

Open well • Buckle #1 • (16' NE)

Put back on production, June, '76

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

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

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

**N. 23174 & 23532**

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR</p> <p>3. ADDRESS OF OPERATOR <b>Della A. Cook</b></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>Woodsida, Utah 84544</b> <b>1632' FWL and 1919 FE1 (16' NE Duchess # 1)</b> <b>Sec. 2, T 20 S, R 24 E, SLBAM</b></p> <p>14. PERMIT NO.</p>	<p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <b>Duchess</b></p> <p>9. WELL NO. <b>1 A</b></p> <p>10. FIELD AND POOL, OR WILDCAT <b>Wildcat</b></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 2, T 20 S, R 24 E SLBAM</b></p> <p>12. COUNTY OR PARISH <b>Grand</b> 13. STATE <b>Utah</b></p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>4526' GR</b></p>	

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

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

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

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

**Spudded in 10/4 Dakota topped 998', small amount of water, no returns on air 1024', changed to mud. Morrison topped 1138'. Oil show 133-1145, amber oil. At 1290-1295 slight oil show. Hole bottomed 1338 in oil sand. Ran Schlumberger electric induction log. Set 4 1/2" 111lb. pipe 1326 1/2'. Drilled out plug, set pump, ran pipe to tanks. Preparing to test, 10/29**

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

SIGNED *Della A. Cook* TITLE Operator DATE 11/13/70

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

M. 23174 & 23532

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

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Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Delila A. Cook		8. FARM OR LEASE NAME Duchess
3. ADDRESS OF OPERATOR Woodside, Utah 84544		9. WELL NO. 1 A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <del>16321 FNL and 1919 FBI</del> (16' NE Duchess # 1) 15916 17916 FNL: 2314 FEL NE NE		10. FIELD AND POOL, OR WILDCAT Wildcat
14. PERMIT NO.		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 2, T 20 S, R 24 E, SLB&M
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4586' GR		12. COUNTY OR PARISH Grand
		13. STATE Utah

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

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

(Other) Offset to Duchess # 1

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

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

Spudded in 10/4 Dakota topped 998', small amount of water, no return on air 1024', changed to mud. Morrison topped 1138'. Cil show 133-1145, enter oil. At 1290-1295 slight oil show. Hole bottomed 1338 in oil sand. Ran Schlumberger electric induction log. Set 4 1/2" 11lb. pipe 1326 1/2'. Drilled out plug, set pump, ran pipe to tanks. Preparing to test, 10/29

43-019-30065

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

SIGNED Delila A. Cook TITLE Operator DATE 11/13/70

(This space for Federal or State office use)

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

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

ML 23174 & 23532

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Delila A. Cook		8. FARM OR LEASE NAME Duchess
3. ADDRESS OF OPERATOR Woodside, Utah 84544		9. WELL NO. F A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1632' FNL and 1919 FEL (16' NE Duchess # 1) Sec. 2, T 20 S, R 24 E, SLB&M		10. FIELD AND POOL, OR WILDCAT Wildcat
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4586' GR	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 2, T 20 S, R 24 E
		12. COUNTY OR PARISH Grand
		13. STATE Utah

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

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

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

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

In an attempt to increase production of this well, the decision was made to shoot 10' (1234'-1244') and 10' (1313'-1323') using four shots per foot perforation. Encountered considerable water in upper zone, small amount of oil. It was necessary to shut off, using cast iron packer at 1250'. Cemented squeeze job on perforations, 20 sacks cement, 2000# pressure. Let set 48 hours, drilled out cast iron plug. attempting to complete same as before. No increase in oil productions.

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

SIGNED Delila A. Cook TITLE Owner DATE 12/10/70

(This space for Federal or State office use)

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

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

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R155.5

5. LEASE DESIGNATION AND SERIAL NO.  
ML 23174 & 23532

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Duchess

9. WELL NO.  
1 A

10. FIELD AND POOL, OR WILDCAT  
Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA  
Sec. 2, T 20 S, R 24 E.

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG \***

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

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

2. NAME OF OPERATOR  
Delila A. Cook

3. ADDRESS OF OPERATOR  
Woodside, Utah 84544

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 1632 FML and 1919 FEL (16' NE Duchess #1)  
Sec. 2, T 20 S, R 24 E, SLE&M  
At top prod. interval reported below Same  
At total depth Same

14. PERMIT NO. \_\_\_\_\_ DATE ISSUED \_\_\_\_\_

12. COUNTY OR PARISH Grand STATE Utah

15. DATE SPUDDED 10/4/70 16. DATE T.D. REACHED 10/16/70 17. DATE COMPL. (Ready to prod.) Dec. 3 18. ELEVATIONS (DF, REB, ET, OR, ETC.)\* 4595' Gr 19. ELEV. CASINGHEAD Same

20. TOTAL DEPTH, MD & TVD 1338 21. PLUG, BACK T.D., MD & TVD None 22. IF MULTIPLE COMPL., HOW MANY\* None 23. INTERVALS DRILLED BY → ROTARY TOOLS X CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 1326' to 1332' Buckhorn 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN Electric Induction Schlumberger 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
7" surface		95.6	9"	16 sks cement	None
4"	11	1326	6"	40 sks	None

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	1308.9	None

31. PERFORATION RECORD (Interval, size and number)

1234 - 1244 1/4 in. 4 shots per foot  
1313 - 1323 1/4 in. 4 shots per foot

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1234-144	Cement squeeze with 20 sks. cement

33.\* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
11/7	pumping	partially shut in, part the

DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
11/7	24 hrs.	none	→	5 1/2	small amt.	none	unknown

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

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) None TEST WITNESSED BY Estel Avery

35. LIST OF ATTACHMENTS  
Pump Jack and Motor

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

SIGNED Delila A. Cook TITLE Owner DATE 12/10/70

\*(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		38. GEOLOGIC MARKERS					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
MANCOS	0	770'	SHALE				
FERRON	770'	998	FINE BROWN SANDSTONE, INTER- bedded with shale	Dakota	998		
DAKOTA	998	1124	WHITE GREY SAND. SHALE				
cedarMITH	1124	1315	Mixed Shale				
Buckhorn	1315	1338	WHITE FINE SAND AND SMALL AMT CONGLOMERATES Asphaltic Flecks in CONGLOMERATES				

DEC 3 1961

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

1588 WEST NORTH TEMPLE  
SALT LAKE CITY, UTAH 84116  
328-5771

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

*Back on production June 1976*  
*K*

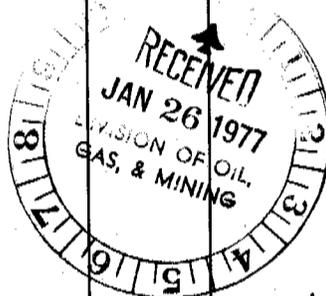
REPORT OF OPERATIONS AND WELL STATUS REPORT  
Utah Grand Seiber Nose

STATE \_\_\_\_\_ COUNTY \_\_\_\_\_ FIELD/LEASE \_\_\_\_\_

The following is a correct report of operations and production (including drilling and producing wells) for the month of:  
June 76  
Woodside, Utah 84544 Delila A. Cook

Agent's Address \_\_\_\_\_ Company Owner  
564 3255 Signed \_\_\_\_\_  
Title \_\_\_\_\_  
Phone No. \_\_\_\_\_

Sec. 2	Twp. 20S	Range 24E	Well No. 1A	Days Produced	Barrels of Oil	Gravity	Cu. Ft. of Gas (In thousands)	Gallons of Gasoline Recovered	Barrels of Water (if none, so state)	REMARKS (If drilling, depth; if shut down, cause; date and result of test for gasoline content of gas)
										<b>Pumping Irregular</b>



*Back on production June, 76*

GAS: (MCF)  
Sold \_\_\_\_\_  
Flared/Vented \_\_\_\_\_  
Used On/Off Lease \_\_\_\_\_

OIL or CONDENSATE: (To be reported in Barrels)  
On hand at beginning of month \_\_\_\_\_  
Produced during month \_\_\_\_\_  
Sold during month 83.75  
Unavoidably lost \_\_\_\_\_  
Reason: \_\_\_\_\_  
On hand at end of month \_\_\_\_\_

DRILLING/PRODUCING WELLS: This report must be filed on or before the sixteenth day of the succeeding month following production for each well. Where a well is temporarily shut-in, a negative report must be filed. THIS REPORT MUST BE FILED IN DUPLICATE

**COPY**

UTAH OIL AND GAS CONSERVATION COMMISSION

REMARKS: WELL LOG  ELECTRIC LOGS  FILE  WATER SANDS  LOCATION INSPECTED \_\_\_\_\_ SUB. REPORT/abd. \_\_\_\_\_  
 2-5-79 - Operator name change from Cook to: Utah Gas & Oil (George Naylor)  
 910116 Oper. from N0000/Unknown Oper. (N 7360 - Don Carns per St. Tanks) to 76.7 eff. 10-23-89  
 12-15-90 ~~Subsequent reports in well log show a significant~~  
 This well 16' NE offset to Duchess #1 920324 76.7 oilfield to Linn Bros. eff. 12-31-91:

DATE FILED \_\_\_\_\_

LAND: FEE & PATENTED \_\_\_\_\_ STATE LEASE NO. ML 23174 PUBLIC LEASE NO. \_\_\_\_\_ INDIAN \_\_\_\_\_

DRILLING APPROVED: \_\_\_\_\_

SPUDED IN: 10-4-70

COMPLETED: 12-3-70 PUT TO PRODUCING: 11-7-70 SI → Back on production - June, 1976

INITIAL PRODUCTION: 5 BOPD

GRAVITY A.P.I. \_\_\_\_\_

GOR: \_\_\_\_\_

PRODUCING ZONES: 1326' - 1332' ~~Block A-3N~~

TOTAL DEPTH: 1338'

WELL ELEVATION: 4586' GR.

DATE ABANDONED: \_\_\_\_\_

FIELD: Seiber Nose Development Greider C. 30

UNIT: \_\_\_\_\_

COUNTY: Grand

WELL NO. DUCHESS STATE #1-A API NO. 43-019-30065

LOCATION 1632' FT. FROM (N) ~~XX~~ LINE, 1919 FT. FROM (E) ~~XX~~ LINE, NE SW NE 7 1/4 - 1/4 SEC. 2 ✓

TWP.	RGE.	SEC.	OPERATOR	W.P.	RGE.	SEC.	OPERATOR
20 S	24 E	2	LINN BROS. OIL & GAS INC.				

4938 Colo. Hwy 548  
Glathe, Colo. 81425  
February 5, 1979

COPY TO BEV KA

Department of Natural Resources  
Division of State Lands  
Room 411 Empire Building  
251 East Fourth South  
Salt Lake City, Utah 84111

Operator  
name  
change

Gentlemen:

I am reporting the final sale of oil from Duchess IA.  
Oil was picked up by K. E. McDougald in April or May of 1978,  
but payment was not made until 11/10/78.

Near the middle of the month of August negotiations  
were made with George Naylor with Utah Gas & Oil for transfer to  
of the assignment and sale of properties of Duchess IA.

As to the lease rental, notification was made to Utah Gas and  
Oil and I thought that they of course would take care of rental  
for 1979.

I am including check for \$297.42, royalties due state,  
a check for \$42.60 rental and 6% late fee. Will you refund the  
\$40.00 to me from overpayment of royalty to me and I will  
collect from Utah Gas and Oil. Our wish is to keep the lease in  
good standing.

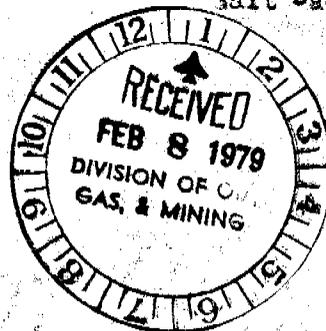
Sincerely,

D. A. Cook from

D. A. Cook

Check for lease payment sent to  
Mr. K. Kinchart, Director  
Room 411 Empire Building  
251 East Fourth South  
Salt Lake City, Utah

Check for realty sent to  
Division of Oil & Gas Conservation  
1588 West North Temple  
Salt Lake City, Utah 84116





STATE OF UTAH  
NATURAL RESOURCES  
Oil, Gas & Mining

Scott M. Matheson, Governor  
Temple A. Reynolds, Executive Director  
Dianne R. Nielson, Ph.D., Division Director

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

October 4, 1984

Mr. Frank B. Adams  
718 Wilson Building  
Corpus Christi, Texas 78476

Dear Mr. Adams:

Re: Well No. Duchess State #1-A - Sec. 2, T. 20S., R. 24E.  
Grand County, Utah - API #43-019-30065 - Lease #ML 39901

According to information received by this office, Lease #ML-39901 belongs to your company. The above referred to well is on this lease and we have not received the proper notification concerning this change as it pertains to the above referred to well.

Please send in a "Sundry Notice", Form OGC-1b with your company's name, address and phone number as the new operator and the date the change became effective. We have enclosed forms for your convenience.

Thank you for your prompt attention to the above matter.

*Mr. Adams called and  
is talking to state  
lands*

Sincerely,

*Claudia Jones*

Claudia Jones  
Well Records Specialist

clj

Enclosure

cc: Dianne R. Nielson  
Ronald J. Firth  
John R. Baza  
File  
0000008/10



STATE OF UTAH  
NATURAL RESOURCES  
Oil, Gas & Mining

Scott M. Matheson, Governor  
Temple A. Reynolds, Executive Director  
Dianne R. Nielson, Ph.D., Division Director

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

October 4, 1984

Mr. Frank B. Adams  
718 Wilson Building  
Corpus Christi, Texas 78476

Dear Mr. Adams:

Re: Well No. Duchess State #1-A - Sec. 2, T. 20S., R. 24E.  
Grand County, Utah - API #43-019-30065 - Lease #ML 39901

According to information received by this office, Lease #ML-39901 belongs to your company. The above referred to well is on this lease and we have not received the proper notification concerning this change as it pertains to the above referred to well.

Please send in a "Sundry Notice", Form OGC-1b with your company's name, address and phone number as the new operator and the date the change became effective. We have enclosed forms for your convenience.

Thank you for your prompt attention to the above matter.

Sincerely,

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

Claudia Jones  
Well Records Specialist

clj

Enclosure

cc: Dianne R. Nielson  
Ronald J. Firth  
John R. Baza  
File  
000008/10

*Frank B. Adams*

OIL OPERATOR  
718 WILSON BUILDING  
CORPUS CHRISTI, TEXAS 78476  
512-884-9004

RECEIVED  
DEC 04 1984

November 28, 1984

DIVISION OF  
OIL, GAS & MINING

Utah Natural Resources  
Division of Oil, Gas & Mining  
4241 State Office Building  
Salt Lake City, UT 84114

Attn: Claudia Jones

Re: ML- 39901  
Old wells on lease

Gentlemen:

Thank you for the well records on the Delila Cook and Combined No. 1 wells located on the above noted lease.

I plan to be in Salt Lake the second week of December and at that time will take the matter up with Donald Prince. As I mentioned, when that lease was offered for competitive bid, no mention was made in the offering that an obligation to plug other wells existed.

I am sure that one way or another the matter can be resolved.

Sincerely yours,

*Frank B. Adams*

Frank B. Adams



STATE OF UTAH  
NATURAL RESOURCES  
Oil, Gas & Mining

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

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

February 28, 1985

TO: J.R. Baza, Petroleum Engineer  
FROM: <sup>#2</sup> William Moore, Oil and Gas Field Specialist  
RE: Division of State Lands and Forestry, Lease No. ML-39901,  
T.20S, R.24E, Sec.2, Grand County, Utah, Containing Wells:

Dutchess State #1-A, State #2, State #3.

This memo is to serve as a record of the personal contacts regarding the above referenced wells. These sites were originally visited by myself February 17, 1984. The owner of record was United Technical Industries for the State #2 and State #3, and Utah Gas and Oil Corporation for the Dutchess State #1-A.

In searching the land lease records in the months following it was observed that Mr. Frank B. Adams purchased this lease on March 1, 1982 and subsequently submitted a drilling bond for \$ 5,000 on November 22, 1982. Mr. Adams was contacted December 13, 1984 regarding this lease. Mr. Adams was only aware of the State #2 well being on this lease and wanted nothing to do about the other two wells. Even though the Dutchess State #1-A is an active well he didn't want to be responsible for it. Because of this new information Mr. Adams was in the process of trying to get his money back on this lease from the Division of State Lands and Forestry.

cc: Well File  
96861-61



STATE OF UTAH  
NATURAL RESOURCES  
Oil, Gas & Mining

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

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

February 28, 1985

TO: J.R. Baza, Petroleum Engineer  
FROM: <sup>W</sup> William Moore, Oil and Gas Field Specialist  
RE: Division of State Lands and Forestry, Lease No. ML-39901,  
T.20S, R.24E, Sec.2, Grand County, Utah, Containing Wells:

Dutchess State #1-A, State #2, State #3.

This memo is to serve as a record of the personal contacts regarding the above referenced wells. These sites were originally visited by myself February 17, 1984. The owner of record was United Technical Industries for the State #2 and State #3, and Utah Gas and Oil Corporation for the Dutchess State #1-A.

In searching the land lease records in the months following it was observed that Mr. Frank B. Adams purchased this lease on March 1, 1982 and subsequently submitted a drilling bond for \$ 5,000 on November 22, 1982. Mr. Adams was contacted December 13, 1984 regarding this lease. Mr. Adams was only aware of the State #2 well being on this lease and wanted nothing to do about the other two wells. Even though the Dutchess State #1-A is an active well he didn't want to be responsible for it. Because of this new information Mr. Adams was in the process of trying to get his money back on this lease from the Division of State Lands and Forestry.

cc: Well File  
96861-61



STATE OF UTAH  
NATURAL RESOURCES  
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Norman H. Bangerter, Governor  
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355 W. North Temple • 3 Triad Center • Suite 350 • Salt Lake City, UT 84180-1203 • 801-538-5340

April 11, 1985

Frank B. Adams & Mark Dizear, Jr.  
718 Wilson Building  
Corpus Christi, Texas 78476

Gentlemen:

Re: Well No. Duchess State 1-A - Sec. 2, T. 20S., R. 24E.,  
Grand County, Utah - API #43-019-30065

According to information received by this office, the above referenced well is now operated by your company. We have not received the proper notification concerning this change.

If you have assumed operations, please submit a "Sundry Notice", Form OGC-1b, for each well this change affects with the name, address and phone number of both the new and old operators and the date the change became effective. We have enclosed forms for your convenience.

Sincerely,

A handwritten signature in cursive script that reads "Pam Kenna".

Pam Kenna  
Well Records Specialist

Enclosure

cc: Dianne R. Nielson  
Ronald J. Firth  
John R. Baza  
File

0170S/52

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

RECEIVED  
SUBMITTED BY  
(NAME)  
(ADDRESS)  
(PHONE NO.)

APR 22 1985  
LEASE DESIGNATION AND SERIAL NO.  
SL-39901

SUNDRY NOTICES AND REPORTS ON WELLS

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

DIVISION OF OIL  
GAS & MINING

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Abandoned but unplugged old well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Frank B. Adams		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 718 Wilson Bldg., Corpus Christi, TX 78476		8. FARM OR LEASE NAME State of Utah	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1632' fnl & 1919' fel Section 2, Twp 20 South -Rng 24 East		9. WELL NO. Duchess State 1-A	
14. PERMIT NO. 43-019-30065		10. FIELD AND POOL, OR WILDCAT Greater Cisco Area	
15. ELEVATIONS (Show whether OF, BT, OR, etc.) 4586' Gr		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA 2-T20S-R24E, SLB&M	
		12. COUNTY OR PARISH Grand	13. STATE Utah

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

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

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

This well is located on a 165.06 acre lease purchased by the undersigned at a State Oil & Gas lease sale on February 22, 1982. There were no conditions set out in the State lease offering from the State. I bid \$ 38.25 per acre and was successful bidder. The lease was awarded and issued to me March 1, 1982.

October 4, 1984 I was notified that the Duchess State 1-A was located on the leased premises and that as the present owner of the existing Oil & Gas Lease is was my obligation to plug and abandon this well. This was not a condition of the lease offering, therefore, I feel that the State should act under it's drilling bond to plug the well, if they can not get the operator that drilled the well (Delila A. Cook of Woodside, Utah) to do so.

I am submitting this Sundry notice at the request of the Division of Oil, Gas & Mining.

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

SIGNED Frank B. Adams TITLE Operator DATE April 17, 1985

(This space for Federal or State office use)

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

Page 30

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

RECEIVED

OCT 15 1985

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Abandoned but unplugged oil well		3. LEASE DESIGNATION AND SERIAL NO. ML-39901
2. NAME OF OPERATOR Frank B. Adams		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 718 Wilson Bldg., Corpus Christi, TX 78476		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  Drilled by Delhia Cooke under lease # ML-23174 1632' fnl & 1919' fel Section 2, Township 20 South, Range 24 East		8. FARM OR LEASE NAME State of Utah
14. PERMIT NO. API 43-019- 30065		9. WELL NO. Cooke 1-A State
15. ELEVATIONS (Show whether SP, GR, etc.) 4586' Gr		10. FIELD AND POOL, OR WILDCAT Seiber Nose
		11. SEC., T., R., M., OR BLM. AND SURVEY OR ABBA 2-20s-24e SLB&M
		12. COUNTY OR PARISH Grand
		13. STATE Utah

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

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

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

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

Well has 113' of 7" 26# surface casing cemented to the surface

4 1/2" - 9 1/2# production casing set to 1344'

Base of the Mancus @ 975' KB - Perforations @ 1318-25' KB

Plugging procedure requested :

1. Spot cement plug from 1344' to 1014' w/ 30 sacks cement
2. Spot 10 sacks in 4 1/2" at the surface
3. Install regulation dryhole marker
4. Clean up location

APPROVED BY THE STATE  
OF UTAH DIVISION OF  
OIL, GAS, AND MINING  
DATE: 10/18/85  
BY: John R. Bay

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

SIGNED Frank B. Adams TITLE Operator DATE Oct 11, 1985

(This space for Federal or State office use)

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

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <b>Change of Operator &amp; Ownership Notice</b>		5. LEASE DESIGNATION AND SERIAL NO. ML-39901
2. NAME OF OPERATOR Frank B. Adams		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 718 Wilson Building, Corpus Christi, TX 78476		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17, below.) At surface Combined No. 2 State: 774' fwl & 421' fnl 2-20s-24e  Delhia Cooke No. 1-A Dutchess: 1632' fnl & 1919' fel 2-20s-24e		8. FARM OR LEASE NAME State of Utah
14. PERMIT NO. 43-109-30336 (Combined) 43-019-30065 (Dutchess 1-A)		9. WELL NO. Combined # 2 Dutchess No. 1-A
15. SITUATIONS (Show whether OF, BY, OR, etc.) 4546' Gr 4586' Gr		10. FIELD AND POOL, OR WILDCAT Greater Cisco Area
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2=20s-24e SLM
		12. COUNTY OR PARISH Grand
		13. STATE Utah

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

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

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

The undersigned has assigned 100% of the operating and lease ownership in this lease, along with all my rights, title and interest in and to the two wells located thereon, to Don R. Carns, 2424 N 12th, Grand Junction, CO 81501. The effective date of this transfer is: 7:00 AM, December 1, 1985. Both wells have been approved for plugging, but Mr. Carns has elected to attempt to produce same for a while. A copy of each plugging permit is attached.

Mr. Carns will furnish his own lease bond to cover his operations.



DIVISION OF OIL, GAS & MINING

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

SIGNED Frank B. Adams TITLE Operator DATE December 15, 1985

(This space for Federal or State office use)

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

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

Frank B. Adams

OIL OPERATOR

718 WILSON BUILDING

CORPUS CHRISTI, TEXAS 78476

512-884-9004

RECEIVED  
APR 03 1986

DIVISION OF  
OIL, GAS & MINING

April 1, 1986

Division of Oil, Gas & Mining  
3 Triad Center - Suite 350  
Salt Lake City, UT 84180-1203

Attn: Mr. William Moore, Oil & Gas Field Specialist

Re: ML-39901  
2-20s-24e

Grand County, Utah

Gentlemen:

Please be advised that, effective December 1, 1985 @ 7:00AM, the above noted lease and surface equipment located thereon, was conveyed to:

Mr. Don R. Carns  
2424 N 12th Street  
Grand Junction, CO 81501  
303-243-0890

Mr. Carns has assumed my plugging obligations as noted in the attached Sundry Notice. Mr. Carns will also furnish his own lease bond to comply with your requirements..

A copy of the assignment is also attached for your information.

Sincerely yours,

  
Frank B. Adams

Encl OGC 1b, in triplicate  
Copy of assignment

*Assignment handled  
State 4/7/86  
ab.*

RECEIVED (UNIT instructions on reverse side)

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING OCT 15 1985

SUNDRY NOTICES AND REPORTS ON WELLS DIVISION OF OIL GAS & MINING

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

1. OIL WELL [ ] GAS WELL [ ] OTHER Abandoned but unplugged oil well
2. NAME OF OPERATOR Frank B. Adams
3. ADDRESS OF OPERATOR 718 Wilson Bldg., Corpus Christi, TX 78476
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface
14. PERMIT NO. API 43-019- 30065
15. ELEVATIONS (Show whether of, to, or from) 4586' Gr
12. COUNTY OR PARISH Grand STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF [ ] FRACTURE TREAT [ ] SHOOT OR ACIDISE [ ] REPAIR WELL [ ] (Other) [ ]
SUBSEQUENT REPORT OF: WATER SHUT-OFF [ ] FRACTURE TREATMENT [ ] SHOOTING OR ACIDISING [ ] (Other) [ ]

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)
Well has 113' of 7" 26# surface casing, cemented to the surface
4 1/2" - 9 1/2# production casing set to 1344'
Base of the Mancus @ 975' KB - Perforations @ 1318-25' KB
Plugging procedure requested :
1. Spot cement plug from 1344' to 1014' w/ 30 sacks cement
2. Spot 10 sacks in 4 1/2" at the surface
3. Install regulation dryhole marker
4. Clean up location

RECEIVED APR 03 1986

DIVISION OF OIL, GAS & MINING

APPROVED BY THE STATE OF UTAH DIVISION OF OIL, GAS, AND MINING DATE: 10/16/85 BY: [Signature]

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Operator DATE Oct 11, 1985
APPROVED BY TITLE DATE
CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

5. LEASE DESIGNATION & SERIAL NO.  
State ML-39901

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

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
L & L Oilfield Services, Inc.

3. ADDRESS OF OPERATOR  
P.O. Box 416 Fruita, Co 81521

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

5. FIELD AND POOL OR WILDCAT  
Duchess State #1-A  
Cisco

6. IF INDIAN ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.  
20S-24E-2

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

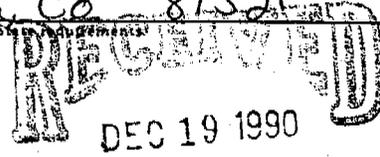
11. COUNTY  
Grand

12. STATE  
UT

13. COUNTY

14. API NO.  
43-019-30065

15. ELEVATIONS (Show whether DF, RT, or DIVISION OF OIL, GAS & MINING)



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

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

APPROX. DATE WORK WILL START \_\_\_\_\_

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

\* Must be accompanied by a cement verification report.

this well is listed as no known operator.  
This well was purchased from Don Carns by us, it is located on lease #ML-39901  
We will start filing the reports on this well, API # 43-019-30065

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

SIGNED Gene A. Quinn TITLE foreman DATE 12/13/90

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

See Instructions On Reverse Side

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

ENTITY ACTION FORM - FORM 6

OPERATOR L & L OILFIELD SERVICES, INC.  
ADDRESS P. O. BOX 416  
FRUITA, CO 81521

OPERATOR ACCT. NO. N1650

ACTION CODE	CURRENT ENTITY NO.	NEW ENTITY NO.	API NUMBER	WELL NAME	WELL LOCATION					SPUD DATE	EFFECTIVE DATE
					QQ	SC	TP	RG	COUNTY		
D	99994	11153	43-019-30065	DUCHESS STATE #1-A	SWNE	2	20S	24E	GRAND	10-4-70	10-23-89
WELL 1 COMMENTS: *OPERATOR CHANGE FROM N0000/UNKNOWN OPERATOR (DON CARNS/N7360 PER ST LANDS) TO L & L OILFIELD. ASSIGNMENT OF ML-39901 WAS EFFECTIVE 10-23-89. NEW ENTITY 11153 ADDED 1-14-90. <i>ll</i>											
WELL 2 COMMENTS:											
WELL 3 COMMENTS:											
WELL 4 COMMENTS:											
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. ROMERO (DOGM)  
Signature  
ADMIN. ANALYST 1-14-91  
Title Date  
Phone No. ( )



# State of Utah

DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

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

355 West North Temple  
3 Triad Center, Suite 350  
Salt Lake City, Utah 84180-1203  
801-538-5340

January 14, 1991

L & L Oilfield Services, Inc.  
P. O. Box 416  
Fruita, Colorado 81521

Dear Mr. Hill:

Re: Operator Change, Duchess State #1-A, Sec. 2, T. 20S, R. 24E, Grand County,  
Utah

In reviewing the operator change for the referenced wells, it was determined that your company is not currently registered with the Utah Department of Commerce. This letter is written to advise you of your responsibility to register your company with the state prior to conducting business within Utah. This can be accomplished by contacting:

Department of Commerce  
Division of Corporations  
160 East 300 South  
Salt Lake City, Utah 84111  
(801) 530-4849

Sincerely,

A handwritten signature in cursive script that reads "Lisha Romero".

Lisha Romero  
Administrative Analyst

cc: Dept. of Commerce  
D. T. Staley  
R. J. Firth  
Operator Change File  
WE76

Routing:

1- LCR	<input checked="" type="checkbox"/>
2- DTS	<input checked="" type="checkbox"/>
3- VLC	<input checked="" type="checkbox"/>
4- RJF	<input checked="" type="checkbox"/>
5- RWM	<input checked="" type="checkbox"/>
6- LCR	<input checked="" type="checkbox"/>

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

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

The operator of the well(s) listed below has changed (EFFECTIVE DATE: 10-23-89 )

TO (new operator)	<u>L &amp; L OILFIELD SERVICES, INC. FROM</u> (former operator)	<u>UNKNOWN OPERATOR</u>
(address)	<u>P. O. BOX 416</u>	(address) <u>(DON CARNS - N7360)</u>
	<u>FRUITA, CO 81521</u>	<u>PER ST. LANDS</u>
	phone ( )	phone ( )
	account no. <u>N1650 (1-14-91)</u>	account no. <u>N0000</u>

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

Name: <u>DUCHESS STATE #1-A</u>	API: <u>4301930065</u>	Entity: <u>99994</u>	Sec <u>2</u> Twp <u>20S</u> Rng <u>24E</u>	Lease Type: <u>ML-23174</u>
Name: <u>(BUKHN)</u>	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: <u>ML-23532</u>
Name: _____	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: <u>ML-39901</u>
Name: _____	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____ Twp _____ Rng _____	Lease Type: _____

OPERATOR CHANGE DOCUMENTATION

- N/A 1. (Rule R615-8-10) Sundry or other legal documentation has been received from former operator (Attach to this form). *Unable to contact Don Carns. (see st. Lands comments)*
- see 2. (Rule R615-8-10) Sundry or other legal documentation has been received from new operator (Attach to this form). *(12-19-90)*
- see 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) NO If yes, show company file number:                     . *(1-14-91) letter mailed.*
- N/A 4. (For Indian and Federal Wells ONLY) The BLM has been contacted regarding this change (attach Telephone Documentation Form to this report). Make note of BLM status in comments section of this form. Management review of Federal and Indian well operator changes should take place prior to completion of steps 5 through 9 below.
- see 5. Changes have been entered in the Oil and Gas Information System (Wang/IBM) for each well listed above. *(1-16-91)*
- see 6. Cardex file has been updated for each well listed above.
- see 7. Well file labels have been updated for each well listed above.
- see 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to State Lands and the Tax Commission.
- see 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

- 1. (Rule R615-8-7) Entity assignments have been reviewed for all wells listed above. Were entity changes made? (yes/no) yes (If entity assignments were changed, attach copies of Form 5, Entity Action Form). *(see entity action form attached)*
- 2. State Lands and the Tax Commission have been notified through normal procedures of entity changes.

BOND VERIFICATION (Fee wells only)

- 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\_\_\_\_.

STATE INTEREST OWNER NOTIFICATION RESPONSIBILITY

- 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.
- 2. Copies of documents have been sent to State Lands for changes involving State leases. *no notification sent since st. lands has already been involved (see comments below)*

INDEXING

- 1. All attachments to this form have been microfilmed. Date: January 24 1991.

INDEXING

- 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.

REMARKS

910114 st. lands / Ed Banner ml-39901 was assigned to L&L Oilfield by Don Carns eff. 10-23-89. Bond coverage has been furnished by L&L Oilfield. OK to change operator.

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</p>		<p>5. LEASE DESIGNATION &amp; SERIAL NO. <i>State</i></p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p>		<p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p>
<p>2. NAME OF OPERATOR <i>W&amp;L Oilfield Services, Inc.</i></p>		<p>7. UNIT AGREEMENT NAME</p>
<p>3. ADDRESS OF OPERATOR <i>P.O. Box 416 Fruita, Co 81521</i></p>		<p>8. FARM OR LEASE NAME</p>
<p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  At proposed prod. zone <i>BUKHN</i></p>		<p>9. WELL NO. <i>Duchess State #1-A</i></p>
<p>14. API NO. <i>43-019-30065</i></p>		<p>10. FIELD AND POOL, OR WILDCAT <i>Cisco</i></p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.)</p>		<p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>20 S-24E-2</i></p>
<p>12. COUNTY <i>Grand</i></p>		<p>13. STATE <i>Ut</i></p>

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

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

APPROX. DATE WORK WILL START \_\_\_\_\_

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

\* Must be accompanied by a cement verification report.

"Annual Status Report"

This well is shut-in until price improves.

RECEIVED

FEB 21 1992

DIVISION OF  
OIL GAS & MINING

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

SIGNED *Gene A. Smith* TITLE *foreman* DATE *2/14/92*

(This space for Federal or State office use)

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

See Instructions On Reverse Side

GOLDEN, MUMBY, SUMMERS, & LIVINGSTON  
ATTORNEYS AT LAW  
UNITED BANK OF GRAND JUNCTION - 2808 NORTH AVENUE  
P.O. BOX 398  
GRAND JUNCTION, COLORADO 81502

JAMES GOLDEN  
KEITH G. MUMBY  
K. K. SUMMERS  
J. RICHARD LIVINGSTON  
SUSAN M. DACKONISH

AREA CODE 303  
TELEPHONE 242-7322

FACSIMILE 242-0688

January 17, 1992

State of Utah  
Division of Lands & Forestry  
355 West North Temple  
3 Triad Center, Suite 400  
Salt Lake City, Utah 84180

RE: MINERAL LEASE NO. 39901 and  
MINERAL LEASE NO. 7567-B

Gentlemen:

As attorney for Linn Bros. Oil and Gas, Inc., I am enclosing herein the following:

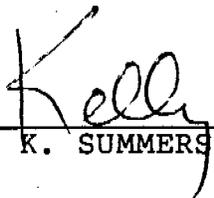
1. Duplicate originals of Mineral Lease Assignment Form No. 39901 together with a check in the amount of \$25 to pay the assignment fee.
2. Duplicate originals of Mineral Lease Assignment Form No. 7567-B together with a check in the amount of \$25 to pay the assignment fee.

Would you please contact this Office at the above telephone number to make arrangements to transfer the bonds which have previously been in effect on these leases.

Respectfully yours,

GOLDEN, MUMBY, SUMMERS & LIVINGSTON

BY

  
K. K. SUMMERS

KKS/lw

Enclosures

CC: Jerry Linn  
Gene Linn  
Tim Hawkins

RECEIVED

MAR 20 1992

DIVISION C.F.  
OIL GAS & MINING

12/1/91

### MINERAL LEASE ASSIGNMENT FORM

MINERAL LEASE NO. 39901

RECORD TITLE ASSIGNMENTS:  
x TOTAL  
    INTEREST  
    PARTIAL  
    OVERRIDING ROYALTY  
OPERATING RIGHTS ASSN.    

The undersigned, as owner of interest as hereinafter specified in and to ML 39901 as designated, for good and valuable consideration and TEN DOLLARS does hereby apply for approval of this assignment and hereby assigns to LINN BROS. OIL & GAS, INC.

ADDRESS: 1328 16 Road, Fruita, CO 81521  
the rights, title, and interest in rights and privileges as lessee in such lands, to the extent indicated subject to the reservation of overriding royalties as herein noted:

1. Land affected by this assignment in County of Grand, State of Utah, as described herein:

TOWNSHIP 20 SOUTH, RANGE 24 EAST, SLM

Section 2: Lot 4, SW 1/4 NE 1/4, S 1/2 NW 1/4

165.06 ACRES

- 2. Interest of assignor in such lands (Note % of 100%) 100%
- 3. Extent of such interest conveyed to Assignee (Note % of 100%) 100%
- 4. Extent of interest retained by Assignor after assignment (Note % of 100%) None
- 5. Overriding royalty reserved herein to Assignor (Note percentage only) None
- 6. Overriding royalty previously reserved (Note percentage only) None

It is hereby certified that the statements made herein are true, complete, and correct to the best of the undersigned's knowledge and belief and are made in good faith. Approval of this application and assignment should be considered approval only under such rights, interests, and title as held by assignor.

Executed this 31 day of Dec, 1991.

L & L OIL FIELD SERVICES, INC.  
BY: Lucy F. Linn  
(Lessee - Assignor)  
LUCY F. LINN, PRESIDENT

#### LESSEE-ASSIGNOR'S ACKNOWLEDGEMENT

STATE OF Colorado )  
                          ) :ss  
COUNTY OF Mesa     )

On the 31 day of Dec, 1991, personally appeared before me LUCY F. LINN, PRESIDENT OF L & L OIL FIELD SERVICES, INC. and L OIL FIELD SERVICES, INC. who duly acknowledged to me that     executed the same.

Given under my hand and seal this 31 day of Dec, 1991.

My Commission Expires: 1 Aug 93

[Signature]  
NOTARY PUBLIC, residing at:  
2808 North Ave Suite 400  
Grand Jct. Colo 81501



**INSTRUCTIONS:** Assignment must be submitted in duplicate. Total Assignment—\$25, Interest, Operating Rights, and Overriding Royalty Assignments—\$ and Partial Assignment—\$40.

**INDIVIDUAL'S ACCEPTANCE OF ASSIGNMENT (ASSIGNEE)  
AFFIDAVIT OF CITIZENSHIP OF ASSIGNEE**

I, (we) \_\_\_\_\_ on oath, do solemnly swear that I am (we are) at the present time (a) \* \_\_\_\_\_ Citizen(s) of the United States of America and of legal age, and I (we) hereby assume and agree to perform all of the covenants and obligations of said lease on the part of lessee(s) to be kept and performed, and accept the foregoing instrument.

BY: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

NOTARY PUBLIC, residing at: \_\_\_\_\_

**ACCEPTANCE OF ASSIGNMENT—CORPORATE (Assignee)**

Inc., a Colorado

Comes now LINN BROS. OIL & GAS, /a corporation of \_\_\_\_\_ and hereby accepts the assignment from L & L OIL FIELD SERVICES, INC of \_\_\_\_\_ ML No. 7567-B, which assignment is dated \_\_\_\_\_, subject to all of the covenants and obligations of said Lessee.

IN WITNESS WHEREOF, T has executed this acceptance this 31 day of Dec, 1991.

(Assignee) LINN BROS OIL & GAS, INC.  
BY: Jerry M. Linn  
(Officer, Agent, Attorney-in-Fact)  
JERRY M. LINN, PRESIDENT

**ASSIGNEES ACKNOWLEDGEMENT (Corporate)**

STATE OF COLORADO )  
                                  :ss  
COUNTY OF MESA    )

On the 31 day of Dec, 1991, personally appeared before me JERRY M. LINN \*, who being by me duly sworn did say, each for himself, that (he, ~~she or they~~) is an officer, agent or Attorney-in-Fact for the assignee and is authorized to accept this assignment and has executed the same and the seal affixed is the seal of said corporation. \*President of Linn Bros. Oil & Gas, Inc.

My Commission Expires: 1 Aug 93

KK Summer  
NOTARY PUBLIC, residing at:  
2809 North Ave Suite 40  
Grand Jct, Colo 81501

**NOTE:** a\* Insert here whether native born or naturalized. If naturalized, it will be necessary to file with this office Proof of Citizenship or Declaration of Intention to become a citizen in the form of a letter of certificate of verification fr Court of Issuance, and registration fee of \$1.00.



# State of Utah

DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

Norman H. Bangerter

Governor

Dee C. Hansen

Executive Director

Dianne R. Nielson, Ph.D.

Division Director

355 West North Temple

3 Triad Center, Suite 350

Salt Lake City, Utah 84180-1203

801-538-5340

March 24, 1992

Gene A. Linn  
Linn Bros. Oil & Gas, Inc.  
P. O. Box 416  
Fruita, Colorado 81521

Dear Mr. Linn:

Re: Operator Change, L&L Oilfield Services, Inc., to Linn Bros. Oil & Gas, Inc., for wells located in Section 2, Township 20S, Range 24E - Grand County, Utah.

In reviewing the operator change for the referenced companies, it was determined that your company is not currently registered with the Utah Department of Commerce. This letter is written to advise you of your responsibility to register your company with the state prior to conducting business within Utah. This can be accomplished by contacting:

Department of Commerce  
Division of Corporations  
160 East 300 South  
Salt Lake City, Utah 84111  
(801) 530-4849

Sincerely,

Lisha Romero  
Administrative Analyst

cc: Dept. of Commerce  
D.T. Staley  
R.J. Firth  
Operator File(s)  
Correspondence File/lcd

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. NAME OF OPERATOR <i>L &amp; L Oil field Services, Inc.</i> 3. ADDRESS OF OPERATOR <i>P.O. Box 416 Fruita, Co 81521</i> 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  At proposed prod. zone <i>B U K H N</i> 14. API NO. <i>43-019-30065</i>		5. LEASE DESIGNATION & SERIAL NO. <i>State</i> 6. IF INDIAN, ALLOTTEE OR TRIBE NAME  7. UNIT AGREEMENT NAME  8. FARM OR LEASE NAME  9. WELL NO. <i>Duchess State #1-A</i> 10. FIELD AND POOL, OR WILDCAT <i>CISCO</i> 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>20 S - 24 E - 2</i> 12. COUNTY <i>Grand</i>   13. STATE <i>Ut.</i>
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16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> (Other) <input type="checkbox"/> APPROX. DATE WORK WILL START _____	WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREATMENT <input type="checkbox"/> SHOOTING OR ACIDIZING <input type="checkbox"/> (Other) <i>Transferring ownership</i> <input checked="" type="checkbox"/> (Note: Report results of Multiple completion on Well Completion or Recompletion Report and Log form.) DATE OF COMPLETION _____
FULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> ABANDONMENT* <input type="checkbox"/>

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

\* Must be accompanied by a cement verification report.

*Transferring ownership to*

RECEIVED

MAR 05 1992

DIVISION OF OIL GAS & MINING

Linn Bros. Oil & Gas, Inc.

P.O. Box 416

Fruita, Co 81521

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

SIGNED *Gene A. Linn* TITLE *foreman* DATE *2/25/92*

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

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

Routing:

1- <del>LCH</del> / 7-LCR	<input checked="" type="checkbox"/>
2-DPS/DTS	<input checked="" type="checkbox"/>
3-VLC	<input checked="" type="checkbox"/>
4-RJF	<input checked="" type="checkbox"/>
5-RWM	<input checked="" type="checkbox"/>
6-ADA	<input checked="" type="checkbox"/>

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

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

The operator of the well(s) listed below has changed (EFFECTIVE DATE: 12-31-91)

TO (new operator)	<u>LINN BROS. OIL &amp; GAS, INC.</u>	FROM (former operator)	<u>L&amp;L OILFIELD SERVICES, INC.</u>
(address)	<u>P. O. BOX 416</u>	(address)	<u>P. O. BOX 416</u>
	<u>FRUITA, CO 81521</u>		<u>FRUITA, CO 81521</u>
	<u>GENE LINN, FOREMAN</u>		<u>GENE LINN, FOREMAN</u>
phone	<u>(303) 858-7386</u>	phone	<u>(303) 858-7386</u>
account no.	<u>N 6800 (3-24-92)</u>	account no.	<u>N 4925</u>

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

Name:	<u>PROM SEIB ST #1/BRBSN</u>	API:	<u>43-019-15318</u>	Entity:	<u>9165</u>	Sec	<u>2</u>	Twp	<u>20S</u>	Rng	<u>24E</u>	Lease Type:	<u>ML-7567</u>
Name:	<u>ST #2 COMBINED/MRSN</u>	API:	<u>43-019-30336</u>	Entity:	<u>6276</u>	Sec	<u>2</u>	Twp	<u>20S</u>	Rng	<u>24E</u>	Lease Type:	<u>ML-3990</u>
Name:	<u>LARSEN ST #1/MRSN</u>	API:	<u>43-019-15317</u>	Entity:	<u>9166</u>	Sec	<u>2</u>	Twp	<u>20S</u>	Rng	<u>24E</u>	Lease Type:	<u>ML-7567</u>
Name:	<u>DUCHESS ST #1-A/BUKHN</u>	API:	<u>43-019-30065</u>	Entity:	<u>11153</u>	Sec	<u>2</u>	Twp	<u>20S</u>	Rng	<u>24E</u>	Lease Type:	<u>ML-3990</u>
Name:	_____	API:	_____	Entity:	_____	Sec	_____	Twp	_____	Rng	_____	Lease Type:	_____
Name:	_____	API:	_____	Entity:	_____	Sec	_____	Twp	_____	Rng	_____	Lease Type:	_____
Name:	_____	API:	_____	Entity:	_____	Sec	_____	Twp	_____	Rng	_____	Lease Type:	_____

**OPERATOR CHANGE DOCUMENTATION**

- Yes 1. (Rule R615-8-10) Sundry or other legal documentation has been received from former operator (Attach to this form). *(Rec'd 3-5-92)*
- Yes 2. (Rule R615-8-10) Sundry or other legal documentation has been received from new operator (Attach to this form). *(Reg. Copy of Assignment) (Rec'd 3-20-92)*
- Yes 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: \_\_\_\_\_. *(Not reg. 3-9-92) (Not reg. 3-20-92) (Letter mailed 3-24-92)*
- N/A 4. (For Indian and Federal Wells ONLY) The BLM has been contacted regarding this change (attach Telephone Documentation Form to this report). Make note of BLM status in comments section of this form. Management review of Federal and Indian well operator changes should take place prior to completion of steps 5 through 9 below.
- Yes 5. Changes have been entered in the Oil and Gas Information System (Wang/IBM) for each well listed above. *(3-24-92)*
- Yes 6. Cardex file has been updated for each well listed above. *(3-24-92)*
- Yes 7. Well file labels have been updated for each well listed above. *(3-24-92)*
- Yes 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to State Lands and the Tax Commission. *(3-24-92)*
- Yes 9. A folder has been set up for the Operator Change file, and a copy of this page has been placed there for reference during routing and processing of the original documents.

ENTITY REVIEW

- JCP 1. (Rule R615-8-7) Entity assignments have been reviewed for all wells listed above. Were entity changes made? (yes/no) no (If entity assignments were changed, attach copies of Form 6, Entity Action Form).
- N/A 2. State Lands and the Tax Commission have been notified through normal procedures of entity changes.

BOND VERIFICATION (Fee wells only)

- N/A 1. (Rule R615-3-1) The new operator of any fee lease well listed above has furnished a proper bond.
- N/A 2. A copy of this form has been placed in the new and former operators' bond files.
- JCP 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.
- DTS 2. Copies of documents have been sent to State Lands for changes involving State Leases.  
*letter sent to Ed Bernay on 3-26-92*

FILMING

- JCP 1. All attachments to this form have been microfilmed. Date: March 27 1992.

FILING

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

COMMENTS

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# Speed Letter®

To Ed Bonner

From Don Staley

State Lands

Oil, Gas and Mining

Subject Operator Change

MESSAGE

Date 3-26 19 92

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: L & L Oilfield Services, Inc. (N4925)

New Operator: LINN BROS. OIL & GAS, INC (N6800)

Well: API: Entity: S-T-R:

PROMONTORY SEIBER STATE 1 43-09-15318 09165 2-205-24E

STATE # 2 COMBINED 43-019-30336 06276 2-205-24E

LARSEN STATE # 1 43-019-15317 09166 2-205-24E

DUCHESS STATE 1-A 43-019-30065 11153 2-205-24E

CC: Operator File

Signed Don Staley

REPLY

Date \_\_\_\_\_ 19 \_\_\_\_\_

Signed

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</small>		5. LEASE DESIGNATION & SERIAL NO. N/A	
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> N/A		7. UNIT AGREEMENT NAME N/A	
2. NAME OF OPERATOR <b>Linn Bros. Oil &amp; Gas, Inc.</b>		8. FARM OR LEASE NAME N/A	
3. ADDRESS OF OPERATOR <b>PO Box 416 Fruita, Co. 81521</b>		9. WELL NO. N/A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  At proposed prod. zone <b>Sec 2 T 205 R 24 E</b>		10. FIELD AND POOL, OR WILDCAT N/A	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA N/A	
14. API NO. <b>43-019-30065</b>	15. ELEVATIONS (Show whether DF, RT, GR, etc.) N/A	12. COUNTY Grand	13. STATE Utah

RECEIVED

FEB 08 1993

DIVISION OF  
OIL GAS & MINING

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

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

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

\* Must be accompanied by a cement verification report.

Listed below are wells, operated by Linn Bros. Oil & Gas, Inc. which were shut-in as of Jan. 1, 1993:

Well	Mineral Ownership	County
1. Adams 22-1, 2 & 3	Federal	Grand
2. Mancos Wells	Federal	Grand
Tumbleweed 27-8		
Tumbleweed 27-5		
Tumbleweed 1		
3. Tumbleweed #27-3	Federal	Grand
4. Adak #26-3	Federal	Grand
5. Duchess State #1-A	State	Grand
6. Promitory Seiber State #1	State	Grand
7. Combined State #2	State	Grand

The wells Listed under numbers 1,2,3 & 4 Were purchased in Oct. and weather Has been a factor in these well being shut-in.  
The Duchess State 1-A is shut in because of mechanical Problems.  
Numbers 6&7 are shut-in because of prices.

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

SIGNED *Gene A. Linn* TITLE Sec. DATE 2/3/93

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

5. Lease Identification and Serial No.	ML 39901
6. If Indian, Allottee or Tribe Name	N/A
7. If Unit or CA, Agreement Designation	N/A
8. FARM OR LEASE NAME	State of Utah
9. WELL NUMBER	Duchess 1-A State
10. FIELD AND POOL, OR WILDCAT	Greater Cisco
11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA	2-T20S R24E
12. COUNTY	Grand County
13. STATE	UT

**SUBMIT IN TRIPLICATE**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator Linn Bros. Oil & Gas, Inc.
3. Address and Telephone No. P. O. Box 416 Fruita, CO 81521-04216
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <small>See also space 17 below</small> At surface At proposed production zone 1632' fml & 1919' fel
14. API NO. 43019 30065
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4586' GR

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

NOTICE OF INTENTION TO: TEST WATER SHUT-OFF <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> ABANDON <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER <input type="checkbox"/>		SUBSEQUENT REPORT OF: WATER SHUT-OFF <input type="checkbox"/> REPAIRING WELL <input type="checkbox"/> FRACTURE TREATMENT <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> SHOOTING OR ACIDIZING <input type="checkbox"/> ABANDONMENT <input type="checkbox"/> OTHER <u>repaired vandalism and put well back into service.</u>	
APPROX. DATE WORK WILL START _____	DATE OF COMPLETION _____		

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

This well was put back into production in March 2000. It is producing approx. 20 BBL./mo.  
 The tank is full of oil and we getting the crude ready to ship. We expect to ship in June 2000.

**RECEIVED**  
 JUN 21 2000  
 DIVISION OF  
 OIL, GAS AND MINING

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

Signed *Dene A. [Signature]* Title Secretary LBOG Date 06/19/2000

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 Conditions of approval, if any:



State of Utah

March 19, 2004

Department of  
Natural Resources

Division of  
Oil, Gas & Mining

ROBERT L. MORGAN  
*Executive Director*

LOWELL P. BRAXTON  
*Division Director*

CERTIFIED MAIL NO. 7002 0510 0003 8602 6563

Gene Linn  
Linn Brothers Oil & Gas Inc.  
P.O. Box 416  
Fruita, Colorado 81521

Re: Extended Shut-in and Temporary Abandoned Well Requirements for Fee or State Leases.

Dear Mr. Linn:

Linn Brothers Oil & Gas Inc., as of March 2004, has five (5) State Lease Wells (see attachment A) that are currently in non-compliance for extended shut-in or temporary abandonment status. Wells SI/TA beyond twelve (12) consecutive months requires filing a Sundry Notice (R649-3-36-1). Wells with five (5) years non-activity or non-productivity shall be plugged, unless the Division grants approval for extended shut-in time upon a showing of good cause by the operator (R649-3-36-1.3.3). For extended SI/TA consideration the operator shall provide the Utah Division of Oil, Gas & Mining with the following:

1. Reasons for SI/TA of the well (R649-3-36-1.1).
2. The length of time the well is expected to be SI/TA (R649-3-36-1.2), and
3. An explanation and supporting data if necessary, for showing the well has integrity, meaning that the casing, cement, equipment condition, static fluid level, pressure, existence or absence of Underground Sources of Drinking Water and other factors do not make the well a risk to public health and safety or the environment (R649-3-36-1.3).

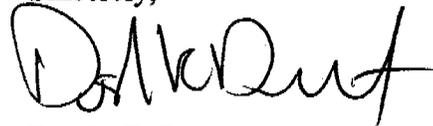
Page 2  
Gene Linn  
March 19, 2004

Submitting the information suggested below may help show well integrity and may help qualify your well for extended SI/TA. **Note: As of July 1, 2003, wells in violation of the SI/TA rule R649-3-36 may be subject to full cost bonding (R649-3-1-4.2, 4.3).**

1. Wellbore diagram, and
2. Copy of recent casing pressure test, and
3. Current pressures on the wellbore (tubing pressure, casing pressure, and casing/casing annuli pressure) showing wellbore has integrity, and
4. Fluid level in the wellbore, and
5. An explanation of how the submitted information proves integrity.

If the required information is not received within 30 days of the date of this notice, further actions may be initiated. If you have any questions concerning this matter, please contact me at (801) 538-5281.

Sincerely,



Dustin K. Doucet  
Petroleum Engineer

jc  
cc: John Baza  
Well File  
SITLA

	<b>Well Name</b>	<b>API</b>	<b>Lease Type</b>	<b>Years Inactive</b>
1	Promontory Seiber St 1	43-019-15318	State	10 Years 11 Months
2	State 2 Combined	43-019-30336	State	10 Years 11 Months
3	St of UT 2-20-21-2	43-019-30699	State	9 Years 6 Months
4	Duchess State 1-A	43-019-30065	State	1 Year 8 Months
5	Larsen State 1	43-019-15317	State	1 Year 0 Months

Attachment A

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

FORM 9

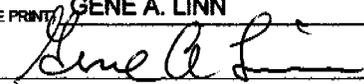
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b>		5. LEASE DESIGNATION AND SERIAL NUMBER: <b>ML 48601</b>
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		7. UNIT or CA AGREEMENT NAME:
		8. WELL NAME and NUMBER: <b>DUCHESS STATE 1-A</b>
1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____	9. API NUMBER: <b>4301930065</b>	
2. NAME OF OPERATOR: <b>LINN BROS. OIL &amp; GAS, INC.</b>	10. FIELD AND POOL, OR WILDCAT: <b>GREATER CISCO</b>	
3. ADDRESS OF OPERATOR: <b>P.O. BOX 416</b> CITY <b>FRUITA</b> STATE <b>CO</b> ZIP <b>81521</b>	PHONE NUMBER: <b>(970) 858-3733</b>	
4. LOCATION OF WELL		
FOOTAGES AT SURFACE: _____		COUNTY: <b>GRAND</b>
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: <b>2 20S 24E</b>		STATE: <b>UTAH</b>

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: _____	<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 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 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"/> COMBINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <u>51/TA Extension</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.  
PLEASE EXTEND THE SHUT-IN STATUS ON THIS WELL FOR 90 DAYS SO THAT WE WILL HAVE TIME TO SET THE EQUIPMENT AND TANK ON THIS WELL TO BEGIN PRODUCTION.

COPY SENT TO OPERATOR  
 Date: 5-11-04  
 Initials: GM

NAME (PLEASE PRINT) <b>GENE A. LINN</b>	TITLE <b>SECRETARY</b>
SIGNATURE 	DATE <b>4/12/2004</b>

(This space for State use only)

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

(5/2000) D. S. [Signature] (See Instructions on Reverse Side)

*to see attached letter dated May 10, 2004*

RECEIVED  
APR 16 2004  
DIV. OF OIL, GAS & MINING



State of Utah

Department of  
Natural Resources

Division of  
Oil, Gas & Mining

ROBERT L. MORGAN  
*Executive Director*

LOWELL P. BRAXTON  
*Division Director*

May 10, 2004

CERTIFIED MAIL NO. 7002 0510 0003 8602 5474

Mr. Gene Lynn  
Linn Brothers Oil & Gas, Inc.  
P.O. Box 416  
Fruita, Colorado 81521

Re: Extended Shut-in and Temporary Abandoned Well Requirements for Fee or State Leases dated March 19, 2004.

Dear Mr. Linn,

The Division of Oil, Gas and Mining (DOGM) is in receipt of your five (5) sundries dated April 12, 2004 (received by the division on 4/16/2004) in regards to the five (5) shut-in wells operated by Linn Brothers Oil & Gas, Inc. (Linn Brothers). It is the Division's understanding Linn Brothers has returned the Larson State 1 to production, will have the Duchess State 1-A producing within the next 90 days, intends to have the Promintory Seiber State 1 and State 2 Combined producing by year end or will plug, and proposes to have the St of UT 2-20-21-2 producing by year end or will submit requested information at that time.

Based upon the submitted information and plans of action the DOGM grants the following requests, a **90 day extension until July 12, 2004 for the Duchess State 1-A** and extended shut-in for the Promintory Seiber State 1, State 2 Combined, and St of UT 2-20-21-2 until January 1, 2005.

For reference, Attachment A lists the wells subject to this request. If you have any questions or need additional assistance in regards to the above matters please contact me at (801) 538-5281.

Sincerely,

Dustin Doucet  
Petroleum Engineer

	<b>Well Name</b>	<b>API</b>	<b>Lease Type</b>	<b>Years Inactive</b>
1	Promotory Seiber St	43-019-15318	State	10 Years 11 Months
2	State 2 Combined	43-019-30336	State	10 Years 11 Months
3	St of UT 2-20-21-2	43-019-30699	State	9 Years 6 Months
4	Duchness State 1-A	43-019-30065	State	1 Year 8 Months
5	Larsen State 1	43-019-15317	State	1 Year 0 Months

*T 205 R 24E S-02*

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: ML 48601
2. NAME OF OPERATOR: Linn Bros. Oil & Gas, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
3. ADDRESS OF OPERATOR: PO Box 416 Fruita STATE Co. 81521		7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL FOOTAGES AT SURFACE: QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: 2 20S 24E		8. WELL NAME and NUMBER: Duchess St 1-A
PHONE NUMBER: 970-858-3733		9. API NUMBER: 4301930065
COUNTY: Grand		10. FIELD AND POOL, OR WILDCAT: Greater Cisco
STATE: UTAH		

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

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

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

Set Equipment, Started producing well on 6/28/04

NAME (PLEASE PRINT) Gene A. Linn	TITLE Sec.
SIGNATURE <i>Gene A. Linn</i>	DATE 6/28/04

(This space for State use only)

RECEIVED  
JUL 06 2004  
DIV. OF OIL, GAS & MINING

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

**SUBMIT IN TRIPLICATE – Other instructions on page 2.**

**1. Type of Well**

Oil Well     Gas Well     Other

**2. Name of Operator**  
Linn Bros. Oil & Gas, Inc.

**3a. Address**  
P.O. Box 416    Fruita, CO 81521-0416

**3b. Phone No. (include area code)**  
(970) 858-3733

**4. Location of Well (Footage, Sec., T., R., M., or Survey Description)**  
Sec 2, T 20S, R 24E SWNE

**5. Lease Serial No.**  
ML 48602

**6. If Indian, Allottee or Tribe Name**

**7. If Unit of CA/Agreement, Name and/or No.**

**8. Well Name and No.**  
Duchess State 1-A

**9. API Well No.**  
43-019-30065

**10. Field and Pool or Exploratory Area**  
Greater Cisco

County                  State  
Grand County, UT

**11. CHECK THE 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"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	_____
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	_____

**12. 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

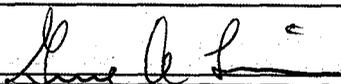
Please change the status of this well from shut-in to producing.

**13. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)**

Gene A. Linn

Title Secretary

Signature



Date 10/16/2012

(This space for State use only)

**RECEIVED**  
**CCT 19 2012**  
**DIV. OF OIL, GAS & MINING**

<b>STATE OF UTAH</b> DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING	<b>FORM 9</b>
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b>  Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.	5. LEASE DESIGNATION AND SERIAL NUMBER: ML-39901
1. TYPE OF WELL Oil Well	6. IF INDIAN, ALLOTTEE OR TRIBE NAME:  7. UNIT or CA AGREEMENT NAME:
2. NAME OF OPERATOR: LINN BROS OIL & GAS INC	8. WELL NAME and NUMBER: DUCHESS STATE 1-A
3. ADDRESS OF OPERATOR: P.O. Box 416 , Fruita, CO, 81521	9. API NUMBER: 43019300650000
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1632 FNL 1919 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SWNE Section: 02 Township: 20.0S Range: 24.0E Meridian: S	9. FIELD and POOL or WILDCAT: GREATER CISCO  COUNTY: GRAND  STATE: UTAH
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	

TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 11/7/2013	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> CASING REPAIR
<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> CHANGE WELL NAME
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> CONVERT WELL TYPE
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> NEW CONSTRUCTION
	<input type="checkbox"/> OPERATOR CHANGE	<input checked="" type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> PLUG BACK
	<input type="checkbox"/> PRODUCTION START OR RESUME	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	<input type="checkbox"/> TEMPORARY ABANDON
	<input type="checkbox"/> TUBING REPAIR	<input type="checkbox"/> VENT OR FLARE	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> WATER SHUTOFF	<input type="checkbox"/> SI TA STATUS EXTENSION	<input type="checkbox"/> APD EXTENSION
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> OTHER	OTHER: <input style="width: 100px;" type="text"/>

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

Approved by the  
 Utah Division of  
 Oil, Gas and Mining

Date: November 07, 2013

By: *D. K. Quist*

NAME (PLEASE PRINT) Catherine C. Linn	PHONE NUMBER 970 858-3733	TITLE Administrator
SIGNATURE N/A	DATE 11/7/2013	



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

- State of Utah  
- Department of Natural Resources

Electronic Permitting System - Sundry Notices

**Sundry Conditions of Approval Well Number 43019300650000**

- 1. Notify the Division at least 24 hours prior to conducting abandonment operations. Please call Dan Jarvis at 801-538-5338.**
- 2. All balanced plugs shall be tagged to ensure they are at the depths specified in the procedure.**
  - 3. All annuli shall be cemented from a minimum depth of 100' to the surface.**
  - 4. Surface reclamation shall be done in accordance with R649-3-34 – Well Site Restoration.**
  - 5. All requirements in the Oil and Gas Conservation General Rule R649-3-24 shall apply.**
- 6. If there are any changes to the procedure or the wellbore configuration, notify Dustin Doucet at 801-538-5281 (ofc) or 801-733-0983 (home) prior to continuing with the procedure.**
- 7. All other requirements for notice and reporting in the Oil and Gas Conservation General Rules shall apply.**

11/7/2013

# Wellbore Diagram

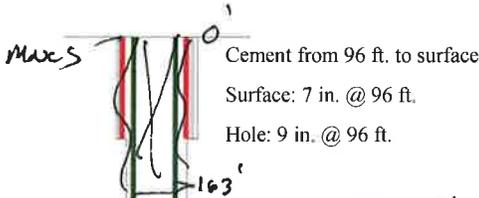
r263

**API Well No:** 43-019-30065-00-00 **Permit No:** **Well Name/No:** DUCHESS STATE 1-A  
**Company Name:** LINN BROS OIL & GAS INC  
**Location:** Sec: 2 T: 20S R: 24E Spot: SWNE  
**Coordinates:** X: 653315 Y: 4329273  
**Field Name:** GREATER CISCO  
**County Name:** GRAND

### String Information

String	Bottom (ft sub)	Diameter (inches)	Weight (lb/ft)	Length (ft)	Capacity (cf/ct)
HOL1	96	9			
SURF	96	7	17		
HOL2	1338	6.25			
PROD	1326	4.5	11.6		11.459

6 1/4" x 4 1/2" (108) → 6.787  
 7" x 4 1/2" → 8.150



### Plug # 2

OUT  $67' / (1.15)(6.787) \approx 95x$   
 $96' / (1.15)(8.150) \approx 105x$

IN  $163' / (1.15)(11.459) \approx 135x$  **Cement Information**

32 sxs total  
 min reqd.

String	BOC (ft sub)	TOC (ft sub)	Class	Sacks
PROD	1326	995 Est	UK	40
SURF	96	0	UK	16

### Perforation Information

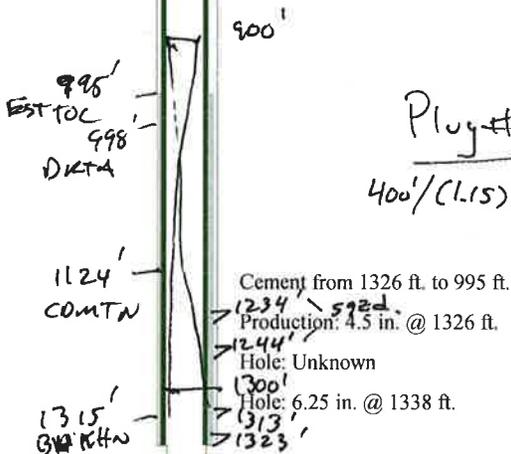
Top (ft sub)	Bottom (ft sub)	Shts/Ft	No Shts	Dt Squeeze
1234	1244			
1313	1323			

### Formation Information

Formation	Depth
MNCs	0
FRSD	770
DKTA	998
CDMTN	1124
BUKHN	1315

### Plug # 1

$400' / (1.15)(11.459) \approx 315x$   
 min. reqd.



**TD:** 1338 **TVD:** **PBTD:**

**STATE OF UTAH  
STATE TRUST LANDS  
DIVISION OF OIL, GAS AND MINING**

**ATTACHMENT TO E-FORM SUNDRY NOTICE**

**P & A PROPOSAL**

		11/07/2013
1. Type of Well		Lease Serial No. ML 48602
<input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well		Well Name and No. Duchess State 1-A
Name of Operator Linn Bros. Oil & Gas, Inc.		API Well No. 43-019-30065
Address P.O. Box 416 Fruita, CO 81521-0416	Phone No. (include area code) (970) 858-3733	Field and Pool or Exploratory Area Greater Cisco
Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 2, T 20S, R 24E SWNE		County                      State Grand County, UT

Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof.

1. Remove any rods and tubing that might be in w
2. Pump cement from 1300' to 900', allow to sit overnight, tag cement and will circulate hole with 9# mud to sur
3. Perf 4-1/2" casing 50' below surface shoe at 16
4. Circulate cement down 4-1/2" casing and back up to the top of surface p
5. Install dry hole marker.
6. Remove all equipment and ancho
7. Clean up all junk and trash from locatio
8. Will do rehab and seeding as requir

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

RECEIVED

FORM 9

MAR 24 2014

**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.

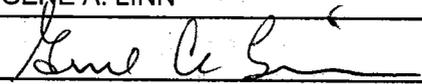
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-39901
2. NAME OF OPERATOR: LINN BROS OIL & GAS INC		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
3. ADDRESS OF OPERATOR: P O BOX 416 CITY FRUITA STATE CO ZIP 81521		7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1632 FNL, 1919 FEL		8. WELL NAME and NUMBER: DUCHESS STATE 1-A
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SWNE 2 20S 24E S		9. API NUMBER: 4301930065
COUNTY: GRAND		10. FIELD AND POOL, OR WILDCAT: GREATER CISCO
STATE: UTAH		

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

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input checked="" type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 3/16/2014	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

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

Ran tubing in, tagged bottom of hole. Pumped 31 sacks of cement. Pulled tubing. Let set 24hrs then ran tubing back in and tagged top of cement at 900'. Pulled tubing. Perfed 4 1/2" casing at 163'. Pumped 32 sacks of cement down casing until it returned up surface pipe to ground level. Installed dry hole marker. Will finish removing tank and rehabbing location in the next 2 months.

NAME (PLEASE PRINT) <u>GENE A. LINN</u>	TITLE <u>VP/SEC</u>
SIGNATURE 	DATE <u>3/18/2014</u>

(This space for State use only)