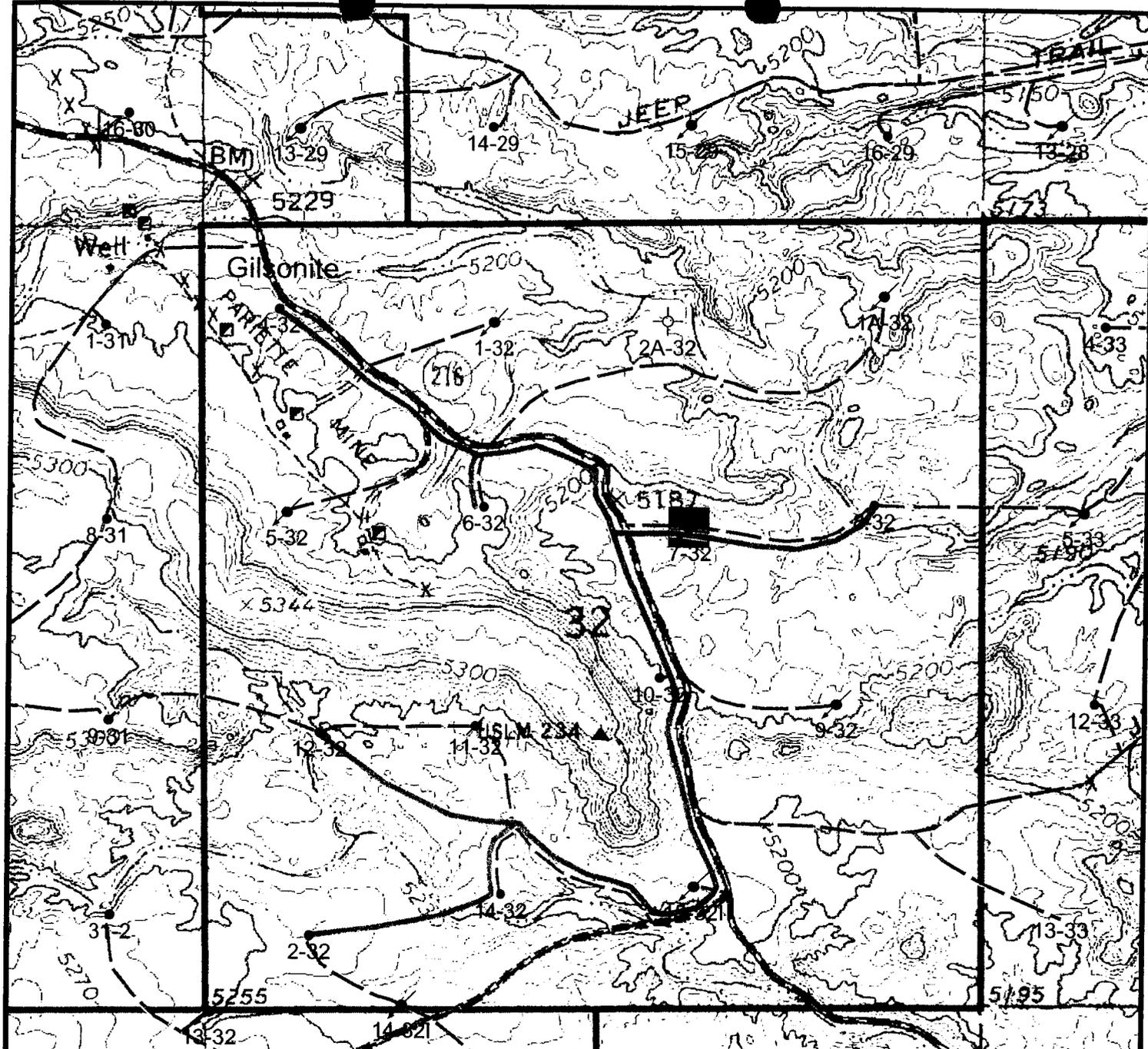
**APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING**
DATE: 4/29/04
BY: [Signature]

Production Allocation for each well should be based on actual days produced

NAME (PLEASE PRINT) <u>David Gerbig</u>	TITLE <u>Operations Engineer</u>
SIGNATURE <u>[Signature]</u>	DATE <u>3/22/2004</u>

RECEIVED
MAR 24 2004

(This space for State use only)



Inland Wells	Roads
○ Location	— Paved
⊕ Surface Spud	— Dirt
⊙ Drilling	— Private
⊙ (with dot) Waiting on Completion	— Proposed
● Producing Oil Well	— Two Track
⊙ (with star) Producing Gas Well	— Proposed gathering lines Total Length = 2.42 miles
⊙ (with arrow) Water Injection Well	■ Battery
⊙ (with cross) Dry Hole	
⊙ (with circle) Temporarily Abandoned	
⊙ (with square) Plugged & Abandoned	
⊙ (with triangle) Shut In	
⊙ (with star) Water Source Well	
⊙ (with circle) Water Disposal Well	



RESOURCES INC.

**Proposed Flow Lines +
Gilsonite Central Battery**
Uinta Basin, Utah
Duchesne & Uintah Counties

Alamo Plaza Building
1401 17th Street Suite 1000
Denver CO 80202-1247
Phone: (303) 893-0102

January 16, 2004





Office of the Secretary of State

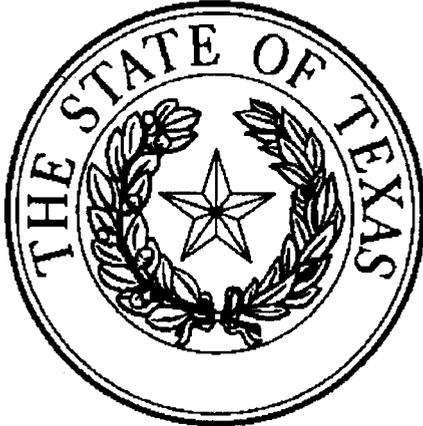
The undersigned, as Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

Newfield Production Company
Filing Number: 41530400

Articles of Amendment

September 02, 2004

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 10, 2004.



A handwritten signature in black ink, appearing to read "G. Connor".

Secretary of State

ARTICLES OF AMENDMENT
TO THE
ARTICLES OF INCORPORATION
OF
INLAND PRODUCTION COMPANY

FILED
In the Office of the
Secretary of State of Texas
SEP 02 2004
Corporations Section

Pursuant to the provisions of Article 4.04 of the Texas Business Corporation Act (the "TBCA"), the undersigned corporation adopts the following articles of amendment to the articles of incorporation:

ARTICLE 1 – Name

The name of the corporation is Inland Production Company.

ARTICLE 2 – Amended Name

The following amendment to the Articles of Incorporation was approved by the Board of Directors and adopted by the shareholders of the corporation on August 27, 2004.

The amendment alters or changes Article One of the Articles of Incorporation to change the name of the corporation so that, as amended, Article One shall read in its entirety as follows:

"ARTICLE ONE – The name of the corporation is Newfield Production Company."

ARTICLE 3 – Effective Date of Filing

This document will become effective upon filing.

The holder of all of the shares outstanding and entitled to vote on said amendment has signed a consent in writing pursuant to Article 9.10 of the TBCA, adopting said amendment, and any written notice required has been given.

IN WITNESS WHEREOF, the undersigned corporation has executed these Articles of Amendment as of the 1st day of September, 2004.

INLAND RESOURCES INC.

By: Susan G. Riggs
Susan G. Riggs, Treasurer

OPERATOR CHANGE WORKSHEET

ROUTING

1. GLH
2. CDW
3. FILE

Change of Operator (Well Sold)

Designation of Agent/Operator

X Operator Name Change

Merger

The operator of the well(s) listed below has changed, effective:		9/1/2004
FROM: (Old Operator): N5160-Inland Production Company Route 3 Box 3630 Myton, UT 84052 Phone: 1-(435) 646-3721	TO: (New Operator): N2695-Newfield Production Company Route 3 Box 3630 Myton, UT 84052 Phone: 1-(435) 646-3721	

CA No.		Unit:		GILSONITE				
WELL(S)								
NAME	SEC	TWN	RNG	API NO	ENTITY NO	LEASE TYPE	WELL TYPE	WELL STATUS
STATE 1-32	32	080S	170E	4301330599	11486	State	WI	A
GILSONITE ST 2-32	32	080S	170E	4301330604	11486	State	OW	P
STATE 7-32	32	080S	170E	4301330658	11486	State	WI	A
STATE 11-32	32	080S	170E	4301330685	11486	State	WI	A
STATE 1A-32	32	080S	170E	4301330691	11486	State	WI	A
STATE 9-32	32	080S	170E	4301330713	11486	State	WI	A
STATE 5-32	32	080S	170E	4301330714	11486	State	WI	A
STATE 6-32	32	080S	170E	4301330748	11486	State	OW	P
GILSONITE ST 12-32	32	080S	170E	4301330787	11486	State	OW	P
STATE 4-32	32	080S	170E	4301330800	11486	State	OW	P
GILSONITE 13-32	32	080S	170E	4301331403	11486	State	WI	A
GILSONITE STATE 14-32	32	080S	170E	4301331480	11486	State	OW	P
GILSONITE STATE 10-32	32	080S	170E	4301331485	11486	State	OW	P
GILSONITE STATE 8-32	32	080S	170E	4301331498	11486	State	OW	P
GILSONITE ST 14I-32	32	080S	170E	4301331523	11486	State	WI	A
GILSONITE ST 15-32I	32	080S	170E	4301331584	11486	State	WI	A

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: 9/15/2004
- (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 9/15/2004
- The new company was checked on the **Department of Commerce, Division of Corporations Database** on: 2/23/2005
- Is the new operator registered in the State of Utah: YES Business Number: 755627-0143
- If **NO**, the operator was contacted on:

6a. (R649-9-2) Waste Management Plan has been received on: IN PLACE
6b. Inspections of LA PA state/fee well sites complete on: waived

7. **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 BIA

8. **Federal and Indian Units:**
The BLM or BIA has approved the successor of unit operator for wells listed on: n/a

9. **Federal and Indian Communization Agreements ("CA"):**
The BLM or BIA has approved the operator for all wells listed within a CA on: na/

10. **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: 2/23/2005

DATA ENTRY:

- 1. Changes entered in the Oil and Gas Database on: 2/28/2005
- 2. Changes have been entered on the Monthly Operator Change Spread Sheet on: 2/28/2005
- 3. Bond information entered in RBDMS on: 2/28/2005
- 4. Fee/State wells attached to bond in RBDMS on: 2/28/2005
- 5. Injection Projects to new operator in RBDMS on: 2/28/2005
- 6. Receipt of Acceptance of Drilling Procedures for APD/New on: waived

FEDERAL WELL(S) BOND VERIFICATION:

1. Federal well(s) covered by Bond Number: UT 0056

INDIAN WELL(S) BOND VERIFICATION:

1. Indian well(s) covered by Bond Number: 61BSBDH2912

FEE & STATE WELL(S) BOND VERIFICATION:

- 1. (R649-3-1) The **NEW** operator of any fee well(s) listed covered by Bond Number 61BSBDH2919
- 2. The **FORMER** operator has requested a release of liability from their bond on: n/a*
The Division sent response by letter on: n/a

LEASE INTEREST OWNER NOTIFICATION:

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: n/a

COMMENTS:

*Bond rider changed operator name from Inland Production Company to Newfield Production Company - received 2/23/05



**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 8**

**1595 Wynkoop Street
DENVER, CO 80202-1129
Phone 800-227-8917
<http://www.epa.gov/region08>**

AUG 05 2008

Ref: 8P-W-GW

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Mr. Eric Sundberg
Regulatory Analyst
Newfield Production Company
1001 Seventeenth Street – Suite 2000
Denver, CO 80202

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

RE: Additional Well: Gilsonite Unit Permit
UIC Permit No. UT20633-00000
Well ID: UT20633-07419
Gilsonite State 2-32-8-17
517' FSL & 686' FWL
SW SW Section 32-T8S-R17E
Duchesne County, Utah
API # 43-013-30604

Dear Mr. Sundberg:

The Newfield Production Company's request to convert the former Green River Formation oil well Gilsonite State 2-32-8-17 to an enhanced recovery injection well in the Gilsonite Unit Area Permit is hereby authorized by the Environmental Protection Agency (EPA) under the terms and conditions of the Authorization For Additional Well.

The addition of the proposed injection well, within the exterior boundary of the Uintah & Ouray Indian Reservation, is being made under the authority of 40 CFR §144.33 (c) and terms of the Gilsonite Unit Area Permit No. UT20633-00000, and subsequent modifications. **Please refer to the corrective action requirements for the Area of Review (AOR) wells: Government #31-2-8-17, Gilsonite State #12-32-8-17, and Gilsonite State #14-32-8-17 on page 3 of the Well-Specific Requirements. Also refer to Newfield's July 10, 2008 procedure describing a monitoring plan with respect to those specific wells, which is attached to the Well-Specific Requirements.**

Please be aware that Newfield does not have authorization to begin injection operations into the well until all Prior to Commencing Injection requirements have been submitted and evaluated by the EPA, and has received written authorization from the Director to begin injection. Please note that the Permit limits injection to the gross interval within the Green River Formation between the depths of 3780 feet and the top of the Wasatch Formation estimated to be at 6164 feet.

Prior to receiving authorization to inject, the EPA requires that Newfield submit for review and approval: (1) the results of a **Part 1 (Internal) mechanical integrity test (MIT)**, (2) a **pore pressure** calculation of the injection interval, (3) and a complete **EPA Form No. 7520-12** (Well Rework Record) with a new schematic diagram.

The initial Maximum Allowable Injection Pressure (MAIP) for the Gilsonite 2-32-8-17 was determined to be **1225 psig**. UIC Area Permit UT20633-00000 also provides the opportunity for the permittee to request a change in the MAIP based upon results of a step rate test that demonstrates that the formation breakdown pressure will not be exceeded.

If you have any questions, please call Mr. Bob Near at (303) 312-6278 or 1-(800)-227-8917 (Ext. 312-6278). Please submit the required data to **ATTENTION: Bob Near**, at the letterhead address, citing **MAIL CODE: 8P-W-GW** very prominently.

Sincerely,



Stephen S. Tuber
Assistant Regional Administrator
Office of Partnerships and Regulatory Assistance



Encl: Authorization For Conversion of An Additional Well
EPA Form No. 7520-12 (Well Rework Record). Proposed Wellbore and P&A Wellbore
Schematics for Gilsonite State 2-32-8-17.

cc: Letter Only

Curtis Cesspooch, Chairman
Uintah & Ouray Business Committee
Ute Indian Tribe

Irene Cuch, Vice Chairwoman
Uintah & Ouray Business Committee
Ute Indian Tribe

Ronald Groves, Councilman
Uintah & Ouray Business Committee
Ute Indian Tribe

Steven Cesspooch, Councilman
Uintah & Ouray Business Committee
Ute Indian Tribe

Phillip Chimburas, Councilman
Uintah & Ouray Business Committee
Ute Indian Tribe

Frances Poowegup, Councilwoman
Uintah & Ouray Business Committee
Ute Indian Tribe

Chester Mills, Superintendent
U.S. Bureau of Indian Affairs
Uintah & Ouray Indian Agency

All enclosures:

Larry Love, Director
Energy and Minerals Department
Ute Indian Tribe

Michael Guinn, District Manager
Newfield Production Company
Myton, Utah

Shaun Chapoose, Director
Land Use Dept.
Ute Indian Tribe

Gilbert Hunt, Assistant Director
Utah Division of Oil, Gas and Mining

Fluid Minerals Engineering Office
U.S. Bureau of Land Management
Vernal Office

Elaine Willie, GAP Coordinator
Land Use Dept.
Ute Indian Tribe

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 8
1595 WYNKOOP STREET
DENVER, CO 80202-1129
Phone 800-227-8917
<http://www.epa.gov/region08>

AUTHORIZATION FOR ADDITIONAL WELL

UIC Area Permit No: UT20633-00000

The Gilsonite State Final UIC Area Permit No. UT20633-00000, effective November 2, 1992, authorizes injection for the purpose of enhanced oil recovery into multiple lenticular sand units which are distributed throughout the lower portion of the Green River Formation. On July 13, 2006, the permittee provided notice to the Director concerning the following additional enhanced recovery injection well:

Well Name:	<u>Gilsonite State # 2-32-8-17</u>
EPA Well ID Number:	<u>UT20633-07419</u>
Location:	517 ft FSL & 686 ft FWL SW SW Sec. 32 – T8S – R17E Duchesne County, Utah. API # 43-013-30604

Pursuant to 40 CFR §144.33, Area UIC Permit No. UT20633-00000 authorizes the permittee to construct and operate, convert, or plug and abandon additional enhanced recovery injection wells within the area permit. This well was determined to satisfy additional well criteria required by the permit.

This well is subject to all provisions of UIC Area Permit No. UT20633-00000, as modified and as specified in the Well Specific Requirements detailed below. This Authorization shall expire one year after the Effective Date unless the permittee has converted the well to injection or submits a written request to extend this Authorization prior to the expiration date.

This Authorization is effective upon signature.

Date: _____

8/1/08



Stephen S. Tuber

*Assistant Regional Administrator
Office of Partnerships and Regulatory Assistance

** The person holding this title is referred to as the Director throughout the permit and Authorization*

Please be aware that Newfield does not have authorization to begin injection operations into the well until all Prior to Commencing Injection requirements have been submitted and evaluated by the EPA, and has received written authorization from the Director to begin injection. Please note that the Permit limits injection to the gross interval within the Green River Formation between the depths of 3780 feet and the top of the Wasatch Formation estimated to be at 6164 feet.

Prior to receiving authorization to inject, the EPA requires that Newfield submit for review and approval: (1) the results of a **Part 1 (Internal) mechanical integrity test (MIT)**, (2) a **pore pressure** calculation of the injection interval, (3) and a complete **EPA Form No. 7520-12** (Well Rework Record) with a new schematic diagram.

The initial Maximum Allowable Injection Pressure (MAIP) for the Gilsonite 2-32-8-17 was determined to be **1225 psig**. UIC Area Permit UT20633-00000 also provides the opportunity for the permittee to request a change in the MAIP based upon results of a step rate test that demonstrates that the formation breakdown pressure will not be exceeded.

If you have any questions, please call Mr. Bob Near at (303) 312-6278 or 1-(800)-227-8917 (Ext. 312-6278). Please submit the required data to **ATTENTION: Bob Near**, at the letterhead address, citing **MAIL CODE: 8P-W-GW** very prominently.

Sincerely,



Stephen S. Tuber
Assistant Regional Administrator
Office of Partnerships and Regulatory Assistance



Encl: Authorization For Conversion of An Additional Well
EPA Form No. 7520-12 (Well Rework Record). Proposed Wellbore and P&A Wellbore Schematics for Gilsonite State 2-32-8-17.

cc: Letter Only

Curtis Cesspooch, Chairman
Uintah & Ouray Business Committee
Ute Indian Tribe

Irene Cuch, Vice Chairwoman
Uintah & Ouray Business Committee
Ute Indian Tribe

WELL-SPECIFIC REQUIREMENTS

Well Name: Gilsonite State #2-32-8-17
EPA Well ID Number: UT20633-07419

Prior to commencing injection operations, the permittee shall submit the following information and receive written Authority to Inject from the Director:

1. a successful Part I (Internal) Mechanical Integrity test (MIT);
2. pore pressure calculation of the proposed injection zone;
3. completed Well Rework Record EPA Form No. 7520-12 and schematic diagram.

Approved Injection Zone: Injection is approved between the top of the Garden Gulch Member of the Green River Formation [3780 feet (KB)] to the top of the Wasatch Formation, which is estimated to be at a depth of 6164 feet (KB).

Maximum Allowable Injection Pressure (MAIP): The initial MAIP is 1220 psig, based on the following calculation:

$$\text{MAIP} = [\text{FG} - (0.433)(\text{SG})] * \text{D}, \text{ where}$$
$$\text{FG} = 0.729 \text{ psi/ft} \quad \text{SG} = 1.015 \quad \text{D} = \underline{4234 \text{ ft}} \text{ (top perforation depth KB)}$$
$$\text{MAIP} = \underline{1225 \text{ psig}}$$

UIC Area Permit No. UT20633-00000 also provides the opportunity for the permittee to request a change of the MAIP based upon results of a step rate test that demonstrates the formation breakdown pressure will not be exceeded.

Well Construction and Corrective Action: *No Corrective Action is Required* on the Gilsonite State 2-32-8-17 based on review of well construction and cementing records, including CBL, well construction is considered adequate to prevent fluid movement out of the injection zone and into USDWs.

Tubing and Packer: 2-7/8" or similar size injection tubing is approved; the packer shall be set at a depth no more than 100 ft above the top perforation.

Corrective Action for Wells in Area of Review (AOR): The following six wells, that penetrate the confining zone within or proximate to a 1/4 mile radius around the Gilsonite State # 2-32-8-17, were evaluated to determine if any corrective action is necessary to prevent fluid movement into USDW.

Corrective Action Required:

Well: Government #31-2-8-17 SE/SE Sec. 31-T8S-R17E
No cement over the Confining Zone (Est. 3855 feet-3879 feet). TOC 4470 feet.

The geologic equivalent of the uppermost perforation in the Gilsonite State 2-32-8-17 is estimated to be at (4332 feet) in this well. Therefore the permittee is required to workover the Government #31-2-8-17 well and bring the TOC up to a depth of 4035 feet at least and verify the depth with a CBL.

Well: Gilsonite State #12-32-8-17 NW/SW Sec. 32 - T8S - R17E
No cement over the Confining Zone (3776 feet-3812 feet). TOC 3840 feet.

The geologic equivalent of the uppermost perforation in the Gilsonite State 2-32-8-17 is at 4270 feet in the Gilsonite State #12-32-8-17 and therefore does not require workover.

Well: Gilsonite State #14-32-8-17 SE/SW Sec. 32-T8S - R17E
Less than 80% cement bond over the Confining Zone (3764 feet-3790). TOC 600 feet.

The Government #31-2-8-17, Gilsonite State #12-32-8-17 and Gilsonite State #14-32-8-17 wells will be monitored weekly at the surface for evidence of fluid movement out of the Injection Zone.

In addition, Newfield developed a corrective action monitoring program, effective July 10, 2008, entitled "Procedure related to proposed Class II Enhanced Oil Recovery Injection wells determined by the EPA to have specific Area of Review (AOR) wells with inadequate cement across the confining zone."

If possible fluid movement out of the Injection Zone is identified, either through the weekly monitoring, through Newfield's July 10, 2008 procedure described above, or through any other means, (for example, evidence of fluid flow or increased bradenhead annulus pressure readings, tubing-casing annulus pressure readings, or other evidence of a mechanical integrity failure), the Permittee will shut in the Gilsonite State 2-32-8-17 well immediately and notify the Director. No injection into the Gilsonite State 2-32-8-17 well will be permitted until the Permittee has notified the Director that the situation has been resolved, submitted Rework Records (EPA Form No.7520-12) and a schematic diagram, and received authorization from the Director to re-commence injection.

Corrective Action Not Required:

Well: Gilsonite State #13-32-8-17 SW/SW Sec. 32 - T8S - R17E
Well: Gilsonite State #14I-32-8-17 SE/SW/SW Sec. 32 - T8S - R17E
Well: Allen Federal #1-5A-9-17 NW/NW Sec. 5 - T9S - R17E
These wells demonstrate 80% or greater cement bond over the Confining Zone.

Demonstration of Mechanical Integrity: A successful demonstration of Part I (Internal Mechanical Integrity using a standard Casing-Tubing pressure test is required for the Gilsonite State 2-32-8-17 prior to injection and, at least, once every five years thereafter. EPA reviewed the Cement Bond Log and determined the cement will provide an effective barrier to significant upward movement of fluids through vertical channels adjacent to the well bore pursuant to 40 CFR§146.8 (a)(2). Therefore, further demonstration of Part II (External Mechanical Integrity is not required at this time.

Demonstration of Financial Responsibility: The applicant has demonstrated financial responsibility by an Annual Statement that has been approved by the EPA.

Plugging and Abandonment: The well shall be plugged in a manner that isolates the injection zone and prevents movement of fluids into or between USDWs. Tubing, packers, and any downhole apparatus shall be removed. Class A, C, G, and H cements, with additives such as accelerators and retarders that control or enhance cement properties, may be used for plugs; however, volume extending additives and gel cements are not approved for plug use. Plug placement shall be verified by tagging. Plugging gel of at least 9.2 lb/gal shall be placed between all plugs. A minimum 50 ft surface plug shall be set inside and outside of the surface casing to seal pathways for fluid migration into the subsurface. Within sixty (60) days after plugging the owner or operator shall submit Plugging Record (EPA Form 7520-13) to the Director. The Plugging Record must be certified as accurate and complete by the person responsible for the plugging operation. At a minimum, the following plugs are required:

- PLUG NO. 1: Set a cast iron bridge plug (CIBP) no more than 50 ft above the top perforation (4234 feet) with a minimum 20 foot cement plug on top of the CIBP.

- PLUG NO. 2: Squeeze a cement plug on the backside of the 5-1/2" casing across the Trona Zone and the Mahogany Bench between approximately 2908 feet (KB) to 3070 feet (KB). If pre-existing backside cement precludes cement-squeezing this interval then a minimum 162 foot balanced cement plug shall be placed inside the 5-1/2" from approximately 2908 feet to 3070 feet.

- PLUG NO. 3: Squeeze a cement plug on the backside of the 5-1/2" casing across the top of the Green River Formation between approximately 1468 feet (KB) and 1568 feet (KB). If pre-existing backside cement precludes cement-squeezing this interval then a minimum 100 foot plug shall be placed inside the 5-1/2 casing from approximately 1468 feet to 1568 feet.

PLUG NO. 4: Set a Class "G" cement plug within the 5-1/2" casing to 364 feet and up the 5-1/2" x 8-5/8" casing annulus to the surface.

Cut off surface and 5-1/2" casing at least 4 ft below ground level and set P&A marker; submit Sundry Notices and all necessary data as required by the EPA and other regulatory agencies.

Reporting of Noncompliance:

- (a) Anticipated Noncompliance. The operator shall give advance notice to the Director of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements.
- (b) Compliance Schedules. Reports of compliance or noncompliance with, or any progress on, interim and final requirements contained in any compliance schedule of this Permit shall be submitted no later than thirty (30) days following each schedule.
- (c) Written Notice of any noncompliance which may endanger health or the environment shall be reported to the Director within five (5) days of the time the operator becomes aware of the noncompliance. The written notice shall contain a description of the noncompliance and its cause; the period of noncompliance including dates and times; if the noncompliance has not been corrected the anticipated time it is expected to continue; and steps taken or planned to prevent or reduce recurrence of the noncompliance.

Twenty-Four Hour Noncompliance Reporting:

The operator shall report to the Director any noncompliance which may endanger health or environment. Information shall be provided, either orally or by leaving a message, within twenty-four (24) hours from the time the operator becomes aware of the circumstances by telephoning 1.800.227-8917 and asking for the EPA Region 8 UIC Program Compliance and Enforcement Director, or by contacting the Region 8 Emergency Operations Center at 303.293.1788 if calling from outside EPA Region 8. The following information shall be included in the verbal report:

- (a) Any monitoring or other information which indicates that any contaminant may cause an endangerment to a USDW.
- (b) Any noncompliance with a Permit condition or malfunction of the injection system which may cause fluid migration into or between underground sources of drinking water.

Oil Spill and Chemical Release Reporting:

The operator shall comply with all other reporting requirements related to oil spills and chemical releases or other potential impacts to human health or the environment by contacting the **National Response Center (NRC) 1.800.424.8802 or 202.267.2675**, or through the NRC website at **<http://www.nrc.uscg.mil/index.htm>**.

Other Noncompliance:

The operator shall report all other instances of noncompliance not otherwise reported at the time monitoring reports are submitted.

Other Information:

Where the operator becomes aware that he failed to submit any relevant facts in the Permit application, or submitted incorrect information in a Permit application, or in any report to the Director, the operator shall submit such correct facts or information within two (2) weeks of the time such information became known to him.

WELL-SPECIFIC CONSIDERATIONS

Well Name: Gilsonite State # 2-32-8-17
EPA Well ID Number: UT20633-07419

Underground Sources of Drinking Water (USDWs): USDWs in the Gilsonite State Area Permit generally occur within the Uinta Formation. According to "*Base of Moderately Saline Ground Water in the Uinta Basin, Utah, State of Utah Technical Publication No. 92,*" the base of moderately saline ground water may be found at approximately 50 ft below ground surface in the Gilsonite State # 2-32-8-17.

http:NRWRT1.NR.STATE.UT.US:

There are no reservoirs, streams, domestic or agricultural water wells within a quarter (1/4) mile of the well.

Composition of Source, Formation and Injectate water: (Total Dissolved Solids [TDS]):

- TDS of the Douglas Creek Member – Green River Formation Water: 11,680 mg/l.

- TDS of Johnson Reservoir source water: 2899mg/l.

The injectate is water from the Johnson Water District Reservoir blended with produced Green River Formation water resulting in TDS of 8513mg/l.

Confining Zone: The Confining Zone, which directly overlies the Garden Gulch Member of the Green River Formation, is approximately one hundred six (106) feet of shale between the depths of 3674 feet and 3780 feet (KB).

Injection Zone: The Injection Zone at this well location is an approximate 2384 feet of multiple lenticular sand units interbedded with shale, marlstone and limestone from the top of the Garden Gulch Member at 3780 feet (KB) to the top of the Wasatch Formation which is estimated to be at 6164 feet (KB). All formation tops are based on correlations to the Newfield Production Federal #1-26-8-17 (UT20702-04671) Type Log.

Well Construction: The CBL shows 106 feet of 80% or greater cement bond across the confining zone (3674 feet to 3780 feet).

Surface Casing: 8-5/8" casing is set at 314 ft (KB), in a 12-1/4" hole, using 175 sacks Class G cement, circulated to the surface.

Longstring Casing: 5-1/2" casing is set at 5523 ft (KB) in a 7-7/8" ft hole secured with 485 sacks of cement. Total driller depth is 5523 feet. Plugged back total depth is 5470 feet. EPA calculates top of cement at 2379 feet. Estimated CBL top of cement is 2500 feet.

Top of Cement (TOC): 2500 ft (KB).

Perforations: Top perforation: 4234 ft (KB)

Bottom perforation: 5284 feet (KB)

Wells in Area of Review (AOR): Construction and cementing records, including cement bond Logs (CBL), as available, for six (6) wells in the ¼ mile AOR that penetrated the Confining Zone, were reviewed. Three (3) were found to have 80% or greater cement bond over the Confining Zone and three (3) either lacked 80% bonding or had no cement over the Confining Zone. The latter three (3) wells require corrective action.

AOR Wells Not Requiring Corrective Action:

Well: Gilsonite State #13-32-8-17	SW/SW	Sec 32 - T8S - R17E
Well: Gilsonite State #14I-32-8-17	SE/SW/SW	Sec 32 - T8S - R17E
Well: Allen Federal #1-5A-9-17	NW/NW	Sec. 5 - T8S - R 17E

These wells demonstrate 80% or greater cement bond over the Confining Zone.

AOR Wells Requiring Corrective Action:

Well: Gilsonite State #12-32-8-17 NW/SW Sec. 32 - T8S - R17E
No cement over the Confining Zone (3776 feet – 3812 feet). TOC 3840 feet.

Well: Government #31-2-8-17 SE/SE Sec. 31 - T8S - R17E
No cement over the Confining Zone (Est. 3855 feet – 3879 feet). TOC 4470 feet.
Also no cement over the geologic equivalent of the upper perforation in the injection well (Gilsonite State 2-32-8-17) at 4234 feet. A rework is required.

Well: Gilsonite State #14-32-8-17 SE/SW Sec. 32 - T8S - R17E
Less than 80% cement bond over the Confining Zone (3764--3790). TOC 600 feet.

These three (3) wells will be monitored weekly for evidence of injectate movement out of the Injection Zone to the surface.

Gilsonite State #2-32

Spud Date: 12/20/81
 Put on Production: 2/20/82
 GL: 5241' KB: 5258'
SURFACE CASING
 CSG SIZE: 8-5/8"
 GRADE: J-55
 WEIGHT: 24#
 LENGTH: (300')
 DEPTH LANDED: 314'
 HOLE SIZE: 12-1/4"
 CEMENT DATA: 175 #SS

PRODUCTION CASING
 CSG SIZE: 5-1/2"
 GRADE: J-55
 WEIGHT: 15.5#
 LENGTH: (5527')
 HOLE SIZE: 7-7/8"
 CEMENT DATA: 485 #SS/50 Poz mixed
 CEMENT TOP AT: 2500'

TUBING

SIZE/GRADE/WT.: 2-7/8" / J-55 / 6.5#
 NO. OF JOINTS: 165 jts (5200.92')
 TUBING ANCHOR: 5217.92' KB
 NO. OF JOINTS: 1 jts (30.04')
 SEATING NIPPLE: 2-7/8"
 SN LANDED AT: 5250.76' KB
 NO. OF JOINTS: 1 jts (32.30')
 TOTAL STRING LENGTH: EOT @ 5284.61' W/17' KB

SUCKER RODS

POLISHED ROD: 1-1/2" x 22' SM
 SUCKER RODS: 5- 1-1/2" weight bars, 25-3/4" tempered rods(all new); 81-3/4" plain rods; 97-3/4" tempered rods; 1-6', 1-2' x 3/4" pony rods.
 PUMP SIZE: 2-1/2" x 1-1/2" x 16' RHAC Pump W/SM plunger
 STROKE LENGTH: 54"
 PUMP SPEED, SPM: 6

Wellbore Diagram

Base USDW < 50'

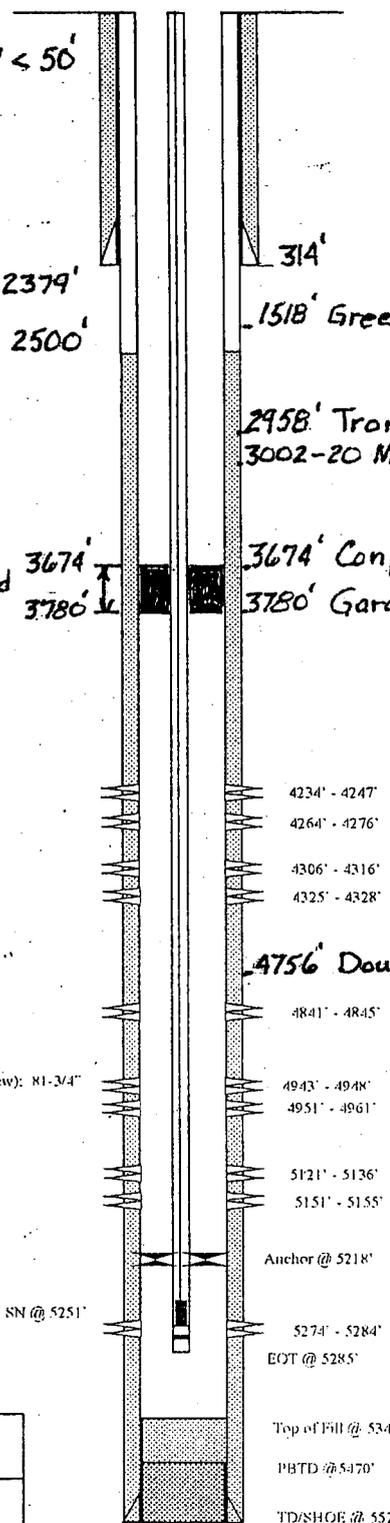
TOC/EPA 2379'
 TOC 2500'

80% Cement Bond
 3674'
 3786'

3674' Confining Zone
 3780' Garden Gulch

2958' Trona
 3002-20 Mahogany Bench

4756' Douglas Creek



FRAC JOB

2-2-82 Frac All zones as follows:
 Stage 1: 12,000gal, 30,000# 20/40 sd Avg TP 2,800 @ 30 BPM Stage 2: 17,500 gal, 30,000# 20/40 sd Avg TP 3,200 @ 30 BPM Stage 3: 14,000 gal, 25,000# 20/40 sd Avg TP 3,400 @ 30 BPM.
 3-22-85 Frac GB-4 zone as follows:
 Totals 25,000 gal, 70,000# 20/40 sd 20,000# 12/20 sd Max TP 2,900 @ 30 BPM Avg TP 2,400 @ 30 BPM ISIP 2,200, after 5 min. 2,020.
 1/23/03 Pump Change. Update rod and tubing details.
 6/23/03 4841'-4845' Frac D2 sands as follows:
 19,069# 20/40 sand in 176 bbls Viking I-25 fluid. Treated @ avg press of 3188 psi w/avg rate of 14.4 BPM. ISIP 1930 psi. Calc flush: 1246 gal. Actual flush: 1176 gal.
 6/23/03 4306'-4328' Frac GB6 sands as follows:
 30,604# 20/40 sand in 259 bbls Viking I-25 fluid. Treated @ avg press of 2856 psi w/avg rate of 11.8 BPM. ISIP 2015 psi. Calc flush: 1092 gal. Actual flush: 1008 gal.
 11/3/05 Parted rods. Update rod and tubing details.

PERFORATION RECORD

Date	Depth Range	Tool	Holes
1/31/82	5274' - 5284'	4JSPF	10 holes
1/31/82	5151' - 5155'	4JSPF	4 holes
1/31/82	5123' - 5135'	4JSPF	12 holes
1/31/82	4951' - 4961'	4JSPF	10 holes
1/31/82	4943' - 4948'	4JSPF	5 holes
3/20/85	4264' - 4276'	4JSPF	6 holes
3/20/85	4234' - 4247'	4JSPF	6 holes
1/16/96	5274' - 5284'	4JSPF	40 holes reperf
1/16/96	5121' - 5136'	4JSPF	56 holes reperf
1/16/96	4951' - 4961'	4JSPF	40 holes reperf
1/16/96	4943' - 4948'	4JSPF	20 holes reperf
1/16/96	4264' - 4274'	4JSPF	40 holes reperf
1/16/96	4234' - 4247'	4JSPF	48 holes reperf
6/23/03	4841' - 4845'	4JSPF	16 holes
6/23/03	4325' - 4328'	4JSPF	12 holes
6/23/03	4306' - 4316'	4JSPF	40 holes

NEWFIELD

Gilsonite State 2-32
 517 FSL & 686 FWL
 SWSW Section 32 - T8S-R17E
 Duchesne Co, Utah
 API #43-013-30604; Lease #ML-22060

Est. Castle Peak 5606
 Est. Basal Carb. 6039
 Est. Wasatch 6164

Gilsonite State #2-32

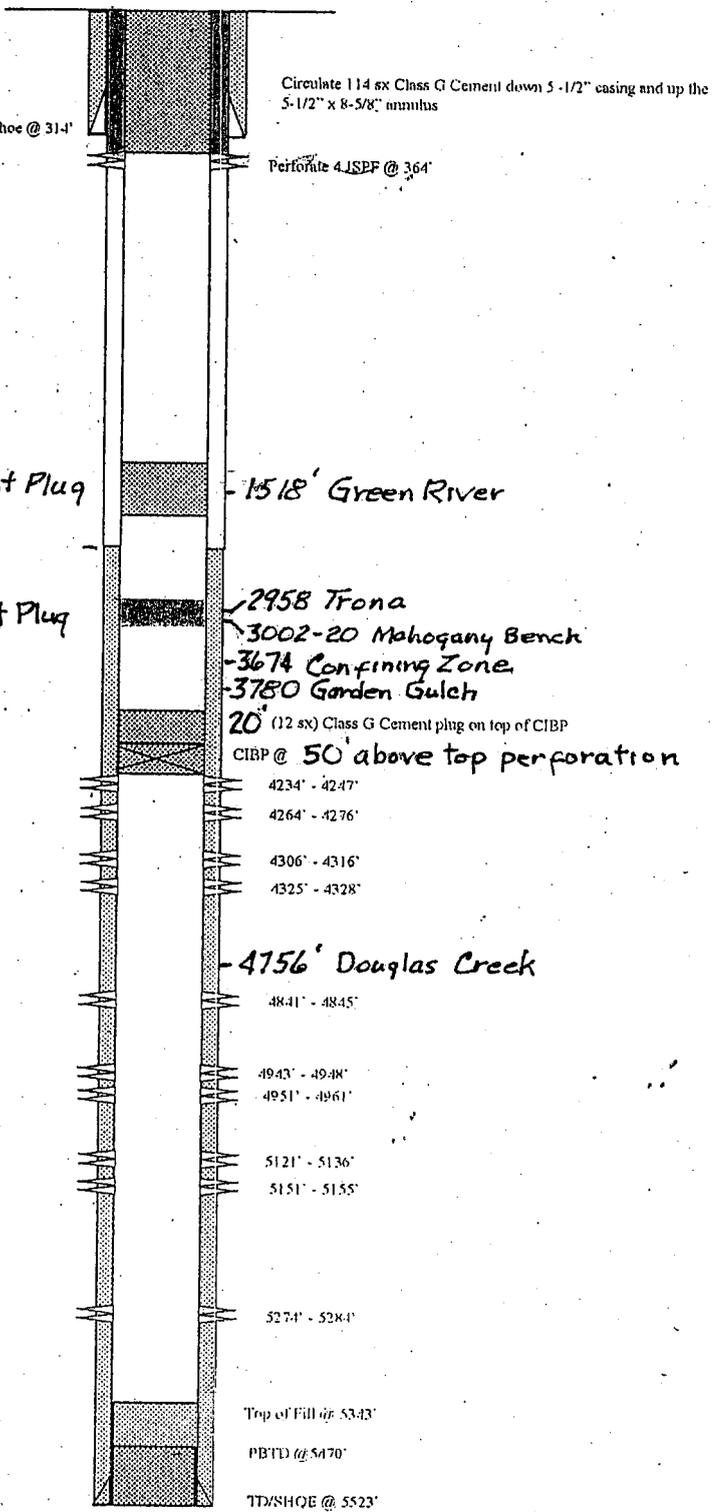
Spud Date: 12/20/81
 Put on Production: 2/20/82
 GL: 5241' KB: 5258'
SURFACE CASING
 CSG SIZE: 8-5/8"
 GRADE: J-55
 WEIGHT: 24#
 LENGTH: (300')
 DEPTH LANDED: 314'
 HOLE SIZE: 12-1/4"
 CEMENT DATA: 175 sxs

PRODUCTION CASING
 CSG SIZE: 5-1/2"
 GRADE: J-55
 WEIGHT: 15.5#
 LENGTH: (5527')
 HOLE SIZE: 7-7/8"
 CEMENT DATA: 485 sxs 50/50 Prox mixed
 CEMENT TOP AT: 2500'

Proposed P & A Wellbore Diagram

Base USDW < 50'

1468-1568 Cement Plug
 TOC 2500'
 TOC/EPA 2379'
 2908-3070' Cement Plug



NEWFIELD

Gilsonite State 2-32
 517 FSL & 686 FWL
 SWSW Section 32 - TRS-R17E
 Duchesne Co, Utah
 API #43-013-30604; Lease #ML-22060

Est. Castle Peak 5606'
 Est. Basal Carb. 6039'
 Est. Wasatch 6164'

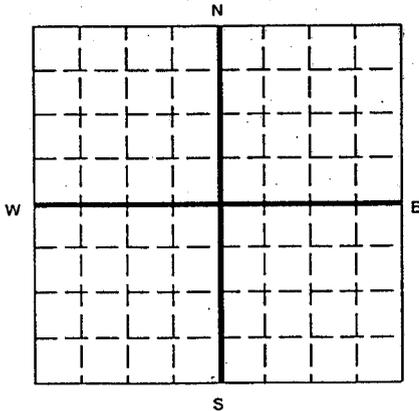


United States Environmental Protection Agency
Washington, DC 20460

WELL REWORK RECORD

Name and Address of Permittee	Name and Address of Contractor
-------------------------------	--------------------------------

Locate Well and Outline Unit on Section Plat - 640 Acres



State	County	Permit Number
Surface Location Description <input type="text"/> 1/4 of <input type="text"/> 1/4 of <input type="text"/> 1/4 of <input type="text"/> 1/4 of Section <input type="text"/> Township <input type="text"/> Range <input type="text"/>		
Locate well in two directions from nearest lines of quarter section and drilling unit		
Surface Location <input type="text"/> ft. frm (N/S) <input type="text"/> Line of quarter section and <input type="text"/> ft. from (E/W) <input type="text"/> Line of quarter section.		
WELL ACTIVITY <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage Lease Name <input type="text"/>	Total Depth Before Rework <input type="text"/> Total Depth After Rework <input type="text"/> Date Rework Commenced <input type="text"/> Date Rework Completed <input type="text"/>	TYPE OF PERMIT <input type="checkbox"/> Individual <input type="checkbox"/> Area Number of Wells <input type="text"/> Well Number <input type="text"/>

WELL CASING RECORD -- BEFORE REWORK

Casing		Cement		Perforations		Acid or Fracture Treatment Record
Size	Depth	Sacks	Type	From	To	

WELL CASING RECORD -- AFTER REWORK (Indicate Additions and Changes Only)

Casing		Cement		Perforations		Acid or Fracture Treatment Record
Size	Depth	Sacks	Type	From	To	

DESCRIBE REWORK OPERATIONS IN DETAIL
USE ADDITIONAL SHEETS IF NECESSARY

WIRE LINE LOGS, LIST EACH TYPE

Log Types	Logged Intervals

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)	Signature	Date Signed
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PAPERWORK REDUCTION ACT

The public reporting and record keeping burden for this collection of information is estimated to average 4 hours per response annually. Burden means the total time, effort, or financial resource expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal Agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to the collection of information; search data sources; complete and review the collection of information; and, transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including the use of automated collection techniques to Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW., Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed forms to this address.



RE: Procedure related to proposed Class II Enhanced Oil Recovery Injection Wells determined by the EPA to have specific Area of Review (AOR) wells with inadequate cement across the confining zone

Effective July 10, 2008 Newfield Production Company will implement the following procedure to address concerns related to protection of Underground Sources of Drinking Water (USDW) in AOR wells where the interval of cement bond index across the confining zone behind pipe has been determined to be inadequate. The procedure is intended to meet the corrective action requirements found in the UIC Class II permit, as well as provide data that could be used to detect and prevent fluid movement out of the proposed injection zone.

- 1) Establish baseline production casing by surface casing annulus pressures prior to water injection in subject well with a calibrated gauge.
- 2) Record the baseline pressure, report findings to Newfield engineering group and keep on file so it is available upon request
- 3) Place injection well in service. Run packer integrity and radioactive tracer logs to verify wellbore integrity and determine zones taking water.
- 4) Construct a geologic cross section showing zones taking water and their geologic equivalent zones in the AOR wells.
- 5) Submit a report of the packer integrity log, radioactive tracer log, and geologic cross section to to the Newfield engineering staff for review and keep on file so it is available upon request
- 6) Weekly observations of the site will be made by Newfield during normal well operating activities. Any surface discharge of fluids will be reported immediately.
- 7) After injection well is placed in service, weekly observations of annulus pressure will be made and compared to baseline pressure and will be recorded once monthly. The recorded pressure information will be kept on file and be available upon request.
- 8) If pressure increases by more than 10% above baseline at any time in an AOR well with insufficient cement bond, Newfield will run a temperature survey log in subject well. This log, in concert with the geologic crossection, will enable the determination of water movement in the open hole by production casing annulus through a shift in geothermal gradient.
- 9) If water movement is determined in annulus, Newfield will shut in the injection well and repair the production casing by open hole annulus or leave the injection well out of service.

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

5. LEASE DESIGNATION AND SERIAL NUMBER:
UTAH STATE ML-22060

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT or CA AGREEMENT NAME:
GILSONITE UNIT

1. TYPE OF WELL: OIL WELL GAS WELL OTHER

8. WELL NAME and NUMBER:
GILSONITE ST 2-32

2. NAME OF OPERATOR:
NEWFIELD PRODUCTION COMPANY

9. API NUMBER:
4301330604

3. ADDRESS OF OPERATOR: PHONE NUMBER
Route 3 Box 3630 CITY Myton STATE UT ZIP 84052 435.646.3721

10. FIELD AND POOL, OR WILDCAT:
MONUMENT BUTTE

4. LOCATION OF WELL:
FOOTAGES AT SURFACE: 517 FSL 686 FWL

COUNTY: DUCHESNE

OTR/OTR. SECTION. TOWNSHIP. RANGE. MERIDIAN: SWSW, 32, T8S, R17E

STATE: UT

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 _____	<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 checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of Work Completion: 11/04/2008	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input 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 FLAIR
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input checked="" type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/STOP)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: - Injection Conversion
	<input checked="" 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.

On 11/5/08 Margo Smith with the EPA was contacted concerning the initial MIT on the above listed well. Permission was given at that time to perform the test on 11/11/08. On 11/11/08 the csg was pressured up to 1260 psig and charted for 30 minutes with no pressure loss. The well was not injecting during the test. The tbg pressure was 0 psig during the test. There was not an EPA representative available to witness the test.

EPA# UT20633-07419

API# 43-013-30604

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

NAME (PLEASE PRINT) Callie Duncan

TITLE Production Clerk

SIGNATURE *Callie Probst*

DATE 11/13/2008

(This space for State use only)

RECEIVED
NOV 18 2008
DIV. OF OIL, GAS & MINING

Mechanical Integrity Test

Casing or Annulus Pressure Mechanical Integrity Test

U.S. Environmental Protection Agency
Underground Injection Control Program
999 18th Street, Suite 500 Denver, CO 80202-2466

EPA Witness: _____ Date: 11 / 11 / 2009
 Test conducted by: Ted Whitehead
 Others present: _____

Well Name: <u>G52-32-8-17</u>	Type: ER SWD	Status: AC TA UC
Field: <u>MONUMENT BUTTE</u>		
Location: <u>SW15W</u>	Sec: <u>32</u>	T <u>8</u> N <u>10</u> R <u>17</u> (E) / W
County: <u>Duchesne</u>		State: <u>UT</u>
Operator: <u>Newfield Exploration</u>		
Last MIT: <u> </u> / <u> </u> / <u> </u>	Maximum Allowable Pressure: _____	PSIG

Is this a regularly scheduled test? Yes No
 Initial test for permit? Yes No
 Test after well rework? Yes No
 Well injecting during test? Yes No If Yes, rate: _____ bpd

Pre-test casing/tubing annulus pressure: 0 psig

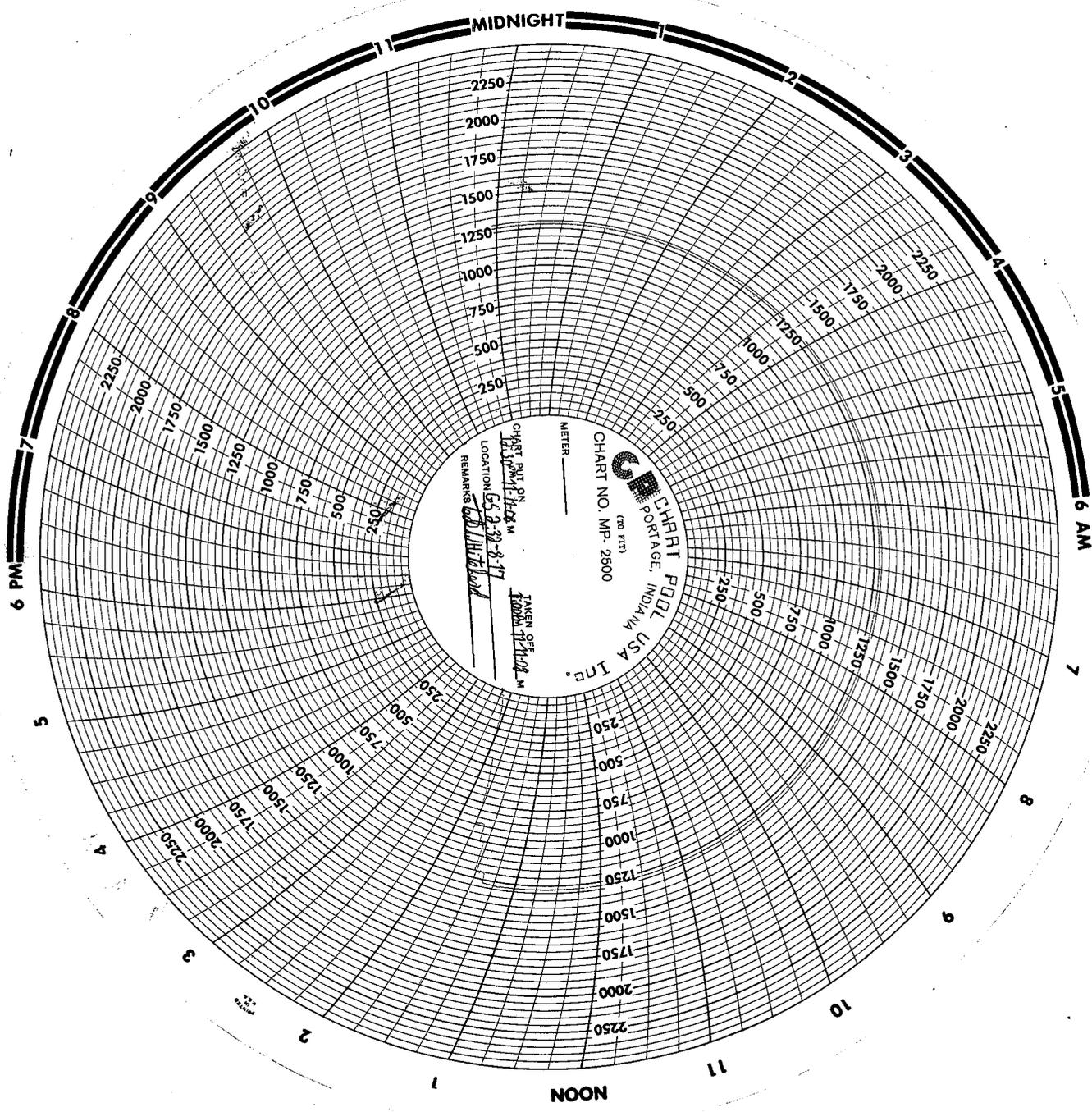
MIT DATA TABLE	Test #1	Test #2	Test #3
TUBING PRESSURE			
Initial Pressure	<u>0</u> psig	psig	psig
End of test pressure	<u>0</u> psig	psig	psig
CASING / TUBING ANNULUS PRESSURE			
0 minutes	<u>1260</u> psig	psig	psig
5 minutes	<u>1260</u> psig	psig	psig
10 minutes	<u>1260</u> psig	psig	psig
15 minutes	<u>1260</u> psig	psig	psig
20 minutes	<u>1260</u> psig	psig	psig
25 minutes	<u>1260</u> psig	psig	psig
30 minutes	<u>1260</u> psig	psig	psig
_____ minutes	psig	psig	psig
_____ minutes	psig	psig	psig
RESULT	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Does the annulus pressure build back up after the test? Yes No

MECHANICAL INTEGRITY PRESSURE TEST

Additional comments for mechanical integrity pressure test, such as volume of fluid added to annulus and bled back at end of test, reason for failing test (casing head leak, tubing leak, other), etc.:

Signature of Witness: _____



GILSONITE 2-32-8-17**9/1/2008 To 1/30/2009****11/1/2008 Day: 1****Conversion**

Western #2 on 10/31/2008 - MIRU Western #2. RU HO trk to annulus & pump 70 BW @ 250°F. RD pumping unit & unseat rod pump. Flush tbg & rods W/ 40 BW @ 250°F. Re-seat pump, soft joint rod string & strip off flow-T. Fill tbg W/ 3 BW & pressure up on tbg. Blew hole @ 2100 psi. Retrieve rod string & unseat pump. TOH and LD rod string & pump. Re-flushed rods W/ 30 add'l BW on TOH. SIFN.

11/4/2008 Day: 2**Conversion**

Western #2 on 11/3/2008 - ND wellhead & release TA @ 5218'. NU BOP. TOH & talley production tbg. Break each connection, clean & inspect pins and apply Liquid O-ring to pins. LD BHA & btm 35 jts tbg. Found split in jt #163. Re-flushed tbg W/ 60 BW on TOH. MU & TIH W/ injection string as follows: new Weatherford 5 1/2" Arrowset 1-X pkr (W/ W.L. re-entry guide & hardened steel slips), new 2 7/8 SN & 132 jts 2 7/8 8rd 6.5# J-55 tbg. Pressure test tbg as RIH in 3 increments. Final test of 3000 psi leaking off slowly. Re-pressure tbg to 3000 psi & leave on overnight.

11/5/2008 Day: 3**Conversion**

Western #2 on 11/4/2008 - Tbg pressure @ 2500 psi. RU HO trk & bump to 3000 psi. Held solid for 30 minutes. RIH W/ overshot on sdline. Latch onto & pull standing valve. ND BOP & land tbg on flange. Mix 15 gals Multi-Chem C-6031 & 5 gals B-8625 in 70 bbls fresh wtr. RU HO trk & pump dn annulus @ 90°F. PU on tbg & set pkr W/ SN @ 4179', CE @ 4184' & EOT @ 4188'. Land tbg W/ 15,000# tension. NU wellhead. Pressure test casing & pkr to 1400 psi. Holds solid for 1 hour. Leave pressure on well. RDMOSU. Well ready for MIT.

11/13/2008 Day: 4**Conversion**

Rigless on 11/12/2008 - On 11/5/08 Margo Smith with the EPA was contacted concerning the initial MIT on the above listed well (Gilsonite 2-32-8-17). Permission was given at that time to perform the test on 11/11/08. On 11/11/08 the csg was pressured up to 1260 psig and charted for 30 minutes with no pressure loss. The well was not injecting during the test. The tbg pressure was 0 psig during the test. There was not an EPA representative available to witness the test. EPA# UT20633-07419 API# 43-013-30604

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUBMIT IN TRIPLICATE - Other Instructions on page 2

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

NEWFIELD PRODUCTION COMPANY

3a. Address

Route 3 Box 3630
Myton, UT 84052

3b. Phone (include are code)

435.646.3721

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

517 FSL 686 FWL

SWSW Section 32 T8S R17E

5. Lease Serial No.

UTAH STATE ML-22060

6. If Indian, Allottee or Tribe Name.

7. If Unit or CA/Agreement, Name and/or

GILSONITE UNIT

8. Well Name and No.

GILSONITE ST 2-32

9. API Well No.

4301330604

10. Field and Pool, or Exploratory Area

MONUMENT BUTTE

11. County or Parish, State

DUCHESNE, UT

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug & Abandon	<input type="checkbox"/> Temporarily Abandon	Change status put well on injection
	<input checked="" type="checkbox"/> Convert to Injector	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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

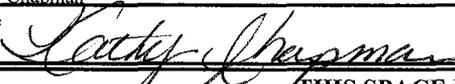
The above reference well was put on injection at 9:30am on 2-19-09.

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

I hereby certify that the foregoing is true and correct (Printed/ Typed)

Kathy Chapman

Signature



Title

Office Manager

Date

02/20/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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

Title

Date

Office

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

(Instructions on page 2)

RECEIVED

FEB 24 2009

DIV. OF OIL, GAS & MINING

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-22060
SUNDRY NOTICES AND REPORTS ON WELLS		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
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: GMBU (GRRV)
1. TYPE OF WELL Water Injection Well		8. WELL NAME and NUMBER: GILSONITE ST 2-32
2. NAME OF OPERATOR: NEWFIELD PRODUCTION COMPANY		9. API NUMBER: 43013306040000
3. ADDRESS OF OPERATOR: Rt 3 Box 3630 , Myton, UT, 84052	PHONE NUMBER: 435 646-4825 Ext	9. FIELD and POOL or WILDCAT: MONUMENT BUTTE
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0517 FSL 0686 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SWSW Section: 32 Township: 08.0S Range: 17.0E Meridian: S		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 Approximate date work will start: <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/16/2013 <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 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 checked="" type="checkbox"/> OTHER	
		<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="5 YR MIT"/>
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.		
5 YR MIT performed on the above listed well. On 1/16/2013 the casing was pressured up to 1720 psig and charted for 30 minutes with no pressure loss. The well was not injecting during the test. The tbq pressure was 1161 psig during the test. There was not an EPA representative available to witness the test. EPA #UT22197-07419		Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY October 24, 2013
NAME (PLEASE PRINT) Lucy Chavez-Naupoto	PHONE NUMBER 435 646-4874	TITLE Water Services Technician
SIGNATURE N/A		DATE 10/21/2013

Mechanical Integrity Test

Casing or Annulus Pressure Mechanical Integrity Test

U.S. Environmental Protection Agency
Underground Injection Control Program
999 18th Street, Suite 500 Denver, CO 80202-2466

EPA Witness: _____ Date: 10/16/2013
 Test conducted by: Don Trane
 Others present: _____

Well Name: <u>Galena 2-32-817</u>	Type: ER SWD	Status: AC TA UC	-07419
Field: <u>Mon. Butte</u>			
Location: <u>2</u> Sec: <u>32</u> T: <u>R</u> N: <u>(S)</u> R: <u>17E</u> W	County: <u>Duchesne</u>	State: <u>UT</u>	
Operator: <u>Don Trane</u>			
Last MIT: <u>1</u>	Maximum Allowable Pressure: _____	PSIG	

Is this a regularly scheduled test? Yes No
 Initial test for permit? Yes No
 Test after well rework? Yes No
 Well injecting during test? Yes No If Yes, rate: _____ bpd

Pre-test casing/tubing annulus pressure: _____ psig

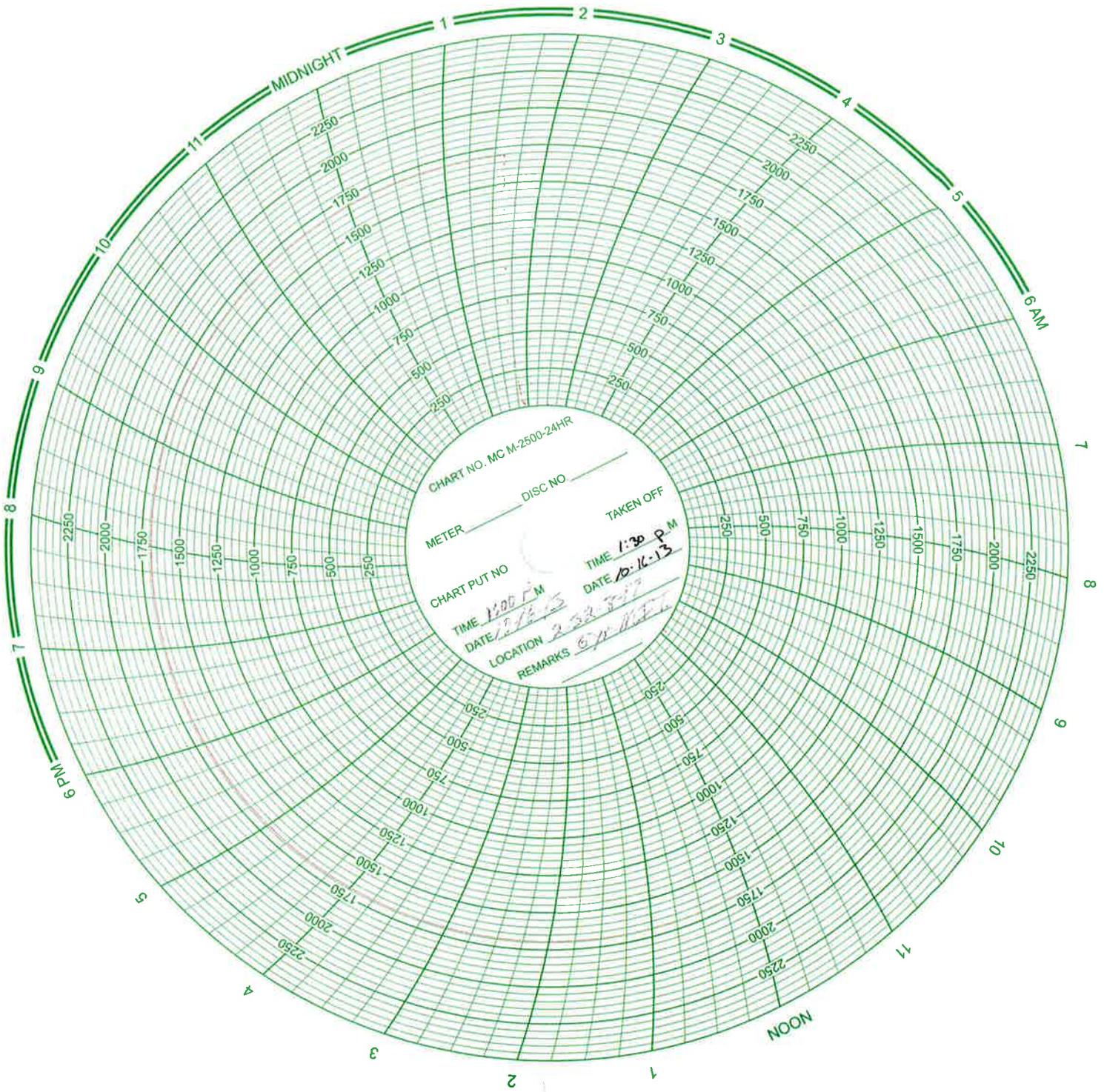
MIT DATA TABLE	Test #1	Test #2	Test #3
TUBING PRESSURE			
Initial Pressure	<u>1181</u> psig	psig	psig
End of test pressure	<u>1161</u> psig	psig	psig
CASING / TUBING ANNULUS PRESSURE			
0 minutes	<u>1720</u> psig	psig	psig
5 minutes	<u>1720</u> psig	psig	psig
10 minutes	<u>1720</u> psig	psig	psig
15 minutes	<u>1720</u> psig	psig	psig
20 minutes	<u>1720</u> psig	psig	psig
25 minutes	<u>1720</u> psig	psig	psig
30 minutes	<u>1720</u> psig	psig	psig
_____ minutes	psig	psig	psig
_____ minutes	psig	psig	psig
RESULT	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Does the annulus pressure build back up after the test? Yes No

MECHANICAL INTEGRITY PRESSURE TEST

Additional comments for mechanical integrity pressure test, such as volume of fluid added to annulus and bled back at end of test, reason for failing test (casing head leak, tubing leak, other), etc.:

Signature of Witness: _____



NEWFIELD



Schematic

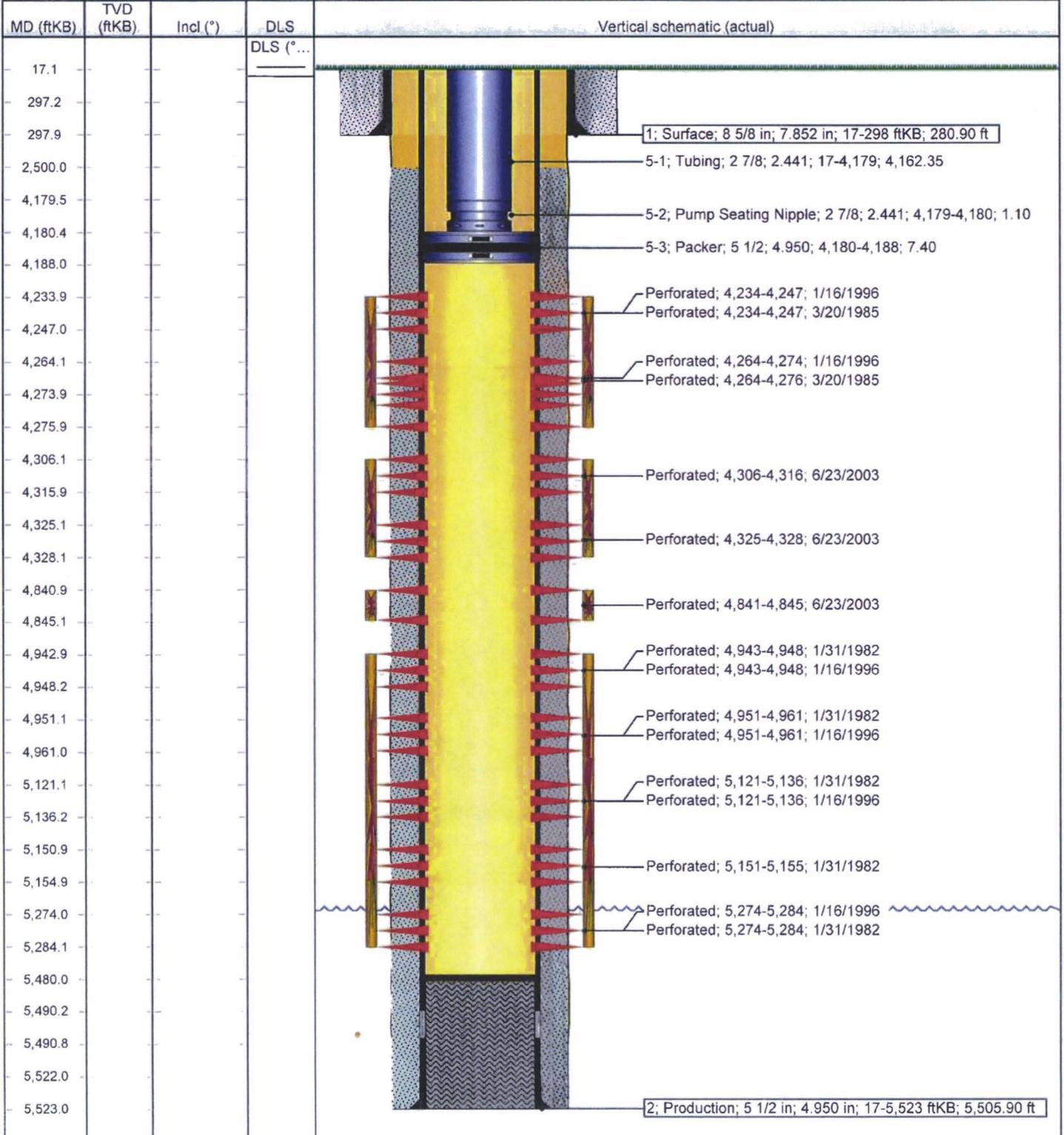
Well Name: **Gilsonite 2-32-8-17**

43-013-30604

Surface Legal Location 32-8S-17E		API/UWI 43013306040000	Well RC 500151048	Lease	State/Province Utah	Field Name GMBU CTB7	County Duchesne
Spud Date	Rig Release Date	On Production Date 2/20/1982	Original KB Elevation (ft) 5,258	Ground Elevation (ft) 5,241	Total Depth All (TVD) (ftKB)	PBDT (All) (ftKB) Original Hole - 5,480.1	

Most Recent Job				
Job Category Production / Workover	Primary Job Type Conversion	Secondary Job Type Basic	Job Start Date 10/31/2008	Job End Date 11/11/2008

TD: 5,523.0 Vertical - Original Hole, 9/15/2015 7:16:00 AM



NEWFIELD



Newfield Wellbore Diagram Data Gilsonite 2-32-8-17

Surface Legal Location 32-8S-17E		API/UWI 43013306040000		Lease	
County Duchesne		State/Province Utah		Basin	
Well Start Date 12/20/1981		Spud Date		Final Rig Release Date	
Original KB Elevation (ft) 5,258		Ground Elevation (ft) 5,241		Total Depth (ftKB) 5,523.0	
				Total Depth All (TVD) (ftKB) Original Hole - 5,480.1	

Casing Strings

Csg Des	Run Date	OD (in)	ID (in)	Wt/Len (lb/ft)	Grade	Set Depth (ftKB)
Surface	12/20/1981	8 5/8	7 852		J-55	298
Production	12/27/1981	5 1/2	4 950	15.50	J-55	5,523

Cement

String: Surface, 298ftKB 12/21/1981

Cementing Company	Top Depth (ftKB) 17.0	Bottom Depth (ftKB) 298.0	Full Return?	Vol Cement Ret (bbl)
Fluid Description	Fluid Type Lead	Amount (sacks) 175	Class G	Estimated Top (ftKB) 17.0

String: Production, 5,523ftKB 12/27/1981

Cementing Company	Top Depth (ftKB) 2,500.0	Bottom Depth (ftKB) 5,523.0	Full Return?	Vol Cement Ret (bbl)
Fluid Description	Fluid Type Lead	Amount (sacks) 200	Class Premlite	Estimated Top (ftKB) 2,500.0
Fluid Description	Fluid Type Tail	Amount (sacks) 285	Class 50/50 poz	Estimated Top (ftKB) 3,500.0

Tubing Strings

Tubing Description		Run Date			Set Depth (ftKB)			
Tubing		10/31/2008			4,187.9			
Item Des	Jts	OD (in)	ID (in)	Wt (lb/ft)	Grade	Len (ft)	Top (ftKB)	Btm (ftKB)
Tubing	132	2 7/8	2.441	6.50	J-55	4,162.35	17.0	4,179.4
Pump Seating Nipple	1	2 7/8	2.441			1.10	4,179.4	4,180.5
Packer	1	5 1/2	4.950			7.40	4,180.5	4,187.9

Rod Strings

Rod Description		Run Date			Set Depth (ftKB)		
Item Des	Jts	OD (in)	Wt (lb/ft)	Grade	Len (ft)	Top (ftKB)	Btm (ftKB)

Perforation Intervals

Stage#	Zone	Top (ftKB)	Btm (ftKB)	Shot Dens (shots/ft)	Phasing (")	Nom Hole Dia (in)	Date
2	GB, Original Hole	4,234	4,247	4			3/20/1985
3	reperf, Original Hole	4,234	4,247	4			1/16/1996
3	reperf, Original Hole	4,264	4,274	4			1/16/1996
2	GB, Original Hole	4,264	4,276	4			3/20/1985
5	GB6, Original Hole	4,306	4,316	4			6/23/2003
5	GB6, Original Hole	4,325	4,328	4			6/23/2003
4	D2, Original Hole	4,841	4,845	4			6/23/2003
3	reperf, Original Hole	4,943	4,948	4			1/16/1996
1	C, Original Hole	4,943	4,948	4			1/31/1982
3	reperf, Original Hole	4,951	4,961	4			1/16/1996
1	C, Original Hole	4,951	4,961	4			1/31/1982
1	B, Original Hole	5,121	5,136	4			1/31/1982
3	reperf, Original Hole	5,121	5,136	4			1/16/1996
1	BLS, Original Hole	5,151	5,155	4			1/31/1982
1	A, Original Hole	5,274	5,284	4			1/31/1982
3	reperf, Original Hole	5,274	5,284	4			1/16/1996

Stimulations & Treatments

Stage#	ISIP (psi)	Frac Gradient (psi/ft)	Max Rate (bbl/min)	Max PSI (psi)	Total Clean Vol (bbl)	Total Slurry Vol (bbl)	Vol Recov (bbl)
1			30.0				
2			30.0	2,900			
3	1,930		14.4				
4	2,015		11.8				

Proppant

Stage#	Total Prop Vol Pumped (b)	Total Add Amount
1		Proppant Sand 85000 lb
2		Proppant Sand 90000 lb



Proppant		
Stage#	Total Prop Vol Pumped (lb)	Total Add Amount
3		Proppant Sand 19069 lb
4		Proppant Sand 30604 lb

