

UTAH OIL AND GAS CONSERVATION COMMISSION

*

REMARKS WELL LOG ELECTRIC LOGS FILE WATER SANDS LOCATION INSPECTED SUB REPORT/abd

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 Well never drilled - Application Rescinded

DATE FILED 7-2-80

LAND FEE & PATENTED STATE LEASE NO PUBLIC LEASE NO INDIAN

DRILLING APPROVED: 8-8-80

SPUDDED 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 3/96

UNIT:

COUNTY: San Juan

WELL NO Nordeen 80.12

API No. 43-037-30583

LOCATION 1055' FT FROM (E) (S) LINE. 1945' 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

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 Co.

9. Well No.

80.12

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

1055' from S line and 1945' from W line

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

Sec 5 T 42 S R 19 E S1M

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)

1055'

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.

350'

19. Proposed depth

450'

20. Rotary or cable tools

Rotary

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

4267 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 blowout prevention equipment will be used.

Anticipated Tops: Top of Goodridge 300'

APPROVED BY THE DIVISION
OF OIL, GAS, AND MINING

DATE: 8-6-80

BY: M. J. Minder

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 Lee Johnson Title **Secretary** Date 7-22-80

(This space for Federal or State office use)

Permit No. _____ Approval Date _____

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

*See Instructions On Reverse Side

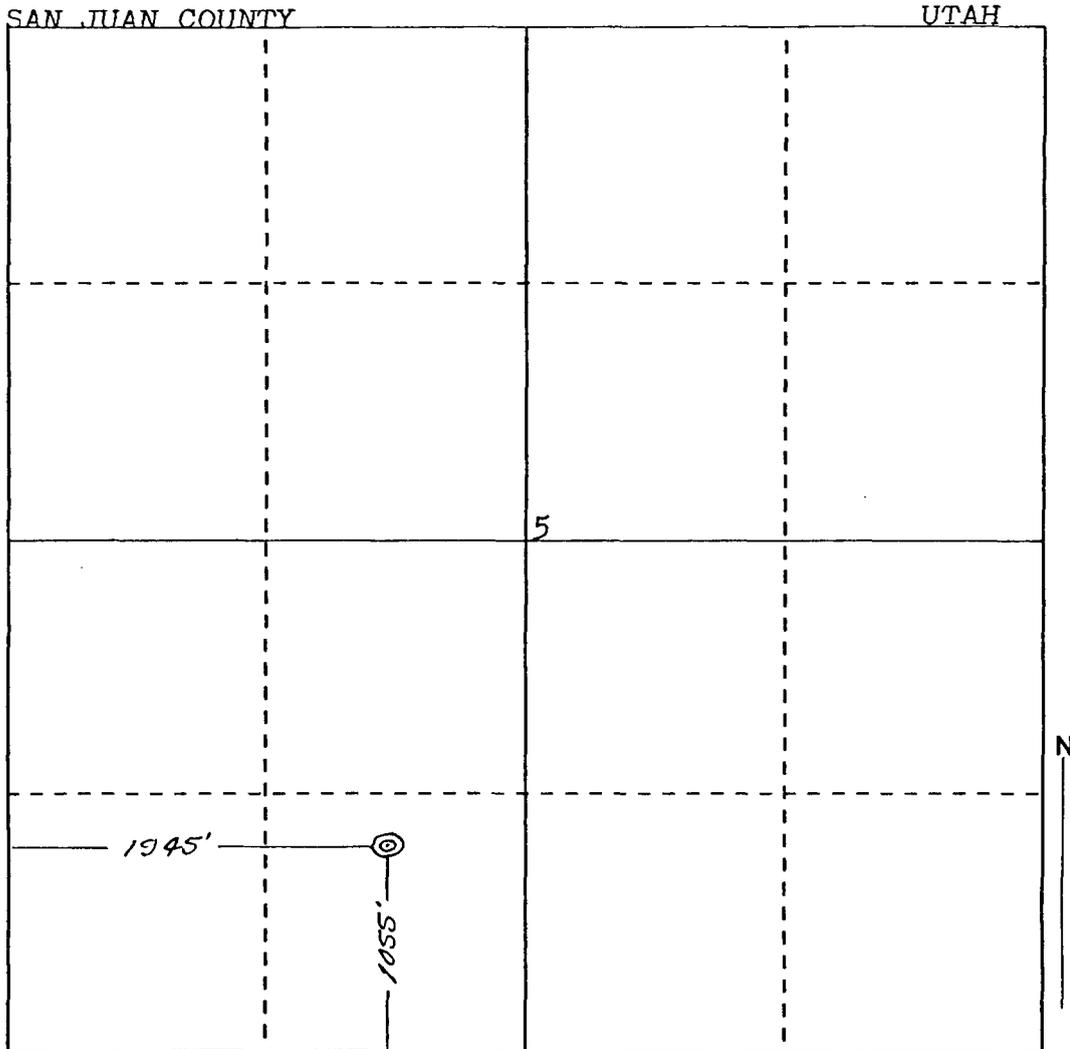
COMPANY WILLIAMS RANCHES

LEASE WILLIAMS WELL NO. 80.12

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

LOCATION 1055 FEET FROM THE SOUTH LINE and 1945 FEET FROM THE WEST LINE.

ELEVATION 4267



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: Aug 6, 1980
OPERATOR: San Juan Minerals Expl. Co
WELL NO: Norden 80.12
Location: Sec. 5 T. 42S R. 19E County: San Juan

File Prepared: Entered on N.I.D:
Card Indexed: Completion Sheet:

API Number 43-037-30583

CHECKED BY:

Petroleum Engineer: M.S. Munder 8-6-80

Director: _____

Administrative Aide: _____

APPROVAL LETTER:

#3
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 Plotted on Map
Approval Letter Written
Hot Line P.I.

nl PI

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

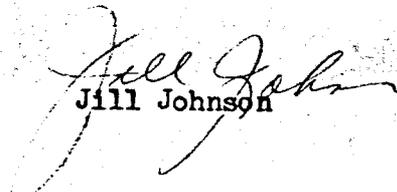
Nordeen

~~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



SCOTT M. MATHESON
Governor

OIL, GAS, AND MINING BOARD

GORDON E. HARMSTON
Executive Director,
NATURAL RESOURCES

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

CHARLES R. HENDERSON
Chairman

CLEON B. FEIGHT
Director

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

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.)
1055' from S line and 1945' from
AT SURFACE:
AT TOP PROD. INTERVAL: W line
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)			

5. LEASE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Hordeen

9. WELL NO. 80.12

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 S1M

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

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4267 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 Julie Johnson TITLE Secretary 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: 1055' from S line and 1945' from
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: W line

5. LEASE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Nordeen

9. WELL NO.
80.12

10. FIELD OR WILDCAT NAME
Mexican Hat Field

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 5 T 42 S R 19 S1M

12. COUNTY OR PARISH
San Juan

13. STATE
UT

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4257 ft

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"/>

(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~~ the future.



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

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

SIGNED Julie 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 1055' from S line and 1945' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30583	15. ELEVATIONS (Show whether OF, RT, OR, etc.) 4267 gr	9. WELL NO. 80.12
		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR BLM. AND SUBVY OR AREA Sec 5 T 42 S R 19 E S1M
		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"/>	

(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.

RECEIVED
OCT 13 1981
DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct
SIGNED Joe 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 1055' from S line and 1945' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30583	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4267 gr	9. WELL NO. 80.12
		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 Jjan
		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"/>
(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 11-6-81

(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: 1055' from E line and 1945' from
AT TOP PROD. INTERVAL: W line
AT TOTAL DEPTH: W 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
Private land

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Nordeen

9. WELL NO. 80.12

10. FIELD OR WILDCAT NAME
Mexican Hat Field

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 30583

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4267 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 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.)

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 1055' from S line and 105 1945' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30583		9. WELL NO. 80.12
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 4267 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR B.L. AND SUBST OR AREA Sec 5 T 42 S R 19 E SLM
		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 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.

RECEIVED

JAN 14 1982

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct
SIGNED *Gene John* TITLE Secretary DATE 1-11-82

(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 1055' from S line and 1945' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30583		9. WELL NO. 80.12
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 4267 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR B.L.K. AND SURVEY OR ABBA 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.)

<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</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 1055' from S line and 1945' from W line</p> <p>14. PERMIT NO. 43 037 30583</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. 80.12</p> <p>10. FIELD AND POOL, OR WILDCAT Mexican Hat</p> <p>11. SEC., T., R., M., OR B.L.E. AND SUBVY 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>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4267 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"/>	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.)

Intentions are to drill this well sometime in the future.

RECEIVED

MAR 15 1982

DIVISION OF
OIL, GAS & MINING

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

SIGNED *Juli Johnson* TITLE Secretary DATE 3-12-82

(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.)

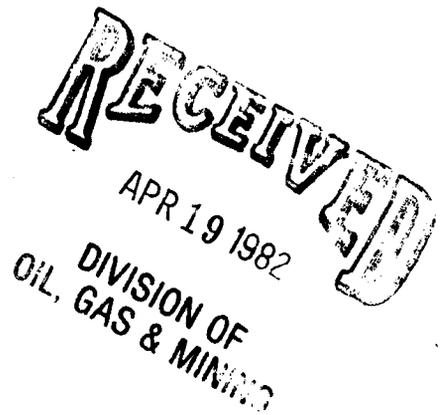
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. NAME OF OPERATOR San Juan Minerals Exploration Co. 3. ADDRESS OF OPERATOR Rt. 1 Box 52 Blythe, CA 92225 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1055' from S line and 1945' from W line		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. 80.12 10. FIELD AND POOL, OR WILDCAT Mexican E at 11. SEC., T., R., M., OR BLE. AND SUBVY OR ABBA Sec 5 T 42 S R 19 E SLM 12. COUNTY OR PARISH San Juan 13. STATE UT
14. PERMIT NO. 43 037 30583	15. ELEVATIONS (Show whether DV, RT, GR, etc.) 4267 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) <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 *Gene Johnson* 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. 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 <i>San Juan Minerals Equip Co</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>PO Box 52 Bluff, Co</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>1055' from S line & 1945' from W line</i>		8. FARM OR LEASE NAME <i>Norden</i>
14. PERMIT NO. <i>43037 30583</i>	15. ELEVATIONS (Show whether of, RT, GR, etc.) <i>4267 gr</i>	9. WELL NO. <i>80, 12</i>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT <i>Newman State</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.)		11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA <i>Sec 5 S42 R19E</i>
		12. COUNTY OR PARISH <i>San Juan</i>
		13. STATE <i>Utah</i>

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

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

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

*This well has not been drilled
Plans are to drill sometime in the future*

RECEIVED
MAY 19 1982

DIVISION OF
OIL, GAS & MINING

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

SIGNED *Jim Jones* TITLE *SR* DATE *5-12-82*

(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.)

		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. 80.12	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1055' from S line and 1945' from W line		10. FIELD AND POOL, OR WILDCAT Mexican Hat	
		11. SEC., T., R., M., OR BLK. AND SUBST OR AREA Sec 5 Y42S R23E	
14. PERMIT NO. 43 037 30583	15. ELEVATIONS (Show whether DV, RT, GR, etc.) 4267 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, intentions are to drill sometime in the future.

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

SIGNED *Julie Johnson* TITLE Secretary DATE 6-5-82

(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

PRINT 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 <i>San Juan Minerals Exploration</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																				
3. ADDRESS OF OPERATOR <i>RT 1 Box 52 Blythe Ca</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>1055' from S line & 1945' from W line</i>		8. FARM OR LEASE NAME <i>Needson</i>																				
14. PERMIT NO. <i>43 037 30583</i>	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>4267 ft</i>	9. WELL NO. <i>80.12</i>																				
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT <i>Mexican Hat</i>																				
<table border="0"> <tr> <th colspan="2">NOTICE OF INTENTION TO:</th> <th colspan="2">SUBSEQUENT REPORT OF:</th> </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., S., E., OR S.E. AND SURVEY OR AREA <i>Sec 5T42S 19E 56TH</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>San Juan</i>																				
		13. 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"/>	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.)*

Intentions are to drill sometime in future

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

SIGNED *Julie Johnson* TITLE *Sec* DATE *7-15-82*

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

Yaman

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"/> 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 1055° from S line and 1945° from W line 14. PERMIT NO. 43 037 30583		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. 80.12 10. FIELD AND POOL, OR WILDCAT Mexican Hat 11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA See 5 T 42 S R 19 E 12. COUNTY OR PARISH San Juan
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 4267 ft	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"/>	

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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 this well in the futur e.

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

SIGNED *[Signature]* TITLE Secretary DATE 8-14-82

(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 type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		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 1055' from S line and 1945' from W line		8. FARM OR LEASE NAME Nordegn
14. PERMIT NO. 43 037 30503		9. WELL NO. 80.12
15. ELEVATIONS (Show whether OF, RT, OR, etc.) 4267 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
		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.)	

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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:

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
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Nordeen
9. WELL NO. 80.12
10. FIELD AND POOL, OR WILDCAT Mexican Hat
11. SEC., T., R., M., OR B.L. AND SURVEY OR ABMA Sec 5 T 42 S R19 E
12. COUNTY OR PARISH San Juan
13. STATE UT

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
1055' from S line and 1945' from W line

14. PERMIT NO. 43 037 30583

15. ELEVATIONS (Show whether OF, RT, GR, etc.)
4267 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"/>	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) _____

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Intentions are to drill this well sometime in the future.

RECEIVED

OCT 19 1982

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] 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

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration		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 1055' $\frac{1}{2}$ from S line and 1945' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30583		9. WELL NO. 80.12
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 4267 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
12. COUNTY OR PARISH San Juan		11. SEC., T., S., M., OR BLE. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
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 in the future

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

SIGNED *Gay Johnson* TITLE Secretary DATE 11-15-82

(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 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 1055' from S line and 1945' from W line		8. FARM OR LEASE NAME Nurdeen
14. PERMIT NO. 43 037 30583		9. WELL NO. 80.12
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4267 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR B.LK. AND SUBVY OR AREA Sec 8 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.) *

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 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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		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 1055' from S line and 1945' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30583		9. WELL NO. 80.12
15. ELEVATIONS (Show whether SF, RT, GR, etc.) 4267 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		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) _____	
(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.)*

Plans are to drill sometime in the future.

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

SIGNED *Gill Johnson* TITLE Secretary DATE 1-17-83

(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. <i>private</i>
2. NAME OF OPERATOR <i>San Juan Minerals Exploration</i>		6. INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>Rt 11 Box 52 Blythe Ca</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>1055' from S line & 1945' from W line</i>		8. FARM OR LEASE NAME <i>Norden</i>
14. PERMIT NO. <i>43 D37 30583</i>		9. WELL NO. <i>80.12</i>
15. ELEVATIONS (Show whether OF, RT, GR, etc.) <i>4267 gr</i>		10. FIELD AND POOL, OR WILDCAT <i>Thelton Hat</i>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec 5 S42 R19 E</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>Ut</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) _____	

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

Intentions are to drill sometime in the future

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

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.) 1055' from S line and 1945' from W line		8. FARM OR LEASE NAME Nordeen	
14. PERMIT NO. 43 037 30583		9. WELL NO. 80.12	
15. ELEVATIONS (Show whether of, to, or, etc.) 4267 gr		10. FIELDS AND POOL, OR WILDCAT Mexican Hat	
		11. SEC., T., R., M., OR B.L., 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 IS:		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 ACIDISE <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"/>	

(Note: Report failure of multiple completion or Well Completion or Accomplishment Report and Log form.)

17. DESCRIBE PURPOSE OR COMPLETION OF WORK AND STATE ALL PERTINENT DETAILS, AND GIVE PERTINENT DATA, INCLUDING ESTIMATED DATE OF STARTING ANY PROPOSED WORK. (If well is directional, show true vertical locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Plans are to drill this well in the future

RECEIVED
APR 18 1983

DIVISION OF
OIL, GAS & MINING

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

SIGNED Gene Johnson TITLE Sec DATE 4-12-83

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

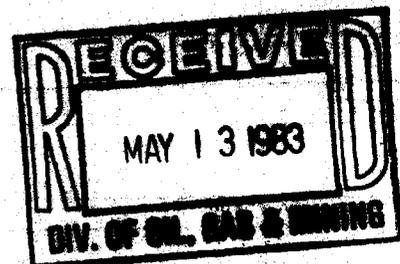
1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Minerals Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Blythe, CA 92225		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1945' from E line and 1945' from W line		8. FARM OR LEASE NAME Cordeen
14. PERMIT NO. 10-101-2450		9. WELL NO. 80-12
15. ELEVATIONS (Show whether OF, ST, OR, etc.) 4267 ft		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR S.W. AND SUBST OR ABBA 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.)*

Plans are to drill this well in the future



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

SIGNED Gene Johnson TITLE Sec DATE 5-9-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

REASONS OF APPROVAL, IF ANY:

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

PRINT IN TRIPPLICATE*
Other instructions on
reverse side)

2 7

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 1000 W. 1000 N. 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 1000' from W line and 1945' from W line		8. FARM OR LEASE NAME Nordeen																				
14. PERMIT NO. 10 007 00580	15. ELEVATION (Show whether at, to, or sea.) 4267 ft	9. WELL NO. 80.10																				
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT Mexican Hat																				
<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>(Other) _____</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) _____	(Other) _____	11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA Sec 5 T 42 S R 12 E
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) _____																			
		12. COUNTY OR PARISH San Juan																				
		13. STATE UT																				

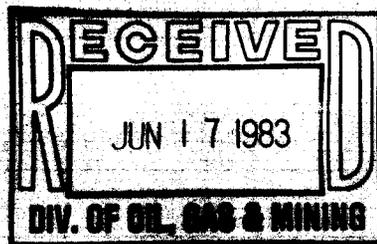
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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.)*

I plan to drill this well in the future



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

SIGNED John J. [Signature] TITLE Sec DATE 6-13-83

(This space for Federal or State (same) use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SET 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.)

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 S.E.C. AND SURVEY OR AREA

12. COUNTY OR PARISH 13. STATE

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Son-Guan Minerals Corp Co

3. ADDRESS OF OPERATOR
PO Box 552 Blythe Ca 92225

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1055' from S line & 1945' from W line

14. PERMIT NO.
43 037 30583

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4267 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:

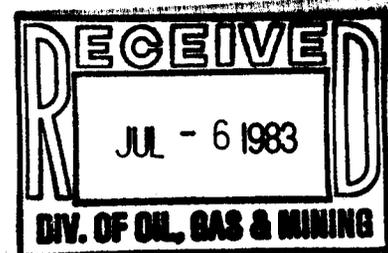
TEST WATER SHUT-OFF FULL OR ALTER CASING
FRACTURE TREAT MULTIPLE COMPLETE
SHOOT OR ACIDIZE ABANDON*
REPAIR WELL CHANGE PLANS
(Other)

WATER SHUT-OFF REPAIRING WELL
FRACTURE TREATMENT ALTERING CASING
SHOOTING OR ACIDIZING ABANDONMENT*
(Other)

(NOTE: Report results of multiple completion on Well Completion or Recombination 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 this well in the future.



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

SIGNED *Joe Johnson* TITLE *Suc* DATE *7-1-83*

(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

MIT IN TRIPLICATE
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. PART OR LEASE NAME
Hordean

9. WELL NO.
8012

10. FIELD AND POOL, OR WILDCAT
Mosier Star

11. SEC., T., S., M. OR BLK. AND SURVEY OR AREA
See 5 T 43 S R 19 E

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

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
1055' from S line + 1945' from W line

14. PERMIT NO.
43 037 30583

15. ELEVATIONS (Show whether DV, RT, GR, etc.)
4269 ft

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.

RECEIVED
AUG 17 1983
DIVISION OF
OIL, GAS & MINING

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

SIGNED *[Signature]* TITLE *[Signature]* 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

PRINT IN TRIPLICATE
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESCRIPTION AND SERIAL NO.
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, NATION 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 1055' from S line and 1945' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30582		9. WELL NO. 80.12
15. ELEVATIONS (Show whether OF, RT, OR, etc.) 4267 gr		10. FIELD AND OR WILDCAT
		11. SEC., T., R. OR BLK. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
		12. COUNTY OR TERRITORY 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 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 sections and zones pertinent to this work.)*

Plans are to drill soemtime in the future.

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

SIGNED [Signature] TITLE Sec DATE 9-14-83

(This space for Federal or State office use)

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

RECEIVED
OCT 7 1983

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

3 MIT IN TRIPLICATE (Other instructions on reverse side)
BEST COPY AVAILABLE

DIVISION OF OIL, GAS & 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.

OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR: *San Juan Minerals Expl. Co*
3. ADDRESS OF OPERATOR: *Rt. P 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
SE SW 1055' from Line 8 1945' from W line

5. LEASE DESIGNATION AND SERIAL NO.
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME: *Hordean*
9. WELL NO.: *80,12*
10. FIELD AND POOL, OR WILDCAT: *Mexican Hat*
11. SEC., T., S., M., OR S.E. AND SURVEY OR AREA: *Sec 5 T 42 S R 19 E*
12. COUNTY OR PARISH: *San Juan* 13. STATE: *UT*

14. PERMIT NO.: *43 037 30583*

15. ELEVATIONS (Show whether DF, RT, OR, etc.): *4216.73*

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 on 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 this well sometime in the future

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

SIGNED *Gene Johnson* TITLE *Sec* DATE *10-5-83*

(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
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 black ink, 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