

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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

5. Lease Designation and Serial No.

Private

6. If Indian, Allottee or Tribe Name

7. Unit Agreement Name

8. Farm or Lease Name

Nordeen

9. Well No.
80.7

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 Parrish

San Juan

13. State

UT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL

DEEPEN

PLUG BACK

b. Type of Well

Oil Well

Gas Well

Other

Single Zone

Multiple Zone

2. Name of Operator

San Juan Minerals Exploration Company

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.*)

At surface

594' from S line and 1399' from W line

SE SW

At proposed prod. zone

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

3 1/2 miles northeast of Mexican Hat

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

594'

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.

300'

19. Proposed depth

450' Goodridge

20. Rotary or cable tools

Rotary

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

4297 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	30 gr Cement to Surface
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.

Goodridge

Anticipated Tops: Top of ~~Goodrich~~ **300;**

APPROVED BY THE DIVISION OF OIL, GAS, AND MINING

DATE: 8-6-80

BY: M.S. Mendenhall

RECEIVED
JUN 23 1980

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: Joe Johnson 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. 80.7

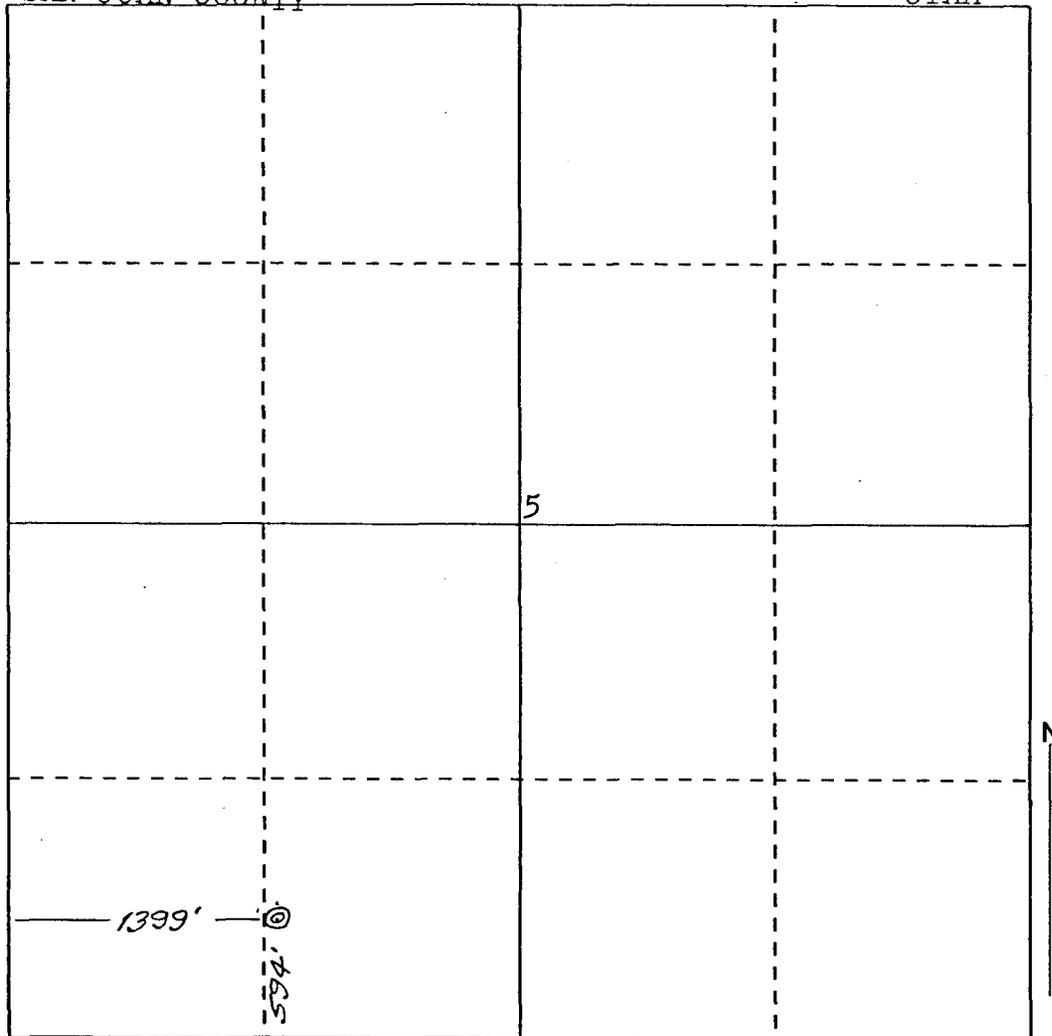
SEC. 5 , T 42 S. , R 19 E. , S.L.M.

LOCATION 594 FEET FROM THE SOUTH LINE and 1399 FEET FROM THE WEST LINE.

ELEVATION 4297

SAN JUAN COUNTY

UTAH



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

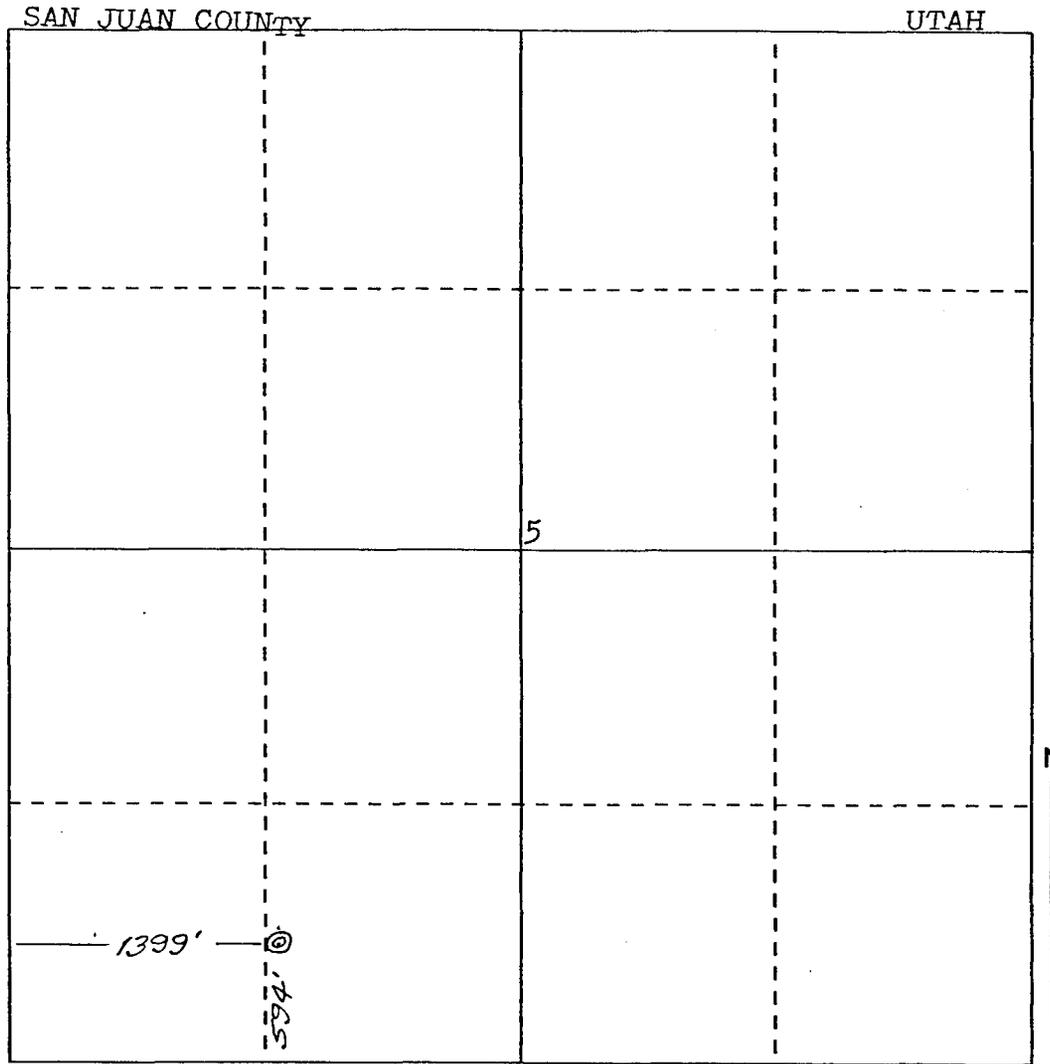
COMPANY WILLIAMS RANCHES

LEASE WILLIAMS WELL NO. 80.7

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

LOCATION 594 FEET FROM THE SOUTH LINE and 1399 FEET FROM THE WEST LINE.

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SEAL:

James P. Leese
Registered Land Surveyor.

James P. Leese
Utah Reg. #1472

SURVEYED 8 MAY , 19 80

** FILE NOTATIONS **

DATE: June 23, 1980

Operator: San Juan Minerals

Well No: Norden # 80.7

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

File Prepared:

Entered on N.I.D.:

Card Indexed:

Completion Sheet:

API Number 43-027-30584

CHECKED BY:

Geological Engineer: _____

Petroleum Engineer: M.S. 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

#3

WQ 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

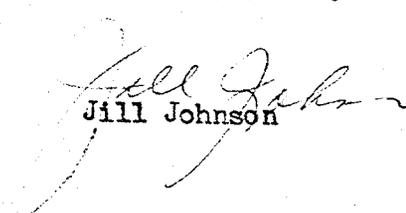
Nordeen

~~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

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

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.)		5. LEASE DESIGNATION AND SERIAL NO.
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR Rt. 1 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 594' from S line and 1399' from W line		9. WELL NO. 80.7
14. PERMIT NO. approved 8/6/80		10. FIELD AND POOL, OR WILDCAT Mexican Hat Field
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 4297 gr		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
		18. 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.)*

Dated spudded 10/17/80 = drilled to a depth of 420'

Waiting on geologist report

RECEIVED

NOV 10 1980

DIVISION OF
OIL, GAS & MINING

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

SIGNED *Jill Job* TITLE Secretary DATE NOV 11-6-80

(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)

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. private
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 594; from S line and 1399' from W line		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30584		9. WELL NO. 80.7
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4297 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

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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"/>
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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"/>	<input checked="" type="checkbox"/>		

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

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

Completion program still pending - waiting on geologist report.

RECEIVED

DEC 11 1980

DIVISION OF OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct
SIGNED *Jill Johnson* TITLE Secretary DATE 12-9-80

(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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

<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 594' from S line and 1399' from W line</p> <p>14. PERMIT NO. 43 037 30584</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. 80.7</p> <p>10. FIELD AND POOL, OR WILDCAT Mexican Hat Field</p> <p>11. SEC., T., R., M., OR BLK. 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>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4297 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"/>
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REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
(Other) _____	<input checked="" type="checkbox"/>		

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

Completion program to begin this month

RECEIVED

JAN 21 1981

DIVISION OF
OIL, GAS & MINING

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

SIGNED *Bill Johnson* TITLE Secretary DATE 1-8-81

(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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.																				
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14. PERMIT NO. 43 037 30584	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4297 gr	9. WELL NO. 80.7																				
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<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) <input type="checkbox"/></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) <input type="checkbox"/>		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec 5 T 42 S R 19 E
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		13. STATE UT																				

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.)*

Completion program still pending on geologist report.

RECEIVED
FEB 18 1981
DIVISION OF
OIL, GAS & MINING

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

SIGNED [Signature] TITLE Secretary DATE 2-9-81

(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: 594' from S line and 1399' from W 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 checked="" type="checkbox"/>		<input type="checkbox"/>

5. LEASE Nordeen

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Nordeen

9. WELL NO. 80.7

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 30584

15. ELEVATIONS (SHOW DF, KDB, AND WD) 4297 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.)*

Holding for geologist report -

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

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

SIGNED [Signature] TITLE Secretary DATE 3-10-81

(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.)
594' from S line and 1399' from W
AT SURFACE:
AT TOP PROD. INTERVAL: 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)	<input checked="" 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. 80.7
10. FIELD OR WILDCAT NAME Mexican Hat Field
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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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Completion program pending.

APR 10 1981

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ DIVISION OF OIL, GAS & MINING

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

SIGNED Joe Johnson TITLE Sec DATE 4-7-81

(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: 594' from S line and 1399' from
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)	<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. 00.7

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

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

14. API NO. 43 037 30584

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4297 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.)*

Holding for further geologist tests

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

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

SIGNED Jill John TITLE Secretary DATE 50 5-13-81

(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.)
594' from S line and 1399' 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
Prigate land

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Nordeen

9. WELL NO. 80.7

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

12. COUNTY OR PARISH
San Juan

13. STATE
UT

14. API NO.
43 037 30584

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4297 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.)*

Holding for ~~but~~ further information from geologist.

JUL 11 1981

DIVISION OF
OIL, GAS & MINES

Subsurface Safety Valve: Manu. and Type _____ Ft.

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

SIGNED *Gene Job* TITLE Secretary DATE 6-2-81

(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: 594' from S line and 1399' from
AT TOP PROD. INTERVAL:
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"/>

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.)*

Holding for further information from geologist.

RECEIVED

JUL 16 1981

DIVISION OF
OIL, GAS & MINING

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

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

SIGNED Bill Johnson TITLE Secretary DATE 7-2-81

(This space for Federal or State office use)

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

5. LEASE
Private land

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Nordeen

9. WELL NO.
80.7

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

12. COUNTY OR PARISH
San Juna

13. STATE
UT

14. API NO.
43 037 30584

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4297 gr

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

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

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5

14

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

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

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

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)*
At surface 594' from S line and 1399' from W line

At top prod. interval reported below
SE SW

At total depth _____

14. PERMIT NO. 43 037 30584 DATE ISSUED 8-6-80

12. COUNTY OR PARISH San Juan 13. STATE UT

15. DATE SPUNDED 10-17-80 16. DATE T.D. REACHED 10-17-80 17. DATE COMPL. (Ready to prod.) abandon 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 4297 gr 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD 420' 21. PLUG, BACK T.D., MD & TVD _____ 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS rotary CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
plugged and ~~is~~ abandoned

25. WAS DIRECTIONAL SURVEY MADE _____

26. TYPE ELECTRIC AND OTHER LOGS RUN _____ 27. WAS WELL CORED _____

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

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

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION _____ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) none WELL STATUS (Producing or shut-in) _____

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

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

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

35. LIST OF ATTACHMENTS _____

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED Jill Johnson TITLE Secretary DATE 8-1-81

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

INSTRUCTIONS

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

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

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

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

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

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

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

37. SUMMARY OF POROUS ZONES:

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH

OPERATOR San Juan Minerals Expl. OPERATOR ACCT. NO. N 0810
 ADDRESS 10970 Williams Ave
Bythe CA 92225

ACTION CODE	CURRENT ENTITY NO.	NEW ENTITY NO.	API NUMBER	WELL NAME	WELL LOCATION				SPUD DATE	EFFECTIVE DATE	
					QQ	SC	TP	RG			COUNTY
B	99999	00490	4303730584	NORDEEN 80.7		5	435	19E	San Juan	10/17/80	3/25/92

WELL 1 COMMENTS:
 Well delivers to NORDEEN #2 TANK

WELL 2 COMMENTS:
 Entity added 4-2-92. jk

WELL 3 COMMENTS:

WELL 4 COMMENTS:

WELL 5 COMMENTS:

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

RECEIVED

MAR 30 1992

DIVISION OF
 OIL GAS & MINING

Gill Johnson
 Signature
Secretary
 Title
3-25-92
 Date
619, 9222278
 Phone No.

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

DUNDRY 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. fee
2. NAME OF OPERATOR San Juan Minerals Exploration Co.		6. IF INDIAN, CROFTER OR TRIBE NAME
3. ADDRESS OF OPERATOR 10970 Williams Avenue Blythe, CA 92225		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also Section 11 below.) At surface: 594' SL and 1399' WL		8. FARM OR LEASE NAME Nordeen
14. PERMIT NO. 43 037 30584		9. WELL NO. 80.7
15. ELEVATIONS (Show whether DT, RT, GR, etc.) 4297 gr		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., W. OR BLK. AND SURVEY OF AREA Sec 5 T 42S R 19 E
		12. COUNTY OF 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 WELL SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <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 checked="" 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 PENDING 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 trackers and zones pertinent to the well.)*

In response to your letter of March 10, 1992, we are updating our records on all wells in the Mexican Hat area.

It appears that Nordeen 80.7 was reported as abandoned on 8/1/81. This is not correct. It is a producing oil well. I am attaching a copy of the well application and survey plat from 1980. I am also enclosing an entity action form for this well.

RECEIVED

MAR 30 1992

DIVISION OF
OIL GAS & MINING

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

SIGNED *Lee Johnson* TITLE Secretary DATE 3-24-92

(This space is 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 -

Norman H. Bangerter
Governor

Dee C. Hansen
Executive Director

Dianne R. Nielson, Ph.D.
Division Director

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

April 21, 1992

Jill Johnson
San Juan Minerals Exploration Co.
10970 Williams Avenue
Blythe, California 92225

Dear Ms. Johnson:

Re: Nordeen 80.7, API No. 43-037-30584, Sec. 5, T. 42S, R. 19E

Your sundry notice dated March 24, 1992, states the above referenced well is a producing oil well and not plugged and abandoned as previously reported.

Our records do not indicate any production for this well. Please submit reports for any oil, gas and water produced from this well from the date of completion to the present time. If necessary, production from other wells should also be amended to indicate the correct production for the months concerned.

Enclosed are Monthly Oil & Gas Production and Disposition Reports for your convenience in correcting the reporting for this well and any other well that may need to be amended.

Also enclosed is a Well Completion Report for reporting the correct completion information for the referenced well.

Your help in this matter will be greatly appreciated.

Sincerely,

A handwritten signature in cursive script that reads "Vicky Carney".

Vicky Carney
Production Group Supervisor

cc: R. J. Firth
D. T. Staley
D. M. Eatchel
L. D. Clement
File

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

UNIT AGREEMENT NAME

FARM OR LEASE NAME

~~XXXXXXXXXXXX~~ Nordeen

9. WELL NO.

XXXXX 80.7
XXXXXX

10. FIELD AND POOL, OR WILDCAT

Mexican Hat

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

Sec 5 T 42 S R 19 E

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

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

2. NAME OF OPERATOR
San Juan Minerals Exploration Co.

3. ADDRESS OF OPERATOR
10970 Williams Avenue Blythe, CA 92225

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

At surface 594' SL and 1399' WL

At top prod. interval reported below

At total depth

14. API NO.
43 037 30584

DATE ISSUED
6/23/80

12. COUNTY
san Juan

13. STATE
UT

15. DATE SPUNDED
10/17/80

16. DATE T.D. REACHED
10/17/80

17. DATE COMPL. (Ready to prod.)
10/18/80 (Plug & Abd.)

18. ELEVATIONS (OF. RKB, RT, CR, ETC.)
4297 gr

19. ELEV. CASINGHEAD
4298

20. TOTAL DEPTH, MD & TVD
420'

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

22. IF MULTIPLE COMPL., HOW MANY
one zone

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

rotary

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

420'

25. WAS DIRECTIONAL SURVEY MADE

no
none

26. TYPE ELECTRIC AND OTHER LOGS RUN
none

27. WAS WELL CORED YES NO (Submit analysis)
DRILL STEM TEST YES NO (See reverse side)

28. ~~None~~ CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
4 1/2	11#	420'	6 1/8	45 sacks	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)	30. TUBING RECORD	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	420		

31. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED

none

33. PRODUCTION

DATE FIRST PRODUCTION not known PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pump WELL STATUS (Producing or shut-in) producing

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

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

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

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

SIGNED Gene Johnson TITLE Secretary DATE 4-27-92



State of Utah

Department of
Natural Resources

Division of
Oil, Gas & Mining

ROBERT L. MORGAN
Executive Director

LOWELL P. BRAXTON
Division Director

MICHAEL O. LEAVITT
Governor

OLENE S. WALKER
Lieutenant Governor

February 20, 2004

CERTIFIED MAIL NO. 7002 0510 0003 8602 4941

Clint Howell
San Juan Minerals Exploration
P.O. Box 310367
Mexican Hat, Utah 84531

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

Dear Mr. Howell:

San Juan Minerals Exploration, as of February 2004, has sixteen (16) Fee Lease Wells (see attachment A) that are currently in non-compliance for extended shut-in or temporary abandonment status. Wells SI/TA beyond twelve (12) consecutive months requires filing a Sundry Notice (R649-3-36-1). Wells with five (5) years non-activity or non-productivity shall be plugged, unless the Division grants approval for extended shut-in time upon a showing of good cause by the operator (649-3-36-1.3.3). For extended SI/TA consideration the operator shall provide the Utah Division of Oil, Gas & Mining with the following:

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

Page 2
February 20, 2004
Clint Howell

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

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

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

Sincerely,



Dustin K. Doucet
Petroleum Engineer

jc
cc: John Baza
Well File

	Well Name	API	Lease Type	Years Inactive
1	Nordeen 80.6	43-037-30585	Fee	1 Year 5 months
2	Nordeen 80.7	43-037-30584	Fee	1 Year 5 months
3	J&L 3-X	43-037-31669	Fee	6 Years 5 Months
4	Goodridge 91-2	43-037-31605	Fee	7 Years 4 Months
5	Goodridge 91-12	43-037-31637	Fee	7 Years 5 Months
6	Goodridge 91-16	43-037-31634	Fee	7 Years 5 Months
7	Goodridge 1	43-037-31647	Fee	7 Years 6 Months
8	Goodridge 91-7	43-037-31613	Fee	7 Years 6 Months
9	Goodridge 81-3	43-037-30960	Fee	8 Years 3 Months
10	Goodridge 91-4	43-037-31614	Fee	8 Years 3 Months
11	J&L 3	43-037-31207	Fee	10 Years 7 Months
12	Crossing No 28	43-037-31445	Fee	10 Years 9 Months
13	Crossing No 212	43-037-31446	Fee	10 Years 9 Months
14	Goodridge 92-3	43-037-31652	Fee	10 Years 9 Months
15	Nordeen 3	43-037-30149	Fee	10 Years 9 Months
16	Nordeen 5	43-037-20722	Fee	10 Years 9 Months

Attachment A



State of Utah

Department of
Natural Resources

Division of
Oil, Gas & Mining

ROBERT L. MORGAN
Executive Director

LOWELL P. BRAXTON
Division Director

MICHAEL O. LEAVITT
Governor

OLENE S. WALKER
Lieutenant Governor

February 20, 2004

CERTIFIED MAIL NO. 7002 0510 0003 8602 4941

Clint Howell
San Juan Minerals Exploration
P.O. Box 310367
Mexican Hat, Utah 84531

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

Dear Mr. Howell:

San Juan Minerals Exploration, as of February 2004, has sixteen (16) Fee Lease Wells (see attachment A) that are currently in non-compliance for extended shut-in or temporary abandonment status. Wells SI/TA beyond twelve (12) consecutive months requires filing a Sundry Notice (R649-3-36-1). Wells with five (5) years non-activity or non-productivity shall be plugged, unless the Division grants approval for extended shut-in time upon a showing of good cause by the operator (649-3-36-1.3.3). For extended SI/TA consideration the operator shall provide the Utah Division of Oil, Gas & Mining with the following:

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

Page 2
February 20, 2004
Clint Howell

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

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

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

Sincerely,



Dustin K. Doucet
Petroleum Engineer

jc
cc: John Baza
Well File

	Well Name	API	Lease Type	Years Inactive
1	Nordeen 80.6	43-037-30585	Fee	1 Year 5 months
2	Nordeen 80.7	43-037-30584	Fee	1 Year 5 months
3	J&L 3-X	43-037-31669	Fee	6 Years 5 Months
4	Goodridge 91-2	43-037-31605	Fee	7 Years 4 Months
5	Goodridge 91-12	43-037-31637	Fee	7 Years 5 Months
6	Goodridge 91-16	43-037-31634	Fee	7 Years 5 Months
7	Goodridge 1	43-037-31647	Fee	7 Years 6 Months
8	Goodridge 91-7	43-037-31613	Fee	7 Years 6 Months
9	Goodridge 81-3	43-037-30960	Fee	8 Years 3 Months
10	Goodridge 91-4	43-037-31614	Fee	8 Years 3 Months
11	J&L 3	43-037-31207	Fee	10 Years 7 Months
12	Crossing No 28	43-037-31445	Fee	10 Years 9 Months
13	Crossing No 212	43-037-31446	Fee	10 Years 9 Months
14	Goodridge 92-3	43-037-31652	Fee	10 Years 9 Months
15	Nordeen 3	43-037-30149	Fee	10 Years 9 Months
16	Nordeen 5	43-037-20722	Fee	10 Years 9 Months

Attachment A

SAN JUAN MINERALS EXPLORATION INC.

Hwy 163 / Riverview Dr.
P.O. Box 310367
Mexican Hat, Utah 84831

Ph. 435-683-2263
Fax: 435-683-3398
E-mail: chlslj@yahoo.com

Dustin K Doucet
State of Utah
Division of Oil Gas and Mining
1894 West North Temple Suite 1210
P.O. Box 148801
Salt Lake City, UT. 84114-8801

2004-03-16

RECEIVED

MAR 19 2004

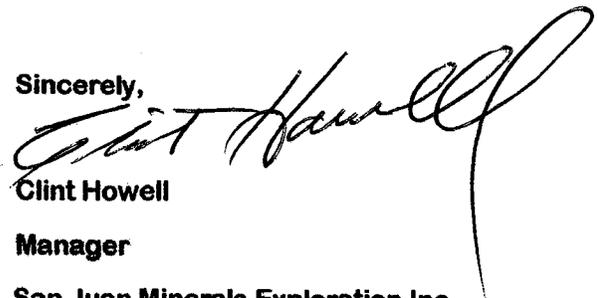
DIV. OF OIL, GAS & MINING

RE: Letter, February 20, 2004
Extended Shut-in and Temporary Abandoned Wells.

Dear Mr. Doucet:

As per Our Discussion ,		Proposed Work to be Completed in 2004		
Plan of action as follows,				
#1	Nordeen 80.6	43-037-30585	Workover-Reproduce	
2	Nordeen 80.7	43-037-30584	Workover-Reproduce	
3	J&L 3-X	43-037-31669	Plug & Abandon	
4	Goodridge 91-2	43-037-31605	Workover -Reproduce	Possibly plug & abandon
5	Goodridge 91-12	43-037-31637	Workover-Reproduce	Possibly plug & abandon
6	Goodridge 91-16	43-037-31634	Workover-Reproduce	Possibly plug & abandon
7	Goodridge 1	43-037-31647	Workover-Reproduce	Possibly plug & abandon
8	Goodridge 91-7	43-037-31613	Workover-Reproduce	Possibly plug & abandon
9	Goodridge 81-3	43-037-30960	Workover-Reproduce	Possibly plug & abandon
10	Goodridge 91-4	43-037-31614	Workover-Reproduce	Possibly plug & abandon
11	J & L 3	43-037-31207	Plug & Abandon	
12	Crossing No 28	43-037-31445	Plug & Abandon	
13	Crossing No 212	43-037-31446	Plug & Abandon	
14	Goodridge 92-3	43-037-31652	Plug & Abandon	
15	Nordeen 3	43-037-30149	Plug & Abandon	
16	Nordeen 5	43-037-20722	Plug & Abandon	

Sincerely,


Clint Howell

Manager

San Juan Minerals Exploration Inc.



State of Utah

Department of
Natural Resources

Division of
Oil, Gas & Mining

ROBERT L. MORGAN
Executive Director

LOWELL P. BRAXTON
Division Director

MICHAEL O. LEAVITT
Governor

OLENE S. WALKER
Lieutenant Governor

March 19, 2004

CERTIFIED MAIL NO. 7002 0510 0003 8602 6440

Mr. Clint Howell
San Juan Minerals Exploration, Inc.
Hwy 163 / Riverview Drive
P.O. Box 310367
Mexican Hat, Utah 84531

Re: Extended Shut-in and Temporary Abandoned Well Requirements for Fee or State Leases dated February 20, 2004.

Dear Mr. Howell,

The Division of Oil, Gas and Mining (DOGM) is in receipt of your letter dated March 16, 2004 in regards to the sixteen (16) shut-in wells operated by San Juan Minerals Exploration, Inc. (San Juan). DOGM accepts San Juan's plan of action to plug and abandon seven (7) of the wells and recomplete nine (9) of the wells during calendar year 2004. Based upon the plan of action and other information provided, DOGM approves the sixteen wells for extended shut-in until January 1, 2005. Please submit re-completion and plugging procedures with notice of intent sundries upon finalization.

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

Sincerely,

Dustin Doucet
Petroleum Engineer

	Well Name	API	Lease Type	Years Inactive
1	Nordeen 80.6	43-037-30585	Fee	1 Year 5 months
2	Nordeen 80.7	43-037-30584	Fee	1 Year 5 months
3	J&L 3-X	43-037-31669	Fee	6 Years 5 Months
4	Goodridge 91-2	43-037-31605	Fee	7 Years 4 Months
5	Goodridge 91-12	43-037-31637	Fee	7 Years 5 Months
6	Goodridge 91-16	43-037-31634	Fee	7 Years 5 Months
7	Goodridge 1	43-037-31647	Fee	7 Years 6 Months
8	Goodridge 91-7	43-037-31613	Fee	7 Years 6 Months
9	Goodridge 81-3	43-037-30960	Fee	8 Years 3 Months
10	Goodridge 91-4	43-037-31614	Fee	8 Years 3 Months
11	J&L 3	43-037-31207	Fee	10 Years 7 Months
12	Crossing No 28	43-037-31445	Fee	10 Years 9 Months
13	Crossing No 212	43-037-31446	Fee	10 Years 9 Months
14	Goodridge 92-3	43-037-31652	Fee	10 Years 9 Months
15	Nordeen 3	43-037-30149	Fee	10 Years 9 Months
16	Nordeen 5	43-037-20722	Fee	10 Years 9 Months

Attachment A

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

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER:
2. NAME OF OPERATOR: San Juan Minerals Exploration Inc. <i>N0810</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
3. ADDRESS OF OPERATOR: Hwy 163 P.O. Box 310367 Mexican Hat Ut 84531		7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL FOOTAGES AT SURFACE: QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:		8. WELL NAME and NUMBER: see attached list
		9. API NUMBER:
		10. FIELD AND POOL, OR WILDCAT: Mexican Hat
		COUNTY: San Juan
		STATE: UTAH

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

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

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

San Juan Minerals Exploration Inc. is transferring operation of its oil wells in San Juan County at Mexican Hat, (see attached List) To: Wesgra Corporation P.O. Box 310367 Mexican Hat Ut. 84531.
Wesgra Corporation Is Bonded By Letter of credit # 7230.
Would like to make this change effective as of April 30 2006

Wesgra Corporation:
by: Clint Howell President *N1060*
Clint Howell
April /20/ 2006

NAME (PLEASE PRINT) <u>Clint Howell</u>	TITLE <u>President</u>
SIGNATURE <i>Clint Howell</i>	DATE <u>4/20/2006</u>

(This space for State use only)

APPROVED 513106
Earlene Russell
(5/2000) Division of Oil, Gas and Mining
Earlene Russell, Engineering Technician

(See Instructions on Reverse Side)

RECEIVED
APR 24 2006
DIV. OF OIL, GAS & MINING

San Juan Minerals (N0810) to Wesgra Corporation (N1060)

well_name	api	qtr_qtr	sec	twsp	rng	well	stat	l_num
GEBAUER FEDERAL 2	4303730190	SENE	07	420S	190E	OW	S	UTU-7303
SUTHERLAND FEDERAL 97-4	4303731784	NESW	05	420S	190E	OW	S	UTU-7303D
NORDEEN 1	4303720721	NENW	05	420S	190E	OW	S	FEE
NORDEEN 5	4303720722	SWNW	05	420S	190E	OW	P	FEE
NORDEEN 3	4303730149	NENW	05	420S	190E	OW	P	FEE
WILM RNCH GDRDGE 12	4303730432	NWNW	08	420S	190E	OW	P	FEE
GOODRIDGE 74	4303730526	NWNW	08	420S	190E	OW	S	FEE
GOODRIDGE 75	4303730527	NWNW	08	420S	190E	OW	S	FEE
GOODRIDGE 80.2	4303730561	NWNW	08	420S	190E	OW	P	FEE
GOODRIDGE 80.3	4303730562	NWNW	08	420S	190E	OW	P	FEE
GOODRIDGE 80.4	4303730563	NWNW	08	420S	190E	OW	P	FEE
GOODRIDGE 80.1	4303730570	NWNW	08	420S	190E	OW	S	FEE
NORDEEN 80.7	4303730584	SESW	05	420S	190E	OW	P	FEE
NORDEEN 80.6	4303730585	SESW	05	420S	190E	OW	S	FEE
GOODRIDGE 80.5	4303730680	NWNW	08	420S	190E	OW	P	FEE
NORDEEN 81-4	4303730957	SWSW	05	420S	190E	OW	S	FEE
NORDEEN 81-5	4303730958	SWSW	05	420S	190E	OW	S	FEE
GOODRIDGE 81-3	4303730960	SENE	07	420S	190E	OW	S	FEE
J & L 3	4303731207	NWSW	06	420S	190E	OW	TA	FEE
NORDEEN 86-6	4303731254	SENW	05	420S	190E	OW	S	FEE
GOODRIDGE 91-2	4303731605	SENE	07	420S	190E	OW	S	FEE
GOODRIDGE 91-7	4303731613	SWNW	08	420S	190E	OW	S	FEE
GOODRIDGE 91-16	4303731634	NENE	07	420S	190E	OW	S	FEE
GOODRIDGE 91-12	4303731637	NENE	07	420S	190E	OW	S	FEE
GOODRIDGE 1	4303731647	SENE	07	420S	190E	OW	S	FEE
J&L 3-X	4303731669	NESW	06	420S	190E	OW	S	FEE
DICKENSON/HOWARD 1	4303731845	NWSW	05	420S	190E	OW	NEW	FEE
UTAH 1	4303730101	NWSW	07	420S	190E	OW	PA	FEE
NELWYN A NORDEEN 2	4303730104	SENW	05	420S	190E	OW	PA	FEE
NELWYN NORDEEN 3	4303730108	SENW	05	420S	190E	OW	PA	FEE
NORDEEN 1A	4303730128	NENW	06	420S	190E	OW	PA	FEE
NORDEEN 2-A	4303730161	NENW	06	420S	190E	OW	PA	FEE
NORDEEN 7	4303730194	NENW	05	420S	190E	OW	PA	FEE
NORDEEN 11	4303730480	SWSW	05	420S	190E	D	PA	FEE
NORDEEN 80.13	4303730581	SESW	05	420S	190E	D	PA	FEE
GOODRIDGE 81-1	4303730961	SWNW	08	420S	190E	OW	PA	FEE
GOODRIDGE 71	4303730968	NWNW	08	420S	190E	D	PA	FEE
NORDEEN 86-4	4303731253	SENW	05	420S	190E	D	PA	FEE
NORDEEN 86-8	4303731255	SWNE	05	420S	190E	OW	PA	FEE
NORDEEN 86-10	4303731256	SENW	05	420S	190E	OW	PA	FEE
CROSSING NO 2 8	4303731445	SWSE	07	420S	190E	OW	PA	FEE
CROSSING NO 2 12	4303731446	SWSE	07	420S	190E	OW	PA	FEE
GOODRIDGE 91-10	4303731609	NENE	07	420S	190E	OW	PA	FEE
GOODRIDGE 91-5	4303731611	SENE	07	420S	190E	D	PA	FEE
GOODRIDGE 91-4	4303731614	SENE	07	420S	190E	OW	PA	FEE
GOODRIDGE 2	4303731640	NWNW	08	420S	190E	OW	PA	FEE
GOODRIDGE 92-3	4303731652	NWNE	07	420S	190E	OW	PA	FEE

OPERATOR CHANGE WORKSHEET

ROUTING

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

Change of Operator (Well Sold)

Designation of Agent/Operator

X Operator Name Change

Merger

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

4/30/2006

FROM: (Old Operator): N0810-San Juan Minerals Exploration Inc. Hwy 163 PO Box 310367 Mexican Hat, UT 84531 Phone: 1-(435) 683-2298	TO: (New Operator): N1060-Wesgra Corporation PO Box 310367 Mexican Hat, UT 84531 Phone: 1-(435) 683-2298
---	--

CA No.

Unit:

WELL(S)

NAME	SEC	TWN	RNG	API NO	ENTITY NO	LEASE TYPE	WELL TYPE	WELL STATUS
SUTHERLAND FEDERAL 97-4	05	420S	190E	4303731784	9080	Federal	OW	S
NORDEEN 1	05	420S	190E	4303720721	490	Fee	OW	S
NORDEEN 5	05	420S	190E	4303720722	490	Fee	OW	P
NORDEEN 3	05	420S	190E	4303730149	490	Fee	OW	P
NORDEEN 80.7	05	420S	190E	4303730584	490	Fee	OW	P
NORDEEN 80.6	05	420S	190E	4303730585	490	Fee	OW	S
NORDEEN 81-4	05	420S	190E	4303730957	490	Fee	OW	S
NORDEEN 81-5	05	420S	190E	4303730958	490	Fee	OW	S
NORDEEN 86-6	05	420S	190E	4303731254	490	Fee	OW	S
J & L 3	06	420S	190E	4303731207	10691	Fee	OW	TA
GEBAUER FEDERAL 2	07	420S	190E	4303730190	9080	Federal	OW	S
GOODRIDGE 81-3	07	420S	190E	4303730960	11206	Fee	OW	S
WILM RNCH GDRDGE 12	08	420S	190E	4303730432	495	Fee	OW	P
GOODRIDGE 74	08	420S	190E	4303730526	495	Fee	OW	S
GOODRIDGE 75	08	420S	190E	4303730527	495	Fee	OW	S
GOODRIDGE 80.2	08	420S	190E	4303730561	495	Fee	OW	P
GOODRIDGE 80.3	08	420S	190E	4303730562	495	Fee	OW	P
GOODRIDGE 80.4	08	420S	190E	4303730563	495	Fee	OW	P
GOODRIDGE 80.1	08	420S	190E	4303730570	495	Fee	OW	S
GOODRIDGE 80.5	08	420S	190E	4303730680	490	Fee	OW	P

OPERATOR CHANGES DOCUMENTATION

Enter date after each listed item is completed

- (R649-8-10) Sundry or legal documentation was received from the **FORMER** operator on: 4/24/2006
- (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 4/24/2006
- The new company was checked on the **Department of Commerce, Division of Corporations Database** on: 4/26/2006
- Is the new operator registered in the State of Utah: YES Business Number: 670418-0142
- If **NO**, the operator was contacted on:
- (R649-9-2) Waste Management Plan has been received on: requested 4/26
- Inspections of LA PA state/fee well sites complete on: moving PA fee wells to new company
- Reports current for Production/Disposition & Sundries on: 5/1/2006

7. **Federal and Indian Lease Wells:** The BLM and or the BIA has approved the merger, name change, or operator change for all wells listed on Federal or Indian leases on: not yet

8. **Federal and Indian Units:**

The BLM or BIA has approved the successor of unit operator for wells listed on: n/a

9. **Federal and Indian Communization Agreements ("CA"):**

The BLM or BIA has approved the operator for all wells listed within a CA on: n/a

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

DATA ENTRY:

- 1. Changes entered in the **Oil and Gas Database** on: 5/3/2006
- 2. Changes have been entered on the **Monthly Operator Change Spread Sheet** on: 5/3/2006
- 3. Bond information entered in RBDMS on: 5/3/2006
- 4. Fee/State wells attached to bond in RBDMS on: 5/3/2006
- 5. Injection Projects to new operator in RBDMS on: n/a
- 6. Receipt of Acceptance of Drilling Procedures for APD/New on: merger

FEDERAL WELL(S) BOND VERIFICATION:

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

INDIAN WELL(S) BOND VERIFICATION:

1. Indian well(s) covered by Bond Number: n/a

FEE & STATE WELL(S) BOND VERIFICATION:

1. (R649-3-1) The **NEW** operator of any fee well(s) listed covered by Bond Number 007230

2. The **FORMER** operator has requested a release of liability from their bond on: 4/24/2006
The Division sent response by letter on: moving PA fee wells to new company

LEASE INTEREST OWNER NOTIFICATION:

3. (R649-2-10) The **FORMER** operator of the fee wells has been contacted and informed by a letter from the Division of their responsibility to notify all interest owners of this change on: 5/4/2006

COMMENTS:

