

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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  
 Wesgra Corporation

3. ADDRESS OF OPERATOR  
 P.O. Box 14, Mexican Hat, Utah 84531

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)\*  
 At surface 1372' from the north line  
 460' from the east line  
 At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*  
 one half mile

15. DISTANCE FROM PROPOSED\* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)  
 16. NO. OF ACRES IN LEASE  
 712

17. NO. OF ACRES ASSIGNED TO THIS WELL  
 18. DISTANCE FROM PROPOSED LOCATION\* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.  
 19. PROPOSED DIPTH  
 250'

20. ROTARY OR CABLE TOOLS  
 rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)  
 4159' ungraded ground

22. APPROX. DATE WORK WILL START\*  
 shortly after approval

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
9"	7 5/8"	20 pd	30'	7 sacks
6 3/4"	5 1/2"	15 pd	200' plus	18 sacks

3. surface formation Supai

6. estimated top of the geological marker Goodridge 220' plus

7. anticipated depth of water, oil, or gas Goodridge 200' plus, oil only

10. pressure equipment, none, Goodridge zone is shallow and carries very little or no gas

11. circulating medium, air and foam

12. testing, logging, samples only by geologist

13. abnormal pressures, or temperatures, none, no hydrogen sulfite

14. a nticipated starting date, when approved or reasonable time there after.

duration of drilling operation, six days

RECEIVED  
APR 07 1963  
DIVISION OF OIL, GAS & MINING

5. LEASE DESIGNATION AND SERIAL NO.  
 7-7302

6. INDIAN ALLOTTEE OR TRIBAL NAME

7. UNIT AGREEMENT NAME

8. LEASE OR LICENSE NAME  
 Gobbert-Groom

9. WELL NUMBER

10. FIELD AND POOL, OR FIELD CAT

11. COUNTY OR PARISH AND STATE  
 San Juan Utah

12. APPROX. DATE WORK WILL START\*  
 shortly after approval

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed 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 W E Keen TITLE President

(This space for Federal or State office use)  
 PERMIT NO. 43-037-30876 APPROVAL DATE 4-7-63

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

CONDITIONS OF APPROVAL, IF ANY :

APPROVED BY THE STATE OF UTAH DIVISION OF OIL, GAS, AND MINING  
DATE: 4-7-63  
BY: [Signature]

COMPANY THE WESTGRA CORPORATION

LEASE GEBAUER-GROOM WELL NO. 11

SEC. 7 T 42 SOUTH R 19 EAST, SLM

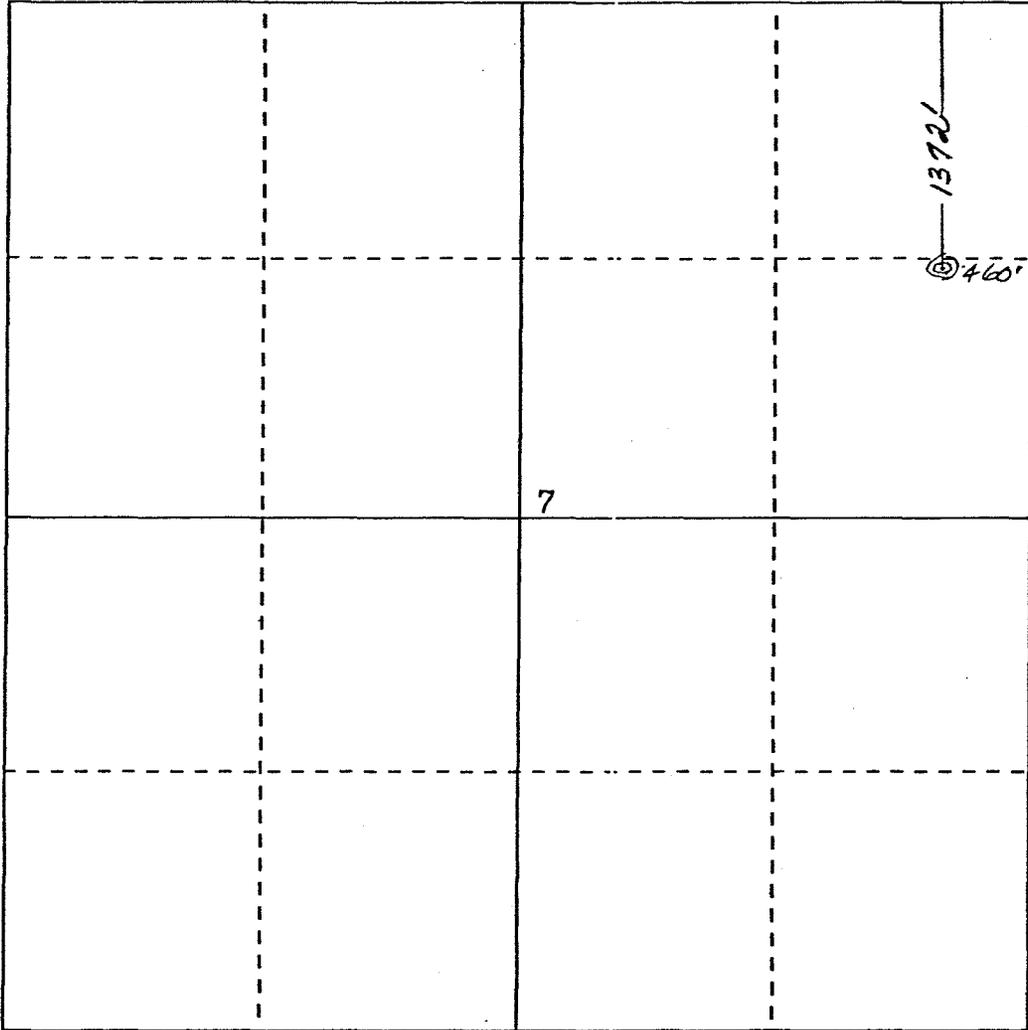
LOCATION 1372 FEET FROM THE NORTH LINE AND  
460 FEET FROM THE EAST LINE



ELEVATION 4159 UNGRADED GROUND

SAN JUAN COUNTY

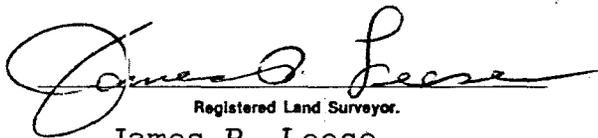
UTAH



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:

  
Registered Land Surveyor.

James P. Leese  
Utah Reg. #1472

SURVEYED August 27, 19 82

OPERATOR WESGRA CORP DATE 4-7-83

WELL NAME GERBAUER-GROOM #11

SEC SENE 7 T 42 S R 19 E COUNTY SAN JUAN

43-037-30876  
API NUMBER

FED  
TYPE OF LEASE

POSTING CHECK OFF:

INDEX

HL

NID

PI

MAP

PROCESSING COMMENTS:

DISTANCES ETC OK  
+ Re-entry in Little Loop formation

*ASJ*

APPROVAL LETTER:

SPACING:  A-3 \_\_\_\_\_ UNIT

c-3-a 156-3 4-15-80  
CAUSE NO. & DATE

c-3-b

c-3-c

SPECIAL LANGUAGE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RECONCILE WELL NAME AND LOCATION ON APD AGAINST SAME DATA ON PLAT MAP.

AUTHENTICATE LEASE AND OPERATOR INFORMATION

VERIFY ADEQUATE AND PROPER BONDING *FED*

AUTHENTICATE IF SITE IS IN A NAMED FIELD, ETC.

APPLY SPACING CONSIDERATION

ORDER 156-3 4-15-82

UNIT \_\_\_\_\_

c-3-b

c-3-c

CHECK DISTANCE TO NEAREST WELL. *no restriction*

CHECK OUTSTANDING OR OVERDUE REPORTS FOR OPERATOR'S OTHER WELLS.

IF POTASH DESIGNATED AREA, SPECIAL LANGUAGE ON APPROVAL LETTER

IF IN OIL SHALE DESIGNATED AREA, SPECIAL APPROVAL LANGUAGE.

April 7, 1983

Wesgra Corporation  
P. O. Box 14  
Mexican Hat, Utah 84531

RE: Well No. Gebaun-Groom #11  
SENE Sec. 7, T.42S, R.19E  
1372 PNL, 460 FEL  
San Juan County, Utah

Gentlemen:

Insofar as this office is concerned, approval to drill the above referred to oil well is 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 this well, you are hereby requested to immediately notify the following:

RONALD J. FIRTH - Chief Petroleum Engineer  
Office: 533-5771  
Home: 571-6068

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

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

The API number assigned to this well is 43-037-30876.

Sincerely,



R. J. Firth  
Chief Petroleum Engineer

RJF/as  
cc: Oil & Gas Operations  
Enclosure

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

RECEIVED  
OIL & GAS OPERATIONS  
APR 7 1983

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  
WESGRA CORPORATION

3. ADDRESS OF OPERATOR  
P.O. Box 14 MEXICAN HAT VT 8453

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1370' N 460' E  
AT TOP PROD. INTERVAL: SAME  
AT TOTAL DEPTH: SAME

5. LEASE  
U-7303

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
-

7. UNIT AGREEMENT NAME  
-

8. FARM OR LEASE NAME  
GERAUER - GROOM

9. WELL NO.  
11

10. FIELD OR WILDCAT NAME  
MEXICAN HAT

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
7-425-19E, 5LM

12. COUNTY OR PARISH  
SAN JUAN

13. STATE  
UTAH

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
4155' sl

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) CHANGE LOCATION	LOCATION

RECEIVED

SEP 1 4 1984 report results of multiple completion or zone change on Form 9-330.)

DIVISION OF OIL  
GAS & MINING

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.)\*

CHANGE OF LOCATION From  
1298' N 460' E Acc 7

TO  
1370' N 460' E Acc 7, to conform with Order No. 154-3.

ALL other parts of the application are the same  
A New survey plat is attached.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED W. E. Skem TITLE President DATE 4-8-83

APPROVED BY [Signature] (This space for Federal or State office use)  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_  
District Oil & Gas Supervisor

rlc

JUL 25 1983  
REC'D. MDC AUG 15 1983

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved  
Budget Bureau No. 42-11424

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
**Clint Howell**

3. ADDRESS OF OPERATOR  
**Blanding, Utah**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
**1298' N 460 E**

5. PERMIT NO. **43-037-30876**  
~~XXXXXXXXXXXX~~

6. ELEVATIONS (Show whether DF, RT, GR, etc.)  
**4159 GL**

7. UNIT ASSIGNMENT NAME

8. FARM OR LEASE NAME  
**Gebauer-Groob**

9. WELL NO.

10. FIELD AND TOLL, OR WELL NO.  
**Mexican Hat**

11. SEC. T. R. M. OR BLM. AND SURVEY OR AREA  
**Sec. 7-425-19E**

12. COUNTY OR PARISH, STATE  
**San Juan Utah**

RECEIVED  
OCT 31 1983

DIVISION OF  
OIL, GAS & MINING

5. LEASE DESIGNATION AND SERIAL NO.  
**U-7303**

6. IF INDENT, ADD OTHER OR THIRD NAME

7. UNIT ASSIGNMENT NAME

8. FARM OR LEASE NAME  
**Gebauer-Groob**

9. WELL NO.

10. FIELD AND TOLL, OR WELL NO.  
**Mexican Hat**

11. SEC. T. R. M. OR BLM. AND SURVEY OR AREA  
**Sec. 7-425-19E**

12. COUNTY OR PARISH, STATE  
**San Juan Utah**

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT	
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) **Change of Operator**

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

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

Change of operator from Wesgra Corporation to Clint Howell. Clint Howell accepts 10 pt. drilling plan, 13 pt. surface use plan, and all requirements and stipulations of the application for permit to Drill; along with all required reports.

*Clint Howell*

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

SIGNED Clint Howell TITLE Operator DATE Oct. 21 1983

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

Utah Oil, Gas, & Mining

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

OCT 31 1983

2. NAME OF OPERATOR

Wesgra Corporation

DIVISION OF

3. ADDRESS OF OPERATOR

Box 14 Mexican Hat Utah

OIL, GAS & MINING

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1370' N 460" E

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
- FRACTURE TREAT
- SHOOT OR ACIDIZE
- REPAIR WELL
- PULL OR ALTER CASING
- MULTIPLE COMPLETE
- CHANGE ZONES
- ABANDON\*

- 
- 
- 
- 
- 
- 
- 
- 

(other) Change of Operator

5. LEASE

U-7303

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Gebauer-Groom

9. WELL NO.

11

10. FIELD OR WILDCAT NAME

Mexican Hat

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

Sec. 7, 42S, 19E

12. COUNTY OR PARISH

San Juan

Utah

14. API NO.

43-037-30876

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

4159' ungraded ground

(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.)\*

Wesgra Corporation thru a designation of operator turns over the drilling, completion, and operation of Gebauer-Groom # 11 To Mr. Clint Howell, 58 North Main, Blanding Utah.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED McKeen TITLE President DATE 10-28-83

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

*before work of*

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 ~~drill proposals~~)

1. oil  well gas  well other

2. NAME OF OPERATOR  
*Clint Howell*

3. ADDRESS OF OPERATOR  
*P.O. Box 254, Blanding, Utah 81511*

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE:  
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) <i>spud</i>	<input type="checkbox"/>		<input type="checkbox"/>

5. LEASE  
*U-7303*

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
*Gebauer - GROOMAN*

9. WELL NO.  
*11*

10. FIELD OR WILDCAT NAME  
*Mexican Hat*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
*Sec 7 - 42S - 19E*

12. COUNTY OR PARISH | 13. STATE  
*SAN JUAN | Utah*

14. API NO.  
*43-037-30876*

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
*4159*

(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.)\*

*set 20' of 7" casing - 5 sacks cement  
spud date 11-5-83*

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED *Clint Howell* TITLE *operator* DATE *11-10-83*

(This space for Federal (or State office use)

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



STATE OF UTAH  
NATURAL RESOURCES  
Oil, Gas & Mining

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

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

July 30, 1984

Mr. Clint Howell  
P.O. Box 754  
Blanding, Utah 84511

Dear Mr. Howell:

SUBJECT: See Attached Well List

Our records indicate that you have not filed the monthly drilling report on the subject wells for the months of November 1983 through the present.

Rule C-22, General Rules and Regulations and Rules of Practice and Procedure, requires that where the well is in the process of being drilled, said report must be made for each calendar month, beginning with the month in which drilling operations were initiated and must be filed on or before the sixteenth (16) day of the succeeding month.

Enclosed are the necessary forms for your convenience in bringing these wells into compliance with the aforementioned rule.

Your prompt attention to this matter will be greatly appreciated.

Sincerely,

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

Claudia L. Jones  
Well Records Specialist

clj

Enclosures (12)

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

Mr. Clint Howell

Attachment 1

July 30, 1984

Well No. Gebauer-Groom #6  
Sec. 7, T. 42S., R. 19E.  
San Juan County, Utah  
API #43-037-30858

Well No. Gebauer-Groom #7  
Sec. 7, T. 42S., R. 19E.  
San Juan County, Utah  
API #43-037-30839

Well No. Gebauer-Groom #8  
Sec. 7, T. 42S., R. 19E.  
San Juan County, Utah  
API #43-037-30840

Well No. Gebauer-Groom #9  
Sec. 7, T. 42S., R. 19E.  
San Juan County, Utah  
API #43-037-30841

Well No. Gebauer-Groom #10  
Sec. 7, T. 42S., R. 19E.  
San Juan County, Utah  
API #43-037-30842

Well No. Gebauer-Groom #11  
Sec. 7, T. 42S., R. 19E.  
San Juan County, Utah  
API #43-037-30876

Well No. Gebauer-Groom #12  
Sec. 7, T. 42S., R. 19E.  
San Juan County, Utah  
API #43-037-30843

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on reverse side)

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

8

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

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

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

2. NAME OF OPERATOR  
Clinton K. Howell

3. ADDRESS OF OPERATOR  
58 North Main Street Blanding, Utah 84511

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 1370' from the north line  
At top prod. interval reported below 460' from the east line  
At total depth Same SE NE

5. LEASE DESIGNATION AND SERIAL NO.  
U-7303

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
-

7. UNIT AGREEMENT NAME  
-

8. FARM OR LEASE NAME  
Gebaur - Groom

9. WELL NO.  
Eleven 11

10. FIELD AND POOL, OR WILDCAT  
Mexican Hat

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA  
Sec 7, 42S, 19E.

12. COUNTY OR PARISH  
San Juan

13. STATE  
Utah

14. PERMIT NO. DATE ISSUED  
API# 43-037-30876 | 04-07-83

15. DATE SPUNDED 11-5-83

16. DATE T.D. REACHED 11-18-83

17. DATE COMPL. (Ready to prod.) 8-21-84

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 4159 Grd

19. ELEV. CASINGHEAD -

20. TOTAL DEPTH, MD & TVD 229'

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

22. IF MULTIPLE COMPL., HOW MANY\* 1

23. INTERVALS DRILLED BY -

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*  
Goodridge 211-233

25. WAS DIRECTIONAL SURVEY MADE  
No

26. TYPE ELECTRIC AND OTHER LOGS RUN  
~~Samples~~

27. WAS WELL CORED  
Yes

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD
7 5/8"	20	30'	9"	7 sacks
5 1/2"	15	222'	6 3/4"	18 sacks

RECEIVED  
SEP 7 1984

29. LINER RECORD

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

30. TUBING RECORD

SIZE	DEPTH SET (MD)

31. PERFORATION RECORD (Interval, size and number)

None  
Open Hole 211-233

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
211-233	Acid, 400 gal
	20 bbl Oil to flush

33. PRODUCTION

DATE FIRST PRODUCTION \* 8-21-84

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) \* Pumping - waiting for Utah Power & Light Co to hookup electricity

WELL STATUS (Producing or shut-in) Producing - Pending Elec.

DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
08-21-84	24			1	TSTM	-	TSTM

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
			1	TSTM	-	39°

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

TEST WITNESSED BY W. E. Skeen

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 Paul B. Acton TITLE Production Mgr DATE 8-31-84

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

# INSTRUCTIONS

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

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

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

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

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

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

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

### 37. SUMMARY OF POROUS ZONES:

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

### 38.

### GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
SUPAI	SURFACE	
GOODRIDGE	211'	

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 test for oil or gas in a different reservoir. Use Form 9-331-C for well proposals.)

RECEIVED

1. oil well  gas well  other

MAY 17 1985

2. NAME OF OPERATOR

Howell Oil Co.

3. ADDRESS OF OPERATOR

58 N. Main Blanding UT 84503 DIVISION OF OIL & MINING

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

1298' from the north line 460' from the east line

AT SURFACE: 4159 ungraded

AT TOP PROD. INTERVAL: 211'

AT TOTAL DEPTH: 229'

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

- TEST WATER SHUT-OFF
- FRACTURE TREAT
- SHOOT OR ACIDIZE
- REPAIR WELL
- PULL OR ALTER CASING
- MULTIPLE COMPLETE
- CHANGE ZONES
- ABANDON\*

- 
- 
- 
- 
- 
- 
- 
- 

(other)

5. LEASE

U-7303

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Gebauer-Groom

9. WELL NO.

11

10. FIELD OR WILDCAT NAME

Mexican Hat

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

Sec 7, 42S, 19E

12. COUNTY OR PARISH

San Juan

13. STATE

Utah

14. API NO.

43-037-30876

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

4159' ungraded

(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.)\*

Abandon because of poor cement job.  
Method of plugging, go in with drill pipe and start pumping cement from the bottom, fill pipe then put in pump down plug and pressure up and hold until cement sets up.

Purpose to re drill 20' due north of present location.  
when approved

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

DATE: 5/22/85

BY: John R. Baya

Federal approval of this action is required before commencing operations.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED: F.E. Reen TITLE: VP President DATE: 4/10-85

(This space for Federal or State of use)

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

CONDITIONS OF APPROVAL, IF ANY:

DTS ✓

031812  
**RECEIVED**  
AUG 11 1986

Howell Oil Company, Inc.  
60 North Main Street  
Blanding, Utah 84511

DIVISION OF  
OIL, GAS & MINING

August 5, 1986

Division of Oil Gas and Mining  
#3 Triad Center Suite #350  
Salt Lake City, Utah 84180-1203

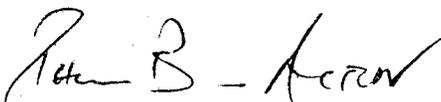
Attention: Ron Firth

Re: Howell Oil Company / Clinton K. Howell

Dear Mr. Firth,

Pursuant to my telephone conversation 8-4-86 with Don Staley, I am requesting that the wells covered by the above named operators be combined as they are one and the same. The account number of 1810 currently associated with Howell Oil Co. is the number we would like to retain.

Thank You,



Phil B. Acton, Manager

PBA:dh



UTAH  
NATURAL RESOURCE:  
Oil, Gas & Mining

355 West North Temple, 3 Triad Center, Suite 350, Salt Lake City, Ut  
84180-1203. (801-538-5340)

# MONTHLY OIL AND GAS PRODUCTION REPORT

Operator name and address:

• HOWELL, CLINTON K.  
 60 NORTH MAIN  
 BLANDING UT 84511  
 ATTN: PHIL B. ACTON

082806

Utah Account No. N6200

Report Period (Month/Year) 7 / 86

Amended Report

Well Name	API Number	Entity	Location	Producing Zone	Days Oper	Production Volume		
						Oil (BBL)	Gas (MSCF)	Water (BBL)
GEBAUER-GROOM #7	4303730839	10060	42S 19E 7	GDRSD				
GEBAUER-GROOM #8	4303730840	10060	42S 19E 7	GDRSD				
GEBAUER-GROOM #9	4303730841	10060	42S 19E 7	GDRSD				
GEBAUER-GROOM #10	4303730842	10060	42S 19E 7	GDRSD				
GEBAUER-GROOM #11	4303730876	10060	42S 19E 7	GDRSD				
GEBAUER-GROOM #33	4303731090	10060	42S 19E 7	GDRSD				
GEBAUER-GROOM #31	4303731156	10060	42S 19E 7	GDRSD				
TOTAL								

Comments (attach separate sheet if necessary)

I have reviewed this report and certify the information to be accurate and complete.

Date

Authorized signature

Telephone



UTAH  
NATURAL RESOURCES  
Oil, Gas & Mining

355 West North Temple, 3 Triad Center, Suite 350, Salt Lake City, Ut  
84180-1203. • (801-538-5340)

## MONTHLY OIL AND GAS PRODUCTION REPORT

Operator name and address:

• HOWELL OIL COMPANY  
60 NORTH MAIN  
BLANDING UT 84511  
ATTN: PHIL ACTON

Utah Account No. N1810

Report Period (Month/Year) 7 / 89

Amended Report

Well Name	Producing	Days	Production Volume				
API Number	Entity	Location	Zone	Oper	Oil (BBL)	Gas (MSCF)	Water (BBL)
X GEBAUER-GROOM #10							
4303730842	10060	42S 19E 7	GDRSD		11004 Entity		
X GEBAUER-GROOM #11							
4303730876	10060	42S 19E 7	GDRSD				
X GEBAUER-GROOM #33							
4303731090	10060	42S 19E 7	GDRSD				
X MEXICAN HAT FED #9							
4303731094	10060	41S 19E 32	GDRSD	3	Do not chg this well		
X GEBAUER-GROOM #31							
4303731156	10060	42S 19E 7	GDRSD				
X GEBAUER-GROOM #32							
<del>4303731213</del>	<del>10060</del>	<del>42S 19E 7</del>	<del>GDRSD</del>		PA'O		
X GEBAUER-GROOM 30							
4303731390	10060	42S 19E 7	GDRSD				
#28							

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 well proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
~~Howell Oil Co.~~  
Wesgra Corporation

3. ADDRESS OF OPERATOR  
Blanding, Utah

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE:  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF
- FRACTURE TREAT
- SHOOT OR ACIDIZE
- REPAIR WELL
- PULL OR ALTER CASING
- MULTIPLE COMPLETE
- CHANGE ZONES
- ABANDON\*
- (other)  change of operator

DIVISION OF  
OIL, GAS & MINING

5. LEASE U-7303

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Gebauer-Groom

9. WELL NO. all wells

10. FIELD OR WILDCAT NAME Mexican Hat,

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 7, 42S, 19E

12. COUNTY OR PARISH San Juan 13. STATE Utah

API NO.

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

RECEIVED  
MAY 01 1989

RECEIVED  
AUG 17 1989

(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.)\*

Asking permission to change operator on Gebauer-Groom lease #U-7303 Mexican Hat, Utah, now operated on a designation of operator by Howell Oil Co. of Blanding, Utah, too ~~Howell~~, Wesgra ~~Oil Co.~~ Corp. Wesgra Corporation to assume operation of Gebauer-Groom lease U-7303 as of 5-1-89.

~~Howell~~, Wesgra ~~Oil Co.~~ Co. address  
P.O. Box 367, Mexican Hat, Utah 84531

Operations to be covered under Wesgra Corporation lease bond # 4123939 with Safeco Insurance Co. of America as surety.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

18. I hereby certify that the foregoing is true and correct  
SIGNED Mc Sheen TITLE President DATE 7-28-89

(This space for Federal or State office use)  
APPROVED BY Kenneth Rhee TITLE Acty. State DATE 8/10/89

CONDITIONS OF APPROVAL, IF ANY:  
CONDITIONS OF APPROVAL ATTACHED

ALS  
8/9/89  
change based on conversation w/ Bill Sheen

ALS  
8/9/89  
Based on conversation with Bill Sheen 8/9/89

Approve: ALS 8/9/89

WCF 8/10/89

Wesgra Corporation  
All Wells In Sec. 7  
Sec. 7, T. 42 S., R. 19 E.  
San Juan County, Utah  
Lease U-7303

CONDITIONS OF APPROVAL

Approval of this application does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Be advised that Wesgra Corporation is considered to be the operator of the above wells, and is responsible under the terms and conditions of the lease for the operations conducted on the leased lands.

Bond coverage for this well is provided by UT0251.  
(Principal - Wesgra Corporation) as provided for in 43 CFR 3104.2.

This office will hold the aforementioned operator and bond liable until the provisions of 43 CFR 3106.7-2 continuing responsibility are met.

BLM BOND NO: UT0251

PART NO:

SURETY BOND ID: 4123939

CASE TYPE: 311111 O&G LSE NONCOMP PUB LAND

NAME AND ADDRESS OF BONDED PARTIES

B86062038001 BONDED PRINCIPAL  
WESGRA CORP  
1901 CLASSEN BLVD  
OKLAHOMA CITY OK 73106

S84001370001 SURETY  
SAFECO INSURANCE COMPANY OF  
AMERICA  
SAFECO PLAZA  
SEATTLE WA 98185

BOND-AREA: INDIVIDUAL SERIAL NUMBER: UTU 007303 PART NO:

TYPE OF LAND: FEDERAL-PUBLIC

BOND TYPE: SURETY AMOUNT OF BOND: \$10,000

BONDED ACTIVITY/PURPOSE COMMODITY(IES)

GENERAL LSE/DRILLING OIL & GAS L

ACTION CODE	ACTION DATE	ACTION TAKEN	ACTION REMARKS
468	8/02/1982	BOND FILED	
469	8/02/1982	BOND ACCEPTED	

OCT 02 1989

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 well disposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
Wesgra Corporation

3. ADDRESS OF OPERATOR  
Blanding, Utah DIVISION OF OIL, GAS & MINING

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE:  
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) <u>change of operator</u>	

(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.)\*

Asking permission to <sup>change</sup> operator on Gebauer-Groom lease #U-7303 Mexican Hat, Utah, now operated on a designation of operator by Howell Oil Co. of Blanding, Utah, too ~~Howell~~, Wesgra ~~Oil~~ Corp. Wesgra Corporation to assume operation of Gegauer-Groom lease U-7303 as of 8-1-89.

ALS → ~~Howell~~, Wesgra ~~Oil~~ Co. address  
P.O. Box 367, Mexican Hat, Utah 84531

Operations to be covered under Wesgra Corporation lease bond # 4123939 with Safeco Insurance Co. of America as surety.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED McSleen TITLE President DATE 7-28-89

(This space for Federal or State office use)

APPROVED BY Kenneth M. Allen TITLE Chief District Engineer DATE 8/10/89

CONDITIONS OF APPROVAL, IF ANY:

CONDITIONS OF APPROVAL ATTACHED

Approved: ALS 8/9/89

ALS  
8/9/89  
change based on conversation w/ Bill Sleen

RECEIVED  
MAY 01 1989

5. LEASE  
U-7303

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Gebauer-Groom

9. WELL NO.  
all wells

10. FIELD OR WILDCAT NAME  
Mexican Hat,

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 7, 42S, 19E

12. COUNTY OR PARISH  
San Juan

13. STATE  
Utah

14. API NO.

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



# MONTHLY OIL AND GAS PRODUCTION REPORT

*Oper. Chg. to:  
(N1060-wesgra  
eff. 8-10-89)*

Operator name and address:

• HOWELL OIL COMPANY  
60 NORTH MAIN  
BLANDING UT 84511  
ATTN: PHIL ACTON

Utah Account No. N1810  
Report Period (Month/Year) 5 / 89  
Amended Report

Well Name	Producing Zone	Days Oper	Production Volume	Gas (MSCF)	Water (BBL)
API Number Entity Location			Oil (BBL)		
GEBUR GROOM #10 4303730842 10060 42S 19E 7	GDRSD		11004		
GEBURER-GROOM #11 4303730876 10060 42S 19E 7	GDRSD				
GEBURER-GROOM #33 4303731090 10060 42S 19E 7	GDRSD				
MEXICAN HAT FED #9 4303731094 10060 41S 19E 32	GDRSD		Entity 100	60 remains the same	
GEBURER-GROOM #31 4303731156 10060 42S 19E 7	GDRSD		11004		
GEBURER-GROOM 32-A 4303731213 10060 42S 19E 7	GDRSD				
GEBURER-GROOM 30 4303731390 10060 42S 19E 7	GDRSD				
TOTAL					

Comments (attach separate sheet if necessary) *\* It was decided to keep all Gebauer Groom wells grouped together under the same entity. (There are inconsistencies with previous assignments.) 8-30-89  
for see Btm approval in file!*

I have reviewed this report and certify the information to be accurate and complete. Date \_\_\_\_\_

Authorized signature \_\_\_\_\_ Telephone \_\_\_\_\_

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

RECEIVED  
FEB 01 1991

5. Lease Designation and Serial No.  
U-7303 P 04

6. If Indian, Allottee or Tribe Name

1. OIL WELL  GAS WELL  OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR  
Wesgra Corporation

8. FARM OR LEASE NAME  
Gebauer-Groom

3. ADDRESS OF OPERATOR  
P.O. Box 367, Mexican Hat, Utah 84531

9. WELL NO.  
11

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface 1298' from the north line  
460' from the east line

10. FIELD AND POOL, OR WILDCAT  
Mexican Hat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 7, 42S, 19E

14. PERMIT NO.  
43-037-30876

15. ELEVATIONS (Show whether OF, RT, OR, etc.)  
4159'

12. COUNTY OR PARISH 18. STATE  
San Juan Utah

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other)

(Other) re-enter

(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.)\*

Propose to re-enter a nd <sup>deepen</sup> take well on down to the little loop zone. 600 - 700'

Request permission to do same

Thanks

Re-enter & Deepen  
Handle as APP

APPROVED BY THE STATE  
OF UTAH DIVISION OF  
OIL, GAS, AND MINING  
DATE: 3-22-91  
BY: J. Matthews  
WELL SPACING: 156-3

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

SIGNED W.C. Stringer

TITLE President

DATE 12-17-90

(This space for Federal or State office use)  
/S/ WILLIAM C. STRINGER

Assistant District Manager  
for Minerals

JAN 28 1991

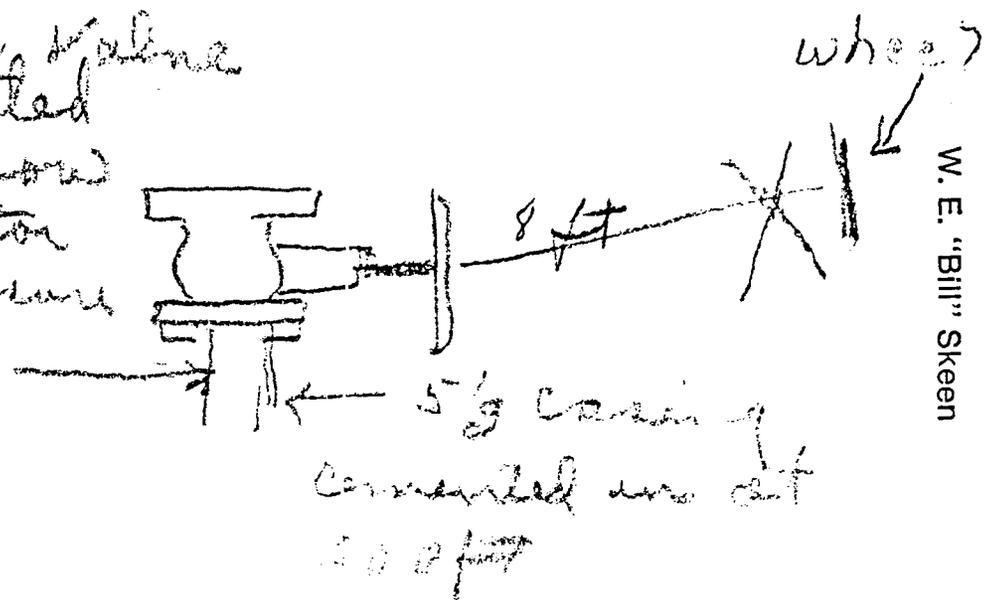
APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

Approved with conditions  
1/17/91

Walmouth, Maine  
Hand operated  
valve as shown  
out pressure  
500 lb pressure  
Well  
Break



W. E. "Bill" Skeen

Wesgra Corporation  
Well No. Gebauer-Groom 11  
NENE Sec. 7, T. 42 S., R. 19 E.  
San Juan County, Utah  
Lease U-7303

#### CONDITIONS OF APPROVAL

The operator shall comply with the conditions and stipulations within the original Application for Permit to Drill and the additional conditions summarized below.

Approval of this sundry notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Be advised that Wesgra Corporation is considered to be the operator of the above well and is responsible under the terms and conditions of the lease for the operations conducted on the leased lands.

Bond coverage for this well is provided by UT0251 (Principal - Wesgra Corporation) via surety consent as provided for in 43 CFR 3104.2.

This office will hold the aforementioned operator and bond liable until the provisions of 43 CFR 3106.7-2 continuing responsibility are met.

#### A. DRILLING PROGRAM

All lease operations will be conducted in full compliance with applicable regulations (43 CFR 3100), Onshore Oil and Orders 1, 2, 3, 4 and 5 and the approved plan of operations. The operator is fully responsible for the actions of his subcontractors. A copy of these conditions and the approved plan will be made available to the field representative to insure compliance.

1. 500 lb. pressure valve shall be tested according to Onshore Order No. 2.
2. Casing and cementing requirements shall comply with Onshore Order No. 2 requirements.
3. Daily drilling and completion progress reports shall be submitted to the Moab District Office on a weekly basis.
4. Produced waste water will be confined to a unlined pit for a period not to exceed ninety (90) days after initial production. During the ninety (90) day period, an application for approval of a permanent disposal method and location, along with the required water analysis, will be submitted for the Assistant District Manager's approval pursuant to Onshore Oil and Gas Order No. 3 (NTL-2B).
5. Required verbal notifications are summarized in Table 1, attached. Written notification in the form of a Sundry Notice (Form 3160-5) will be submitted to the District Office within twenty-four (24) hours after spudding. If the spudding occurs on a weekend or holiday, the written report will be submitted on the following regular work day.

B. SURFACE USE PLAN

1. There will be no deviation from the proposed drilling and/or workover program without prior approval from the Assistant District Manager for Minerals. Safe drilling and operating practices must be observed. All wells, whether drilling, producing, suspended, or abandoned and/or separate facilities, will be identified in accordance with 43 CFR 3162.6.
2. "Sundry Notice and Report on Wells" (Form 3160-5) will be filed for approval for all changes of plans and other operations in accordance with 43 CFR 3162.6.
3. The dirt contractor will be provided with an approved copy of the surface use plan.
4. This permit will be valid for a period of one (1) year from the date of approval. After permit termination, a new application will be filed for approval for any future operations.
5. All electrical and production lines shall be buried within 60 days following completion of the well, if the well is capable of production in commercial quantities.

NOTIFICATIONS

Notify Bob Turri of the San Juan Resource Area, at  
(801) 587-2141 for the following:

2 days prior to commencement of dirt work, construction or reclamation;

1 day prior to spudding;

50 feet prior to reaching intermediate casing depth;

3 hours prior to testing BOP's and intermediate casing.

If the person at the above number cannot be reached, then notify Fred Oneyear in the Moab District Office at (801) 259-6111 or at home (801) 259-5937 (If unsuccessful, then notify one of the following people listed below).

Notify the Moab District Office, Branch of Fluid Minerals at (801) 259-6111 for the following:

No well abandonment operations will be commenced without the prior approval of the Assistant District Manager, Minerals Division. In the case of newly drilled dry holes, and in emergency situations, verbal approval can be obtained by calling the following individuals, in the order listed.

Dale Manchester, Petroleum Engineer                      Office Phone:        (801) 259-6111

Home Phone:                      (801) 259-6239

Eric Jones, Petroleum Engineer                              Office Phone:        (801) 259-6111

Home Phone:                      (801) 259-2214

If unable to reach the above individuals including weekends, holidays, or after hours please call the following:

Lynn Jackson,    Office Phone:        (801) 259-6111

Chief, Branch of Fluid Minerals

Home Phone:                      (801) 259-7990

24 HOURS ADVANCE NOTICE IS REQUIRED FOR ALL ABANDONMENTS

ENTITY ACTION FORM - DOGM FORM 6

FEB 20 1991

OPERATOR Wesgra Oil Corp

OPERATOR CODE N1060

ADDRESS P.O. box 367

PHONE NO. 801 683-2298

Mexican Hat, Utah 84531

DIVISION OF  
OIL, GAS & MINING

OPERATORS MUST COMPLETE FORM UPON SPUDDING NEW WELL OR WHEN CHANGE IN OPERATIONS OR INTERESTS NECESSITATES CHANGE IN EXISTING ENTITY NUMBER ASSIGNMENT.

ACTION CODE	CURRENT ENTITY NO.	NEW ENTITY NO.	API NUMBER	WELL NAME	WELL LOCATION					SPUD DATE	EFFECTIVE DATE
					QQ	SC	TP	RG	COUNTY		
	11004	11004	43-037-30876	Gebauer-Groom #11 re-entry	N.E	7	42	19E	San Juan	2-13-91 XIIA	2-11-91

COMMENTS:

--	--	--	--	--	--	--	--	--	--	--	--

COMMENTS:

--	--	--	--	--	--	--	--	--	--	--	--

COMMENTS:

--	--	--	--	--	--	--	--	--	--	--	--

COMMENTS:

--	--	--	--	--	--	--	--	--	--	--	--

COMMENTS:

- ACTION CODES:
- A - ESTABLISH NEW ENTITY FOR NEW WELL
  - B - ADD NEW WELL TO EXISTING ENTITY
  - 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)  
(SEE INSTRUCTIONS)

W.E. Kern 2-15-91  
SIGNATURE  
President 2-15-91  
TITLE DATE

UTAH DIVISION OF OIL, GAS & MINING  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:							
NEW WELL <input type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEPEN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESRV. <input type="checkbox"/>	Other _____		
2. NAME OF OPERATOR Wesgra Corporation							
3. ADDRESS OF OPERATOR P.O. Box 367, Mexican Hat, Utah 84531							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*							
At surface 1298' from the north line 460' from the east line							
At top prod. interval reported below							
At total depth							
14. PERMIT NO. <b>RE-ENTRY</b> 43-037-30876				DATE ISSUED			
15. DATE SPUDDED 2-11-91		16. DATE T.D. REACHED 2-10-91		17. DATE COMPL. (Ready to prod.) 2-20-91			
20. TOTAL DEPTH, MD & TVD 720'			21. PLUG, BACK T.D., MD & TVD re-entry		22. IF MULTIPLE COMPL. HOW MANY* →		
23. INTERVALS DRILLED BY rotary				24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) 600' to 620' 670' to 698'			
25. WAS DIRECTIONAL SURVEY MADE					26. TYPE ELECTRIC AND OTHER LOGS RUN samples only		
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		
75/8"	23pd	30'	97/8"	7 sacks			
4 1/2"	11 pd	210'	6-3/4"	18 sackss			
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) completed in little loop zone				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED						
33.* PRODUCTION							
DATE FIRST PRODUCTION 2-20-91		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pumping			WELL STATUS (Producing or shut-in) none		
DATE OF TEST 2-20-91	HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL. 5 BB1	GAS—MCF. light		
WATER—BBL. none	GAS-OIL RATIO						
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					TEST WITNESSED BY Curtis Palmer		
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 <u>McGreen</u>		TITLE <u>President</u>		DATE <u>2-25-91</u>			

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



# State of Utah

DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

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

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

March 22, 1991

Wesgra Oil Corporation  
P. O. Box 367  
Mexican Hat, Utah 84531

Gentlemen:

Re: Gebauer-Groom 11 Well, Re-entry and Deepening, 1298 feet from the North line, 460 feet from the East line, SE NE, Section 7, Township 42 South, Range 19 East, San Juan County, Utah

Approval to drill the referenced well is hereby granted in accordance with the Order in Cause No. 156-3 dated April 15, 1980.

In addition, the following actions are necessary to fully comply with this approval:

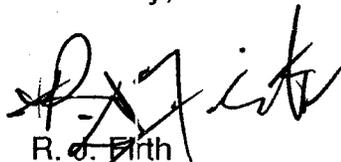
1. Spudding notification within 24 hours after drilling operations commence.
2. Submittal of Entity Action Form 6, within five working days following spudding and whenever a change in operations or interests necessitates an entity status change.
3. Submittal of the Report of Water Encountered During Drilling, Form 7.
4. Prompt notification in the event it is necessary to plug and abandon the well. Notify R. J. Firth, Associate Director, (Office) (801) 538-5340, (Home) 571-6068, or J. L. Thompson, Lead Inspector, (Home) 298-9318.
5. Compliance with the requirements of Utah Admin. R.615-3-20, Gas Flaring or Venting.

Page 2  
Wesgra Oil Corporation  
Gebauer-Groom 11  
March 22, 1991

6. Prior to commencement of the proposed drilling operations, plans for facilities for disposal of sanitary wastes at the drill site shall be submitted to the local health department. These drilling operations and any subsequent well operations must be conducted in accordance with applicable state and local health department regulations. A list of local health departments and copies of applicable regulations are available from the Division of Environmental Health, Bureau of Drinking Water/Sanitation, telephone (801) 538-6159.
7. This approval shall expire one (1) year after date of issuance unless substantial and continuous operation is underway or an application for an extension is made prior to the approval expiration date.

The API number assigned to this well is 43-037-30876.

Sincerely,



R. J. Firth  
Associate Director, Oil & Gas

tas  
Enclosures  
cc: Bureau of Land Management  
J. L. Thompson  
we14/1-18

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 Wesgra Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME U-7303
3. ADDRESS OF OPERATOR P.O. Box 367, Mexican Hat, Utah 84531		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 2358 FNL 477 FEL 1298' from the north line 460' from the east line		8. FARM OR LEASE NAME Gebauer-Groom
14. PERMIT NO.		9. WELL NO. <del>33</del> 34
15. ELEVATIONS (Show whether DF, RT, OR, etc.)		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec 7, 42S, 19E ?
		12. COUNTY OR PARISH 13. STATE San Juan Utah

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

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

Mr. Frank Matthews:

Frank I am sending copies of the BLM APD with **new survey plat**.  
*copy attached to APD*  
*APD was attached and processed separately*

*Gebauer-Groom*  
*11*  
*Gebauer-Groom*  
*34*

Gebauer-Groom well #34 is 2358' from the north line and not 3358' as I showed on my request to re-enter a typing error on my part. Sorry

Thanks

RECEIVED

APR 03 1991

DIVISION OF OIL GAS & MINING

18. I hereby certify that the foregoing is true and correct  
SIGNED [Signature] TITLE President DATE 3-29-91

(This space for Federal or State office use)

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

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TR... DATE\*  
MINERALS MANAGEMENT SERVICE  
OIL & GAS OPERATIONS RECEIVED

Form approved.  
Budget Bureau No. 42-R1425.

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  
Wesgra Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 14, Mexican Hat, Utah 84531

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)  
At surface 1298' from the north line  
At proposed prod. zone 460' from the east line  
43-037-30876 PR

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*  
one half mile

15. DISTANCE FROM PROPOSED\* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drilg. unit line, if any)  
16. NO. OF ACRES IN LEASE  
17. NO. OF ACRES ASSIGNED TO THIS WELL

18. DISTANCE FROM PROPOSED LOCATION\* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 200'  
19. PROPOSED DEPTH 235' or goodridge rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)  
4159' ungraded ground

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
9"	XXXX 7 5/8"	20 pd	30'	7 dacks
6 3/4"	5 1/2"	17 pd	200' plus	18 sacks

- 1, 2, 4, 5, 8, 9
- 3. surface formaion Supai
- 6. estimated top of the geological marker Goodridge 200' plus
- 7. anticipated depth of water, oil, or gas Goodridge plus oil only
- 10. pressure equipment, none, Goodridge none is shallow and carries very little or no gas
- 11. circulating medium, air and foam
- 12. testing, logging, samples only by geologist
- 13. abnormal pressures or temperatures, none, no hydrogen ~~XXX~~ sulfite
- 14. anticipated starting date, when approved or wtihin a reasonable time there after  
duration of drilling operation, six days

22. APPROX. DATE WORK WILL START\*  
shortly after approval

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 W E Skeen TITLE President DATE 10-7-82

(This space for Federal or State office use)

PERMIT NO. \_\_\_\_\_ APPROVAL DATE  
APPROVED BY [Signature] TITLE E. W. Guynn DATE NOV 15 1982  
CONDITIONS OF APPROVAL, IF ANY: District Oil & Gas Supervisor

NOTICE OF APPROVAL  
CONDITIONS OF APPROVAL ATTACHED  
FLARING OR VENTING OF GAS IS SUBJECT TO NTL 4-A DATED 1/1/80

RECEIVED

DIVISION OF OIL GAS & MINING

RECEIVED  
OCT 15 1982

MINERALS MANAGEMENT SERVICE  
DURANGO, CO

operator

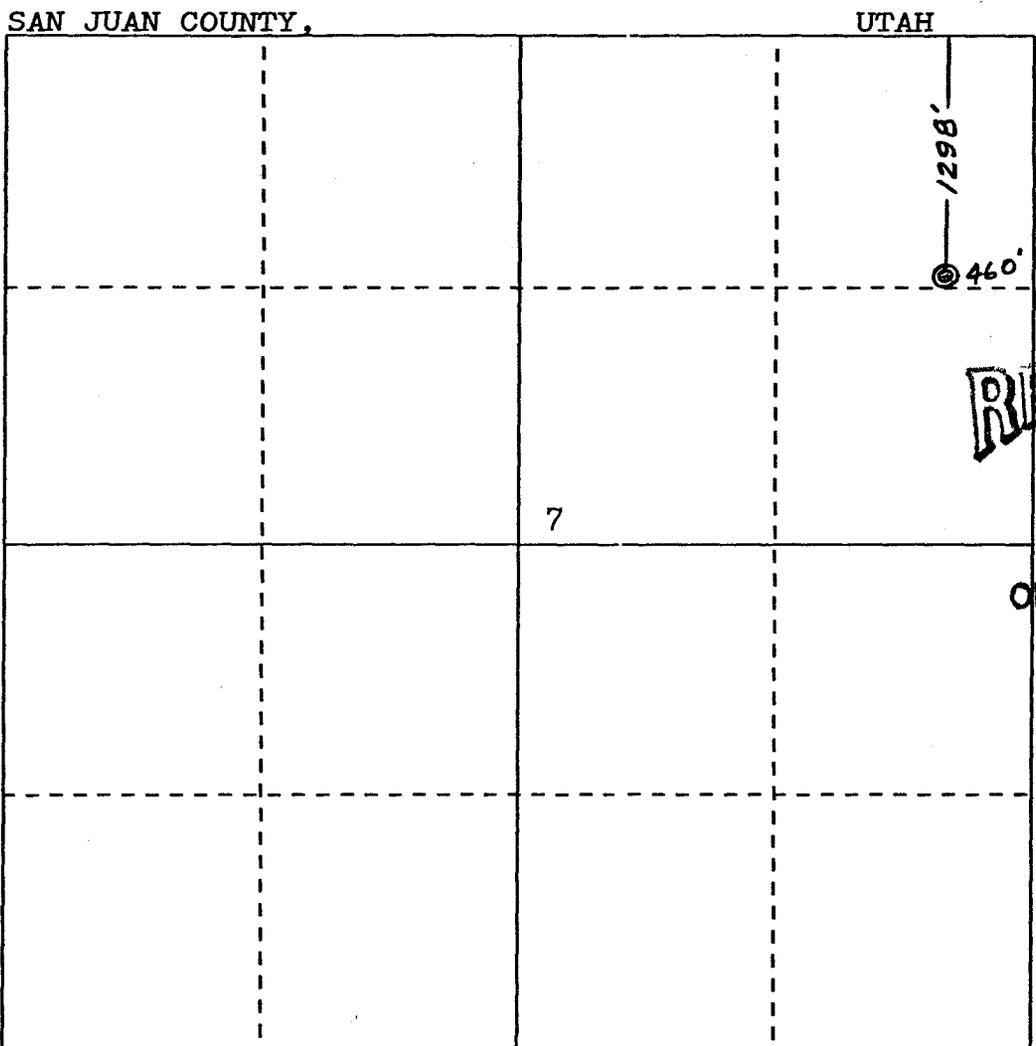
COMPANY THE WESTGRA CORPORATION

LEASE GEBAUER-GROOM WELL NO. 8 11

SEC. 7 T. 42 SOUTH R. 19 EAST, SLM

LOCATION 1298 FEET FROM THE NORTH LINE AND  
460 FEET FROM THE EAST LINE

ELEVATION 4159 UNGRADED GROUND



**RECEIVED**

APR 03 1991

DIVISION OF  
OIL GAS & MINING

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 August 27, 19 82

OPERATOR WESGRA CORPORATION

OPERATOR ACCT. NO. N 1060

ADDRESS P. O. BOX 367

MEXICAN HAT, UT 84531

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	11004	43-037-30876	GEBAUER-GROOM #11	SENE	7	42S	19E	SAN JUAN	2-13-91	
WELL 1 COMMENTS:											
	99999	11004	43-037-30842	GEBAUER-GROOM 10	NENE	7	42S	19E	SAN JUAN	3-8-91	
WELL 2 COMMENTS: <i>(Entity assignments made on 6-6-91)</i>											
WELL 3 COMMENTS:											
WELL 4 COMMENTS:											
WELL 5 COMMENTS:											

**ACTION CODES** (See instructions on back of form)

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

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

L. ROMERO (DOGM)

Signature

ADMIN. ANALYST

Title

6-6-91

Date

Phone No. ( )

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

6. Lease Designation and Serial Number

U-7303

7. Indian Allottee or Tribe Name

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells.  
Use APPLICATION FOR PERMIT— for such proposals

8. Unit or Communitization Agreement

1. Type of Well

- Oil Well     Gas Well     Other (specify)

9. Well Name and Number

Gebauer-Gröom 11

2. Name of Operator

Wesgra Corporation

10. API Well Number

4303730876

3. Address of Operator

P.O. Box 367, Mexican Hat, Utah 84531

4. Telephone Number

801 683-2298

11. Field and Pool, or Wildcat

Mexican Hat

5. Location of Well

Footage :  
QQ, Sec, T., R., M. : Sec 7, 42S, 19E

County : San Juan

State : UTAH

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

**NOTICE OF INTENT**  
(Submit in Duplicate)

- |  |   |
|--|---|
| <input type="checkbox"/> Abandonment             | <input type="checkbox"/> New Construction     |
| <input type="checkbox"/> Casing Repair           | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans         | <input type="checkbox"/> Recompletion         |
| <input type="checkbox"/> Conversion to Injection | <input type="checkbox"/> Shoot or Acidize     |
| <input type="checkbox"/> Fracture Treat          | <input type="checkbox"/> Vent or Flare        |
| <input type="checkbox"/> Multiple Completion     | <input type="checkbox"/> Water Shut-Off       |
| <input type="checkbox"/> Other _____             |   |

Approximate Date Work Will Start \_\_\_\_\_

**SUBSEQUENT REPORT**  
(Submit Original Form Only)

- |  |   |
|--|---|
| <input type="checkbox"/> Abandonment *               | <input type="checkbox"/> New Construction     |
| <input type="checkbox"/> Casing Repair               | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans             | <input type="checkbox"/> Shoot or Acidize     |
| <input type="checkbox"/> Conversion to Injection     | <input type="checkbox"/> Vent or Flare        |
| <input type="checkbox"/> Fracture Treat              | <input type="checkbox"/> Water Shut-Off       |
| <input type="checkbox"/> Other temporarily abandoned |   |

Date of Work Completion \_\_\_\_\_

Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION AND LOG form.

\* Must be accompanied by a cement verification report.

13. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. 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 will probably put back in prodction shortly and as soon as we can get more equipment,



MAR 02 1992

DIVISION OF  
OIL GAS & MINING

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

Name & Signature

*W. E. Green*

Title

President

Date

2-27-92

(State Use Only)

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate  
(Other instructions on reverse side)

OMB NO. 1004-0135  
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. U-7303
2. NAME OF OPERATOR Wesgra Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 310-367, Mexican Hat, Utah 84531		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 1298' from the North line 460' from the east line		8. FARM OR LEASE NAME Gebauer-Groom
14. PERMIT NO. 43-037-30876	15. ELEVATIONS (Show whether OF, BT, GR, etc.) 4159'	9. WELL NO. 11
		10. FIELD AND POOL, OR WILDCAT Mexican Hat
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec 7, 42S, 19E
		12. COUNTY OR PARISH San Juan
		13. STATE Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	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 checked="" 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.)  
Well plugged according to BLM regulations  
witnessed by employes of BLM

RECEIVED

MAY 22 1993

DIVISION OF OIL GAS & MINING

18. I hereby certify that the foregoing is true and correct  
SIGNED M. C. Keen TITLE President DATE 5-18-93

(This space for Federal or State office use)

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

\*See Instructions on Reverse Side