

UTAH OIL AND GAS CONSERVATION COMMISSION

REMARKS: WELL LOG _____ ELECTRIC LOGS _____ FILE WATER SANDS _____ LOCATION INSPECTED _____ SUB. REPORT abd

* Location Abandoned. Well never drilled. 11-18-83. Application Rescinded

DATE FILED 7-2-80

LAND: FEE & PATENTED STATE LEASE NO. _____ PUBLIC LEASE NO. _____ INDIAN _____

DRILLING APPROVED: 8-8-80

SPUDED IN: _____

COMPLETED: _____ PUT TO PRODUCING _____

INITIAL PRODUCTION: _____

GRAVITY API: _____

GOR: _____

PRODUCING ZONES: _____

TOTAL DEPTH: _____

WELL ELEVATION: _____

DATE ABANDONED: 11-18-83 LA

FIELD: Mexican Hat 3/86

UNIT: _____

COUNTY: San Juan

WELL NO. Nordeen 80.9

API No. 43-037-30582

LOCATION 1018' FT. FROM (N) (S) LINE. 1500' FT. FROM (E) (W) LINE. SE SW 1/4 - 1/4 SEC 5

TWP.	RGE	SEC	OPERATOR	TWP.	RGE	SEC	OPERATOR
42S	19E	5	SAN JUAN MINERALS EXP CO.				

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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

14

5. Lease Designation and Serial No.

Private

6. If Indian, Allottee or Tribe Name

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL DEEPEN PLUG BACK

7. Unit Agreement Name

b. Type of Well

Oil Well Gas Well Other Single Zone Multiple Zone

8. Farm or Lease Name

Nordeen

2. Name of Operator

San Juan Minerals Exploration Company

9. Well No.

80.9

3. Address of Operator

Rt. 1 Box 52 Blythe, CA 92225

10. Field and Pool, or Wildcat

Mexican Hat

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

At surface 1018' from S line and 1500' from W line SE SW

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

Sec 5 T 42 S R 19 E

At proposed prod. zone same

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

3 1/2 miles northeast of Mexican Hat

12. County or Parrish 13. State

San Juan UT

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

1018'

16. No. of acres in lease

907

17. No. of acres assigned to this well

unrestricted spacing

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

250'

19. Proposed depth

450'

Goodridge

20. Rotary or cable tools

Rotary

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

4244 gr

22. Approx. date work will start*

on approval

23. PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
8 3/4	7"	20	60'	10 sk
6 1/4	4 1/2"	14	TD	25 sk

Drill 8 3/4" hole with spud mud to set 7" surface casing. Drill 6 1/4" hole with air to TD. If productive run 4 1/2" casing to TD.

This is known as a low pressure area. Adequate blow out prevention equipment will be used.

Anticipated Tops: top of Goodridge 300'

RECEIVED
JUL 02 1980

APPROVED BY THE DIVISION
OF OIL, GAS, AND MINING
DATE: 8-6-80
BY: M. L. [Signature]

DIVISION OF
OIL, GAS & MINING

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

24. Signed: [Signature] Title: Secretary Date: 6/15/80

(This space for Federal or State office use)

Permit No. _____ Approval Date _____

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

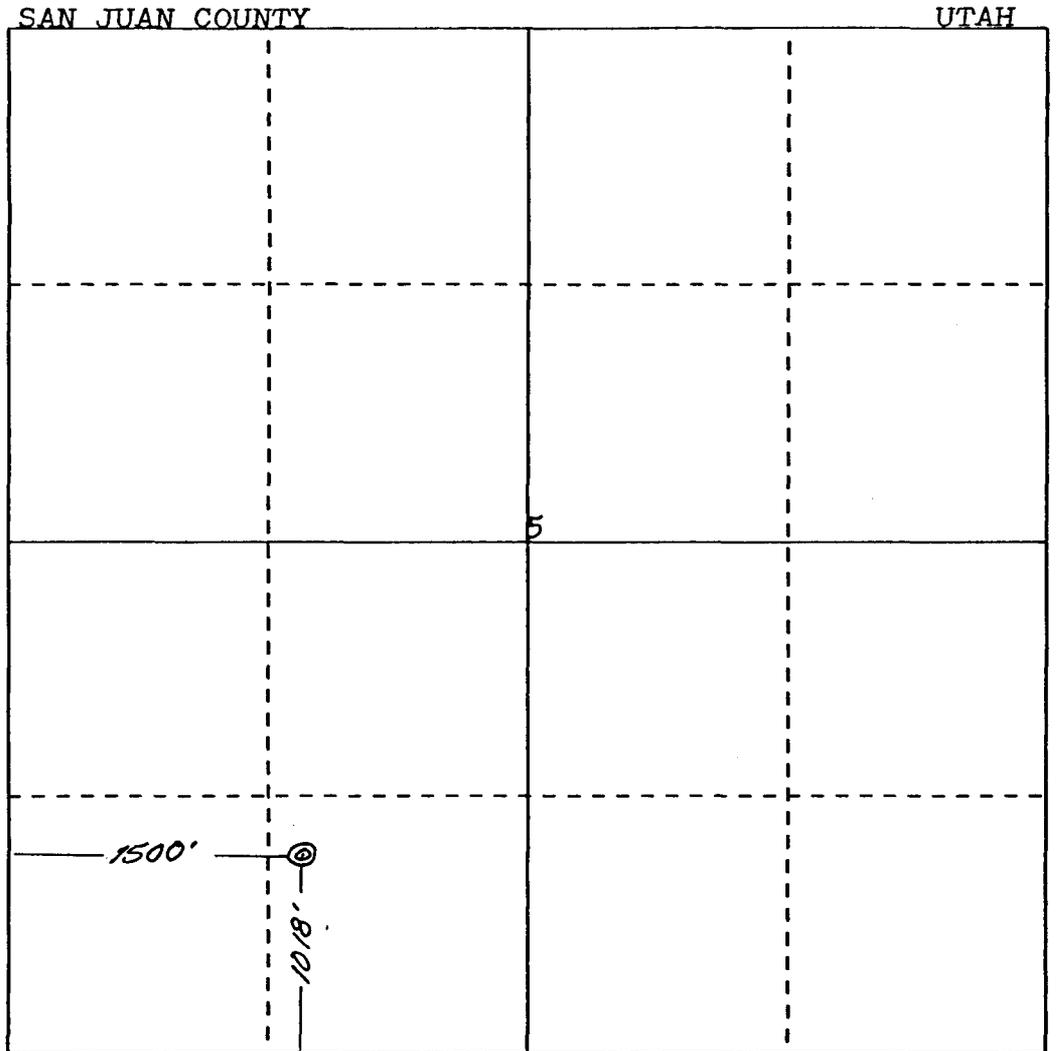
COMPANY WILLIAMS RANCHES

LEASE WILLIAMS WELL NO. 80.9

SEC. 5 T. 42 S. R. 19 E. S.L.M.

LOCATION 1018 FEET FROM THE SOUTH LINE and 1500 FEET FROM THE WEST LINE.

ELEVATION 4244



SCALE - 1 INCH EQUALS 1000 FEET

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

SEAL:

James P. Leese
Registered Land Surveyor.

James P. Leese
Utah Reg. #1472

SURVEYED 8 MAY 19 80

** FILE NOTATIONS **

DATE: July 2, 1980

Operator: San Juan Minerals Exploration

Well No: Norden #80.9

Location: Sec. 5 T. 42S R. 19E County: San Juan

File Prepared:

Entered on N.I.D.:

Card Indexed:

Completion Sheet:

API Number 43-037-30582

CHECKED BY:

Geological Engineer: _____

Petroleum Engineer: M.Y. Minder 8-6-80

Director: _____

APPROVAL LETTER:

Bond Required:

Survey Plat Required:

Order No. 156-3 4/15/80

O.K. Rule C-3

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

Lease Designation See

Plotted on Map

Approval Letter Written

HLPI

August 8, 1980

San Juan Minerals Exploration Co.
Route 1, Box 52
Blythe, California 92225

RE: Well No. Nordeen #80.9, Sec. 5, T. 42S, R. 19E, San Juan County,
Well No. Nordeen #80.6, Sec. 5, T. 42S, R. 19E, San Juan County,
Well No. Nordeen #80.7, Sec. 5, T. 42S, R. 19E, San Juan County,
Well No. Nordeen #80.12, Sec. 5, T. 42S, R. 19E, San Juan County,

Insofar as this office is concerned, approval to drill the above referred to oil wells are hereby granted in accordance with the Order issued in Cause No. 156-3 dated April 15, 1980.

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

MICHAEL T. MINDER - Petroleum Engineer
HOME: 876-3001
OFFICE: 533-5771

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

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

The API numbers assigned to these wells are Nordeen #80-9: 43-037-30582, Nordeen #80.6: 43-037-30585, Nordeen #80.7: 43-037-30584, Nordeen 80.12: 43-037-30583.

Sincerely,

DIVISION OF OIL, GAS AND MINING

Michael T. Minder
Petroleum Engineer

/bh

cc:

SAN JUAN MINERALS EXPLORATION COMPANY

ROUTE 1, BOX 52

BLYTHE, CALIFORNIA 92225

October 14, 1980

Division of Oil, Gas and Mining
1588 West North Temple
Salt Lake City, UT 84116

Re: Report on Wells

Federal #1, 2, 4, 5 - Section 4, T 42 S, R 19 E San Juan County

Federal #32-1, 32-2, 32-3, 32-4, T 41 S, R 19 E San Juan County

Federal #31-1, 31-2, T 41 S, R 19 E San Juan County

Federal #5-20, 5-21, T 42 S, R 19 E San Juan County

Goodridge #80.2 - Sec 8, T 42 S, R 19 E San Juan County

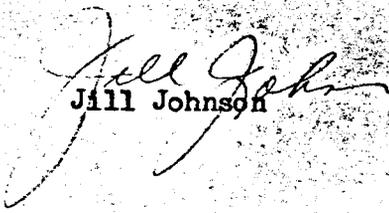
Nordeen

~~XXXXXXXX~~ #80.6, 80.7, 80.9, 80.10, 80.11, 80.12, 80.13, Sec 5, T 42 S R 19 E
San Juan County

Permits from the USGS for the Federal wells was received on September 15,
we will be drilling on these wells as soon as possible.

The Goodridge and Nordeen wells will be drilled as soon as possible.

Sincerely yours,


Jill Johnson

RECEIVED

OCT 17 1980

DIVISION OF
OIL, GAS & MINING



OIL, GAS, AND MINING BOARD

CHARLES R. HENDERSON
Chairman

JOHN L. BELL
C. RAY JUVELIN
THADIS W. BOX
MAXILIAN A. FARBMAN
EDWARD T. BECK
E. STEELE McINTYRE

SCOTT M. MATHESON
Governor

GORDON E. HARMSTON
Executive Director,
NATURAL RESOURCES

CLEON B. FEIGHT
Director

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING
1588 West North Temple
Salt Lake City, Utah 84116
(801) 533-5771

July 20, 1981

San Juan Minerals Exploration Company
Route 1, Box 52
Blythe, California 92225

Re: See Attachment

Gentlemen:

In reference to above mentioned wells, considerable time has gone by since approval was obtained from this office.

This office has not received any notification of spudding. If you do not intend to drill these wells, please notify this Division. If spudding or any other activity has taken place, please send necessary forms. If you plan on drilling these locations at a later date, please notify as such.

Your prompt attention to the above will be greatly appreciated.

Very truly yours,

DIVISION OF OIL, GAS, AND MINING

Sandy Bates
Clerk-Typist

/lm

1. Well No. Williams Federal #2
Sec. 4, T. 42S, R. 19E
San Juan County, Utah
2. Well No. Williams Federal #4
Sec. 4, T. 42S, R. 19E
San Juan County, Utah
3. Well No. Williams Federal #5
Sec. 4, T. 42S, R. 19E
San Juan County, Utah
4. Well No. Federal #5-20
Sec. 5, T. 42S, R. 19E
San Juan County, Utah
5. Well No. Federal #5-21
Sec. 5, T. 42S, R. 19E
San Juan County, Utah
6. Well No. Federal #31-1
Sec. 31, T. 41S, R. 19E
San Juan County, Utah
7. Well No. Federal #31-2
Sec. 31, T. 41S, R. 19E
San Juan County, Utah
8. Well No. Federal #32-1
Sec. 32, T. 41S, R. 19E
San Juan County, Utah
9. Well No. Federal #32-2
Sec. 32, T. 41S, R. 19E
San Juan County, Utah
10. Well No. Federal #32-3
Sec. 32, T. 41S, R. 19E
San Juan County, Utah
11. Well No. Nordeen 80.10
Sec. 5, T. 42S, R. 19E
San Juan County, Utah
12. Well No. Nordeen 80.11
Sec. 5, T. 42S, R. 19E
San Juan County, Utah
13. Well No. Nordeen 80.12
Sec. 5, T. 42S, R. 19E
San Juan County, Utah
14. Well No. Nordeen 80.9
Sec. 5, T. 42S, R. 19E
San Juan County, Utah

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
San Juan Minerals Exploration Co.

3. ADDRESS OF OPERATOR
Rt. 1 Box 52 Blythe, CA 92225

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
1018; from S line and 1500' from
AT SURFACE: S line
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)	<input type="checkbox"/>		<input type="checkbox"/>

5. LEASE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Nordeen

9. WELL NO.
80.9

10. FIELD OR WILDCAT NAME
Mexican Hat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 5 T 42 S R 19 E SLM

12. COUNTY OR PARISH | 13. STATE
San Juan | UT

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4244 gr

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Intentions are to drill this well sometime in the future.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Sec DATE 8-1-81

(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

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
San Juan Minerals Exploration Co.

3. ADDRESS OF OPERATOR
Rt. 1 Box 52 Blythe, CA 92225

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1018' from S line and 1500' from
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: S line

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

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)	<input type="checkbox"/>		<input type="checkbox"/>

5. LEASE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Nordeen

9. WELL NO.
80.9

10. FIELD OR WILDCAT NAME
Mexican Hat Field

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
A" Sec 5 T 42 S R 19 E SLM

12. COUNTY OR PARISH
San Juan

13. STATE

14. API NO.

15. ELEVATIONS, (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Intentions are to drill this well sometime in the future.



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Jill Johnson TITLE Secretary DATE 9-4-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

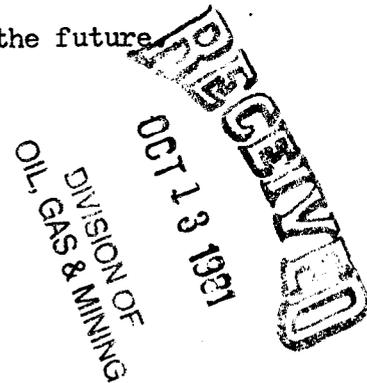
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1018' from S line and 1500' from S line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037030582	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr	9. WELL NO. 80.9
		10. FIELD AND POOL, OR WILDCAT Mexican Hat Field
		11. SEC., T., R., M., OR BLK. AND SURVEY OR ASSA Sec 5 T 42 S R 19 E SIM
		12. COUNTY OR PARISH San Juan
		13. STATE UT

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

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

Intentions are to drill this well sometime in the future.



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

SIGNED *Bill Johnson* TITLE Secretary DATE 10-6-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from ^W line		8. FARM OR LEASE NAME Nordeen	
14. PERMIT NO. 43 037 030582		9. WELL NO. 80.9	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 5 T 42 S R 19 E SIM	
		12. COUNTY OR PARISH San Juan	13. STATE UT

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

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

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

Intentions are to drill this well sometime in the future.

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

SIGNED *John Johnson* TITLE Secretary DATE 4-4-81

(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**

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
San Juan Minerals Exploration Co.

3. ADDRESS OF OPERATOR
R5, 1 Box 52 Bly the, CA 92225

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1018' from S line and 1500' from
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: S line

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

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other)	<input type="checkbox"/>	<input type="checkbox"/>

5. LEASE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Nordeen

9. WELL NO.
80.9

10. FIELD OR WILDCAT NAME
Mexican Hat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 5 T 42 S R 19 E SIM

12. COUNTY OR PARISH
San Juan

13. STATE
UT

14. API NO.
43 037 30582

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4244 gr

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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

This well has not been drilled, intentions are to drill sometime in the future.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Secretary DATE 12-1-81

(This space for Federal or State office use)

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

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR San Juan Minerals Exploration Co.</p> <p>3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1018' from S line and 1500' from E W line</p>		<p>5. LEASE DESIGNATION AND SERIAL NO.</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Nordeen</p> <p>9. WELL NO. 80.9</p> <p>10. FIELD AND POOL, OR WILDCAT Mexican Hat</p> <p>11. SEC., T., R., M., OR BLK. AND SUBST. OR AREA Sec 5 T 42 S R 19 E SLM</p>
<p>14. PERMIT NO. 4 3 037 D 30582</p>	<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr</p>	<p>12. COUNTY OR PARISH San Juan</p> <p>13. STATE UT</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"/>	(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.) *

Intentions are to drill this well sometime in the future.

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

SIGNED <u><i>Jill Johnson</i></u>	TITLE <u>Secretary</u>	DATE <u>1-11-82</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from S line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30582		9. WELL NO. 80.9
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
		12. COUNTY OR PARISH San Juan
		13. STATE UT

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

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

Intentions are to drill this well sometime in the future.

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Secretary DATE 2-11-82

(This space for Federal or State office use)

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

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from Sline		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30582		9. WELL NO. 80.9
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec 5 T 42 S R 19 E SLM
		12. COUNTY OR PARISH San Juan
		13. STATE UT

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

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

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

Intentions are to drill this well sometime in the future.

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

SIGNED *Jill Johnson* TITLE Secretary DATE 3-2-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from E line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 030582		9. WELL NO. 80.9
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 4244 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR BLK. AND SUBST OR AREA Sec 5 T 42 S R 19 E
		12. COUNTY OR PARISH San Juan
		13. STATE UT

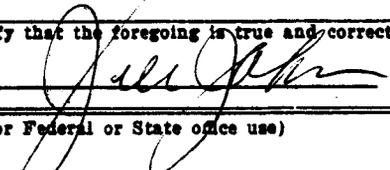
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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

Intentions are to drill this well sometime in the future.

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

SIGNED  TITLE Secretary DATE 4-12-82

(This space for Federal or State office use)

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

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR <i>San Juan Minerals Corp. Co.</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>Box 1 Box 52 Bluff Co 92225</i>		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 <i>1018 from S line & 1500' from W line</i>		8. FARM OR LEASE NAME <i>Nardson</i>
14. PERMIT NO. <i>43 037030582</i>		9. WELL NO. <i>80-9</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>4244 gr</i>		10. FIELD AND POOL, OR WILDCAT <i>Mexican Flat</i>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA <i>Sec 5 T42SR192</i>
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.)*		12. COUNTY OR PARISH <i>San Juan</i>
		13. STATE <i>Utah</i>

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

Intentions are to drill this well sometime in the future

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

SIGNED *Bill John* TITLE *Sec* DATE *5-14-82*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

		5. LEASE DESIGNATION AND SERIAL NO.	
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		8. FARM OR LEASE NAME Nordeen	
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		9. WELL NO. 80.9	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1018' from S line and 1500' from W line		10. FIELD AND POOL, OR WILDCAT Mexican Hat Field	
		11. SEC., T., R., M., OR BLE. AND SUBST. OR AREA Sec 5 T 42 S R 19 E	
14. PERMIT NO. 43 037 30582	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 4244 gr	12. COUNTY OR PARISH San Juan	13. STATE UT

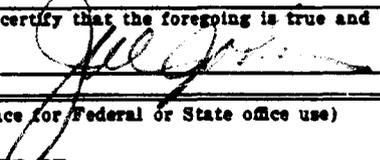
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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

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

This well has not been drilled, plans are to drill sometime in the future.

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

SIGNED <u></u>	TITLE <u>Secretary</u>	DATE <u>6-5-82</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

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

3 IN TRIPLICATE*
(See instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from W line		8. FARM OR LEASE NAME Nordeen	
14. PERMIT NO. 43 037 30582		9. WELL NO. 80.9	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat	
		11. SEC., T., R., M., OR BLK. AND SUBBY OR ARRA Sec 5 T 42 S R 19 E	
		12. COUNTY OR PARISH San Juan	13. STATE UT

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

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

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

This well has not been drilled, plans are to drill in the future.

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

SIGNED [Signature] TITLE Sec DATE 7-15-82

(This space for Federal or State office use)

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

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from W line		8. FARM OR LEASE NAME Norden	
14. PERMIT NO. 43 037 30582		9. WELL NO. 80.9	
15. ELEVATIONS (Show whether DV, RT, GR, etc.) 4244 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat	
		11. SEC., T., R., M., OR BLK. AND SUBVY OR AREA Sec 5 T 42 S R 19 E	
		12. COUNTY OR PARISH San Juan	13. STATE UT

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	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"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

This well has not been drilled, plans are to drill sometime in the future.

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

SIGNED TITLE Secretary DATE 8-14-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Apr

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

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Nordeen

9. WELL NO. 80.9

10. FIELD AND POOL, OR WILDCAT
Mexican Hat

11. SEC., T., R., M., OR B.L.K. AND
SUBVY OR AREA
Sec 5 T 42 S R19 E

12. COUNTY OR PARISH 13. STATE
San Juan UT

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
San Juan Minerals Exploration Co.

3. ADDRESS OF OPERATOR
Rt. 1 Box 52 Blythe, CA 92225

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

1018' from W line and 1500' from W line

14. PERMIT NO. 43 037 30582

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
42244 gr

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) _____	

(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.)*

Intentions are to drill this well sometime in the future.

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

SIGNED *Gene Johnson* TITLE Secretary DATE 9-10-82

(This space for Federal or State office use)

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

M

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 1 Box 52 Hlythe, CA 92225		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 1018' from S line and 1500' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30582	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr	9. WELL NO. 80.9
		10. FIELD AND POOL, OR WILDCAT Mexican Hat Field
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
		12. COUNTY OR PARISH San Juan
		13. STATE UT

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

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

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

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

Intentions are to drill this well sometime in the future.

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

SIGNED *Julie Johnson* TITLE Secretary DATE 10-11-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA

12. COUNTY OR PARISH

13. STATE

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
 SAN JUAN MINERALS EXPLORATION CO

3. ADDRESS OF OPERATOR
 RT 1 Box 52 Blythe, x CA 92225

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

1018' from S line and 1500' from W line

14. PERMIT NO.
 43 037 30582

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
 4244 gr

San Juan

UT

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

PULL OR ALTER CASING
 MULTIPLE COMPLETE
 ABANDON*
 CHANGE PLANS

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

REPAIRING WELL
 ALTERING CASING
 ABANDONMENT*

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

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

Intentions are to drill this well in the future

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

SIGNED [Signature]

TITLE Secretary

DATE 11-15-82

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME Nordeen
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		9. WELL NO. 80.9
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		10. FIELD AND POOL, OR WILDCAT Mexican Hat Field
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1018' from S line and 1500' from W line		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
14. PERMIT NO. 43 037 30582	15. ELEVATIONS (Show whether DF, RT, CR, etc.) 4244 gr	12. COUNTY OR PARISH San Juan
		13. STATE UT

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

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

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

~~XXX~~ Intentions are to drill this well sometime in the future

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

SIGNED _____	TITLE <u>Secretary</u>	DATE <u>12-8-82</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30582		9. WELL NO. 80.9
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat Field
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
		12. COUNTY OR PARISH San Juan
		13. STATE UT

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	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"/>		(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.) *

XXXX Intentions are to drill this well sometime in the future

RECEIVED
DEC 16 1982

DIVISION OF OIL, GAS & MINING

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

SIGNED *Jill Johns* TITLE Secretary DATE 12-8-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from W line		8. FARM OR LEASE NAME Nordeen	
14. PERMIT NO. 43 037 30582		9. WELL NO. 80.9	
15. ELEVATIONS (Show whether dr, nt, or, etc.) 4244 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat	
		11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA Sec 35 T 42 S R 19 E	
		12. COUNTY OR PARISH San Juan	13. STATE UT

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

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

Intentions are to drill this well sometime in the future.

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

SIGNED *Julie Johnson* TITLE Secretary DATE 1-18-83

(This space for Federal or State office use)

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

2

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <i>Private</i>																				
2. NAME OF OPERATOR <i>San Juan Minerals Expl.</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																				
3. ADDRESS OF OPERATOR <i>Rt 1 Box 52 Blythe Ca 92225</i>		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 <i>1018' from S line & 1500' from W line</i>		8. FARM OR LEASE NAME <i>Norden</i>																				
14. PERMIT NO. <i>43 137 30582</i>	15. ELEVATIONS (Show whether DF, RT, OR, etc.) <i>4244 gw</i>	9. WELL NO. <i>809</i>																				
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT <i>Thruven Nat</i>																				
<table border="0"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>TEST WATER SHUT-OFF <input type="checkbox"/></td> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>WATER SHUT-OFF <input type="checkbox"/></td> <td>REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT* <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td>(Other) _____</td> <td></td> </tr> </table>		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) _____		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA <i>Sec 5 T28 R19E</i>
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) _____																				
		12. COUNTY OR PARISH <i>Su Gunn</i>																				
		13. STATE <i>Ut</i>																				

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.)*

Intentions are to drill sometime in the future

RECEIVED
FEB 22 1983

DIVISION OF
OIL GAS & MINING

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

SIGNED *Julie Johnson* TITLE *Secretary* DATE *2/14/83*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR San Juan Minerals Exploration Co.</p> <p>3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1018' from S line and 1500' from W line</p>		<p>5. LEASE DESIGNATION AND SERIAL NO.</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Nordeen</p> <p>9. WELL NO. 80.9</p> <p>10. FIELD AND POOL, OR WILDCAT Mexican Hat</p> <p>11. SEC., T., R., M., OR S&L& AND SURVEY OR AREA Sec 5 T 42 S R 19 E</p> <p>12. COUNTY OR PARISH San Juan</p> <p>13. STATE UT</p>
<p>14. PERMIT NO. 43 037 30582</p>	<p>15. ELEVATIONS (Show whether OF, RT, GR, etc.) 4244 gr</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.)

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

This well has not been drilled plans are to drill sometime in the future.

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

SIGNED _____ TITLE Sec DATE 3-17-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1018' from S line and 1500' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30582		9. WELL NO. 80.9
15. ELEVATIONS (Show whether SP, TV, CR, etc.) 4244' GR		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR S.E.C. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
		12. COUNTY OR PARISH 13. STATE San Juan UT

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

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

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

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

Plans are to drill sometime in the future.

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

SIGNED Bill Jones TITLE Secretary DATE 4-12-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUBMIT IN TRIPLICATE*
Other instructions on
reverse side)

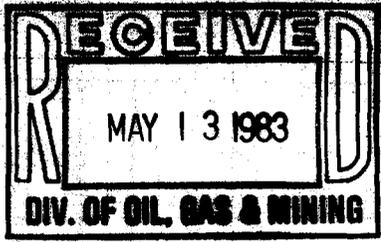
7

SUNDRY NOTICES AND REPORTS ON WELLS <small>(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</small>		5. LEASE DESIGNATION AND SERIAL NO.
1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTED OR TRIBE NAME
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P.O. Box 52 Blythe, CA 92225		8. FARM OR LEASE NAME Nordeen
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1000' from S line and 1500' from W line		9. WELL NO. 80.9
14. PERMIT NO. 40 027 00582		10. FIELD AND FOOT, OR WILDCAT Mexican Hat
15. SLANTINGS (Show whether SW, SE, etc. etc.) 4244 81		11. SEC., T., R., N., OR S.E. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		12. COUNTY OR PARISH 13. STATE San Juan UT

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETS <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	(Other) _____
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

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

Plans are to drill sometime in the future.



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

SIGNED Bill Johnson TITLE Secretary DATE 5-9-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

21
SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225		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 1010' from S line and 1500' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 10 007 00592		9. WELL NO. 80,9
15. ELEVATIONS (Show whether of, to, or, etc.) 1244 ft		10. FIELD AND POOL, OR WELDFIELD Mexican Hat
		11. SEC., T., R., M., OR S.E. AND CORNER OF AREA Sec 5 T 42 S R 19 E
		12. COUNTY OR PARISH OR TERRITORY San Juan UT

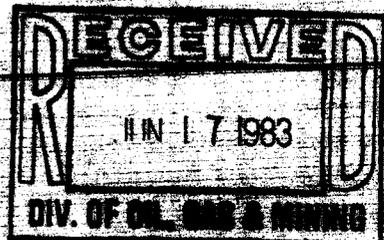
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	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 PLANN <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent data, 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 notes pertinent to this work.)

Plans are to drill sometime in the future.



18. I hereby certify that the foregoing is true and correct
SIGNED Bill Johnson TITLE Secretary DATE 6-12-83

(This space for Federal or State office use)

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

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

3 COPIES IN TRIPLICATE*
(Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

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.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

12. COUNTY OR PARISH 13. STATE

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
San Juan Minerals Expl. Co

3. ADDRESS OF OPERATOR
Rt 1 Box 52 Blythe Ca 92225

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

1018' from line & 1500' from W line

14. PERMIT NO.
43037-30585

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
4244' g

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDISING

(Other)

REPAIRING WELL

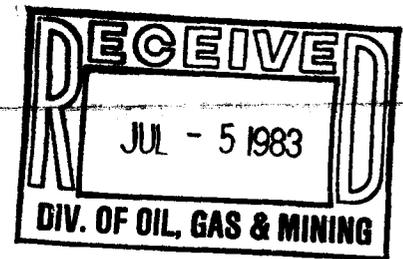
ALTERING CASING

ABANDONMENT*

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

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

Plans are to drill sometime in the future.



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

SIGNED

Gail Johnson

TITLE

Secretary

DATE

7-1-83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

COUNTERSIGNATURES OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

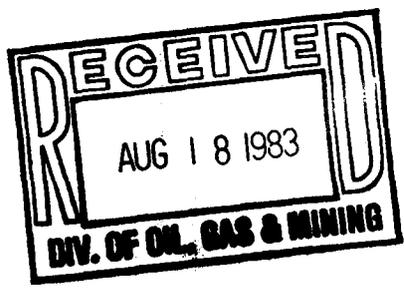
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL [X] GAS WELL [] OTHER []
2. NAME OF OPERATOR: San Juan Minerals Expl. Co
3. ADDRESS OF OPERATOR: P.O. Box 52, Blythe, Ca
4. LOCATION OF WELL: 1018' from Stine & 1500' from Uline
5. LEASE DESIGNATION AND SERIAL NO.
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME: Morden
9. WELL NO.: 8091
10. FIELD AND POOL, OR WILDCAT: Morden Wat
11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA: Sec 5 T42S19E
12. COUNTY OR PARISH: San Juan
13. STATE: UT
14. PERMIT NO.: 43 037 30582
15. ELEVATIONS: 4244 ft

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF, FRACTURE TREAT, SHOOT OR ACIDIZE, REPAIR WELL, FULL OR ALTER CASING, MULTIPLE COMPLETE, ABANDON*, CHANGE PLANS
SUBSEQUENT REPORT OF: WATER SHUT-OFF, FRACTURE TREATMENT, SHOOTING OR ACIDIZING, REPAIRING WELL, ALTERING CASING, ABANDONMENT*

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.)

Plans are to drill sometime in the future



18. I hereby certify that the foregoing is true and correct
SIGNED: [Signature] TITLE: Sec DATE: 8/14/83

(This space for Federal or State office use)

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

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR San Juan Minerals Exploration Co.</p> <p>3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1018' from S line and 1500' from W line</p> <p>14. PERMIT NO. 43 037 30582</p>	<p>5. LEASE DESIGNATION AND SERIAL NO.</p> <p>6. IF INDIAN, ALLIANCE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Nordeen</p> <p>9. WELL NO. 80.9</p> <p>10. FIELD AND POSITION WILDCAT</p> <p>11. SEC., T., R., M. BLK. AND SURVEY OR Sec 5 T 42 S R 19 E</p> <p>12. COUNTY OR PARISH San Juan</p> <p>13. STATE UT</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4244 gr</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"/>	REPAIR WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDON WELL* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completions 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 major intervals and zones pertinent to this work.)*

Plans are to drill sometime in the future.

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

SIGNED *Bill Johnson* TITLE Sec DATE 9-14-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUBMIT TRIPLICATE
(Other instructions on reverse side)

BEST COPY AVAILABLE

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 checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR <i>San Juan Minerals Expl Co</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>Rt 1 Box 52 Blythe Ca 92225</i>		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space below.) At surface <i>1018' from line & 1500' from W line</i>		8. FARMOR LEASE NAME <i>Norden</i>
14. PERMIT NO. <i>43 037 30582</i>		9. WELL NO. <i>809</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>4244 gr</i>		10. FIELD AND POOL, OR WILDCAT <i>Mexican Hat</i>
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA <i>Sec 5 T45 R19E</i>
		12. COUNTY OR PARISH <i>San Juan UT</i>
		18. STATE <i>UT</i>

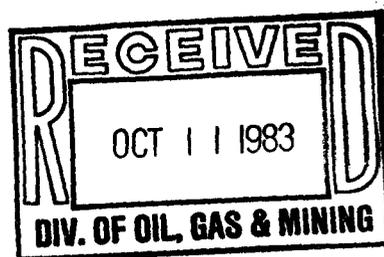
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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"/>

(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.)*

Plans are to drill sometime in the future



18. I hereby certify that the foregoing is true and correct
SIGNED *Gene Jones* TITLE *Sec* DATE *10-5-83*

(This space for Federal or State office use)

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



STATE OF UTAH
NATURAL RESOURCES
Oil, Gas & Mining

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

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

October 18, 1983

San Juan Minerals Exploration Company
Rt # 1, Box # 52
Blythe, California 92225
Att: Jill Johnson

Re: See attached list of wells

Dear Ms. Johnson:

Due to excessive time delay in commencing drilling operations approval to drill the subject wells are hereby rescinded effective one calendar month from the date of this notice.

A new Application for Permit to Drill must be filed with this office for approval, prior to future drilling of the subject locations.

Respectfully,

DIVISION OF OIL, GAS AND MINING

A handwritten signature in cursive script, appearing to read "Norman C. Stout".

Norman C. Stout
Administrative Assistant

NCS/cf

Well No. Nordeen # 12
615' FSL, 1068' FWL
SW SW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Nordeen # 80.8
936' FSL, 1225' FWL
SW SW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Nordeen # 80.9
1018' FSL, 1500' FWL
SW NW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Nordeen # 80.10
1216' FSL, 1634' FWL
SE SW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Nordeen # 80.11
1456' FSL, 1789' FWL
NE SW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Nordeen # 80.12
1055' FSL, 1945' FWL
SE SW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Nordeen # 80.14
495' FSL, 1680' FWL
SE SW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Nordeen # 80.15
194' FSL, 1581' FWL
SE SW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Nordeen # 81.1
1638' FSL, 1917' FWL
NE SW, Sec. 5, T. 42S, R. 19E.
San Juan County, Utah

Well No. Goodridge # 80.16
159' FNL, 1430' FWL
NE NW, Sec. 8, T. 42S, R. 19E.
San Juan County, Utah

Well No. Goodridge # 80.17
442' FNL, 1365' FWL
NE NW, Sec. 8, T. 42S, R. 19E.
San Juan County, Utah

Well No. Goodridge # 2
840' FNL, 1099' FWL
NW NW, Sec. 8, T. 42S, R. 19E.
San Juan County, Utah

Well No. Goodridge # 71
919' FNL, 294' FWL
NW NW, Sec. 8, T. 42S, R. 19E.
San Juan County, Utah

Well No. Goodridge # 72
893' FNL, 655' FWL
NW NW, Sec. 8, T. 42S, R. 19E.
San Juan County, Utah