

UNITED STATES
DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

RECEIVED
JUN 8 1988

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
DIVISION OF OIL, GAS & MINING SINGLE ZONE MULTIPLE ZONE

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 1916' from the south line *NWSW*
At proposed prod. zone 417' from the west line

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
one quarter of a mile

16. DISTANCE FROM PROPOSED LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drilg. unit line, if any)
18. DISTANCE FROM PROPOSED LOCATION TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.

16. NO. OF ACRES IN LEASE
10

19. PROPOSED DEPTH
200' *Goodridge*

17. NO. OF ACRES ASSIGNED TO THIS WELL
2

20. ROTARY OR CABLE TOOLS
KMKK rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
4090'

22. APPROX. DATE WORK WILL START*
when approved

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WRIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11 in	7 5/8	23 pd	21 ft	7 sacks
6 3/4	4 1/2	9 1/2	top of zone	25 sacks or more

- 1, 2, 4, 5, 8, 9
3. surface formation *Supai*
6. estimated top of geological formation *Goodridge 200ft plus*
7. estimated depth of anticipated water, oil, or gas *Goodridge zone 200 ft plus*
10. pressure equipment, none, these shallow carry little or no pressure
11. circulating medium, air and foam
12. testing, logging -- samples only
13. abnormal pressures or temperatures, none-- no hydrogen sulfite
14. ant cipated starting date *reasonable time after approval*
duration of drilling *six to ten days*

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 Steen* TITLE President DATE 6-5-88

(This space for Federal or State office use)

PERMIT NO. 43-037-31432 APPROVAL DATE APPROVED BY THE STATE

APPROVED BY OF UTAH DIVISION OF OIL, GAS AND MINING TITLE

DATE 6-16-88
BY *John R. Bay*

*See Instructions On Reverse Side WELL SPACING: Case No. 156-3

COMPANY WESGRO OIL COMPANY

LEASE SAN JUAN FEDERAL WELL NO. 22

SEC. 8 , T. 42 S. , R. 19 E. , S.L.M.

RECEIVED
JUN 8 1988

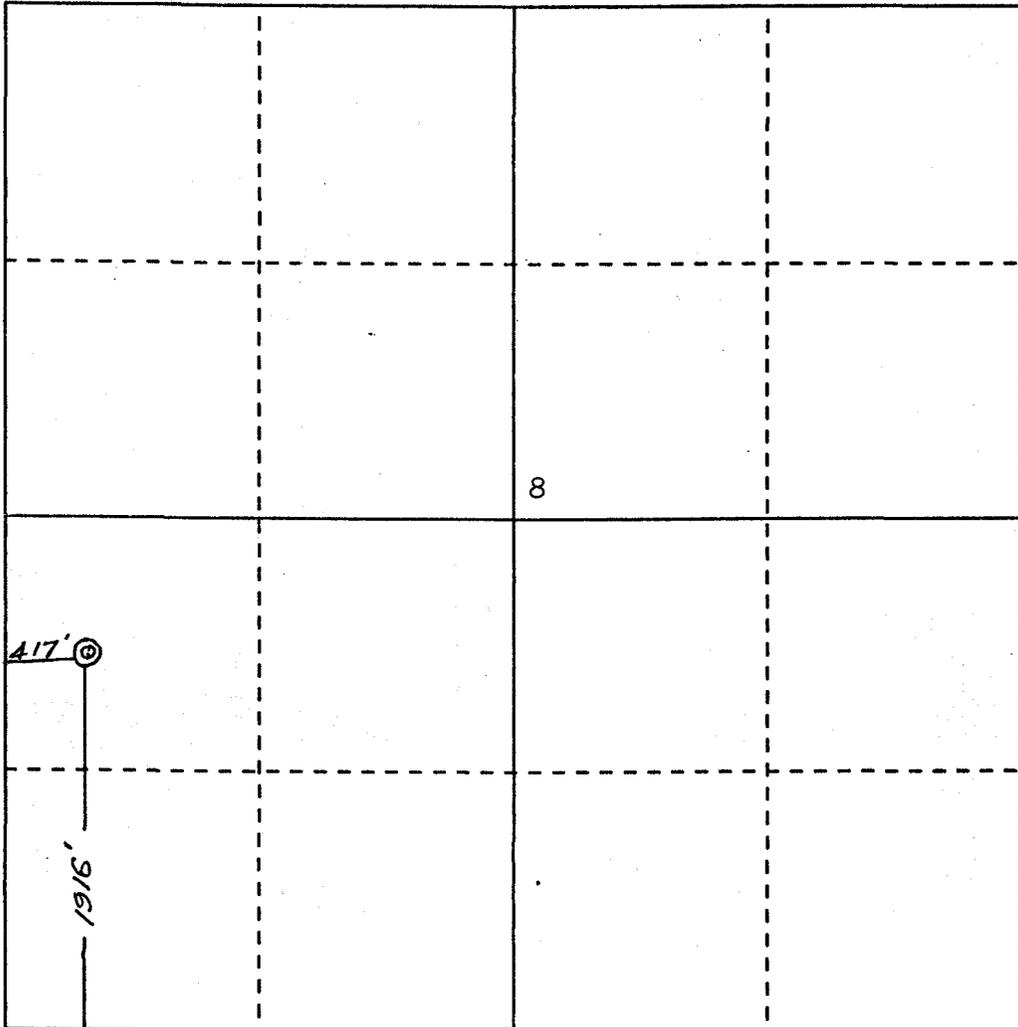
LOCATION 1916 FEET FROM THE SOUTH LINE and
417 FEET FROM THE WEST LINE.

ELEVATION 4090

DIVISION OF
OIL, GAS & MINING

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.

James P. Leese
Registered Land Surveyor.

James P. Leese
UTah Reg. No. 1472



20 May 1988

COMPANY WESGRO OIL COMPANY

LEASE SAN JUAN FEDERAL WELL NO. 22

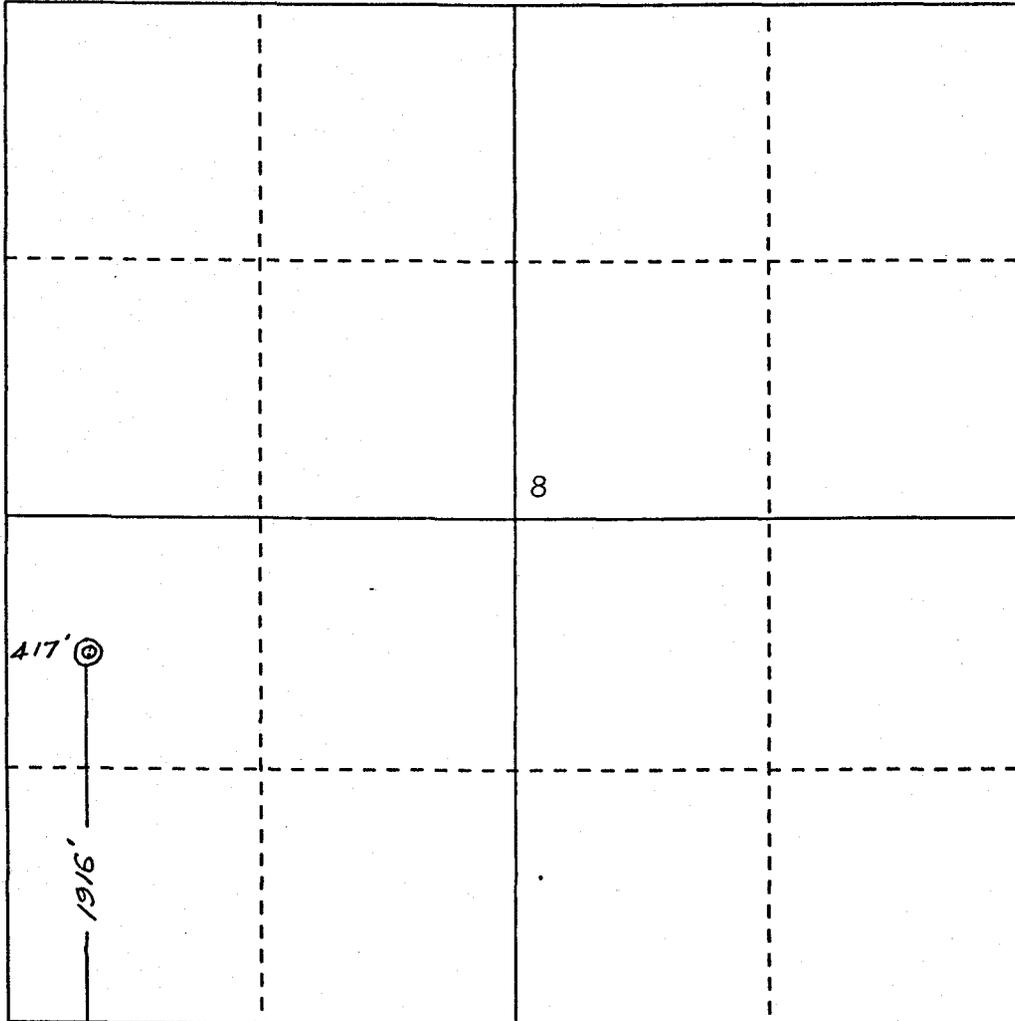
SEC. 8 , T. 42 S. , R. 19 E. , S.L.M.

LOCATION 1916 FEET FROM THE SOUTH LINE and
417 FEET FROM THE WEST LINE.

ELEVATION 4090

SAN JUAN COUNTY

UTAH

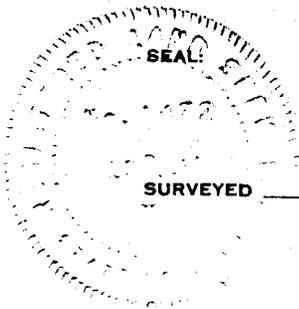


SCALE - 1 INCH EQUALS 1000 FEET

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.

James P. Leese
Registered Land Surveyor.

James P. Leese
Utah Reg. No. 1472



SURVEYED 20 May , 1988

OPERATOR Wesgra Oil Corporation DATE 6-8-88
WELL NAME San Juan Fed. #22
SEC NWSW 8 T 42S R 19E COUNTY San Juan

43-037-31432
API NUMBER

Fed.
TYPE OF LEASE

CHECK OFF:

PLAT

(Blm-Moeb)

LEASE

BOND

FIELD

NEAREST WELL

POTASH OR OIL SHALE

PROCESSING COMMENTS:

nearest well ok under Cause No. 156-3
water permit ok

APPROVAL LETTER:

SPACING: R615-2-3 _____ UNIT

R615-3-2

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

R615-3-3

STIPULATIONS:



State of Utah

DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

Norman H. Bangertter
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

June 16, 1988

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

Gentlemen:

Re: San Juan Federal 22 - NW SW Sec. 8, T. 42S, R. 19E - San Juan County, Utah
1916' FSL, 417' FWL

Approval to drill the referenced well is hereby granted in accordance with the Order of 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 an Entity Action Form 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 OGC-8-X.
4. Prompt notification if it is necessary to plug and abandon the well. Notify John R. Baza, Petroleum Engineer, (Office) (801) 538-5340, (Home) 298-7695, or Jim Thompson, Lead Inspector, (Home) 298-9318.
5. Compliance with the requirements of Rule R615-3-22, Gas Flaring or Venting, Oil and Gas Conservation General Rules.
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 General Sanitation, telephone (801) 538-6121.

Page 2
Wesgra Corporation
San Juan Federal 22
June 16, 1988

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 43-037-31432.

Sincerely,



R. J. Firth
Associate Director, Oil & Gas

lr
Enclosures
cc: Branch of Fluid Minerals
D. R. Nielson
8159T

LCR

Form 3160-3
(November 1983)
(formerly 9-331C)

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0136
Expires August 31, 1985

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, **RECEIVED**

1a. TYPE OF WORK
DRILL DEEPEN PLUG BACK
b. TYPE OF WELL
OIL WELL GAS WELL OTHER
NOV 14 1988
SINGLE ZONE MULTIPLE ZONE

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 1916' from the south line
At proposed prod. zone 417' from the west line

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
one quarter of a mile

10. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drig. unit line, if any)
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.

16. NO. OF ACRES IN LEASE
10

17. NO. OF ACRES ASSIGNED TO THIS WELL
2

19. PROPOSED DEPTH
200'

20. ROTARY OR CABLE TOOLS
XXXX rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
4090'

22. APPROX. DATE WORK WILL START*
when approved

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT

5. LEASE DESIGNATION AND SERIAL NO.
U-23761-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
San Juan Federal

9. WELL NO.
22

10. FIELD AND POOL, OR WILDCAT
Mexican Hat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 8, 42S, 19E

12. COUNTY OR PARISH
San Juan

13. STATE
Utah

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. Sker TITLE President DATE 6-5-88

(This space for Federal or State office use)

PERMIT NO. 43-037-31432 APPROVAL DATE

APPROVED BY /s/ Gene Nodine TITLE DISTRICT MANAGER DATE NOV 04 1988

CONDITIONS OF APPROVAL, IF ANY:

CONDITIONS OF APPROVAL ATTACHED

FLARING OR VENTING OF GAS IS SUBJECT TO NTL 4-A
(REVISED 11/80)

*See Instructions On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Docu

Wesgra Corporation
Well No. San Juan Federal 22
Sec. 8, T. 42 S., R. 19 E.
San Juan County, Utah
Lease U-23761-A

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 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 an irrevocable "Letter of Credit" (Bonded Principal - Wesgra Corporation) \$10,000 on Lease U-23761-A as provided for in 43 CFR 3104.1(c)(5).

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

Surface casing shall be set into non fresh water bearing bedrock and cemented to surface to protect fresh water zones adjacent the San Juan River. This work shall be witnessed by a BLM representative.

B. SURFACE USE PLAN

1. Portable tanks and tanks mounted on trailers will not be authorized for oil storage for more than an initial 30-day testing period.
2. Each location will be ditched to drain any spills or leaking oil from the wells into a pit.
3. All above ground facilities will be painted a buff or sage green.
4. When abandoned; the locations will be recontoured, ripped 6 inches deep and broadcast seeded with 1/2 lb/acre of sagebrush and 6 lbs/acre of tall wheatgrass.
5. If at any time the facilities located on public lands authorized by the terms of the lease are no longer included in the lease (due to a contraction in the unit or other lease or unit boundary change) the Bureau of Land Management will process a change in authorization to the appropriate statute. The authorization will be subject to appropriate rental, or other financial obligation determined by the authorized officer.

NOTIFICATIONS

Notify the San Juan Resource Area, at (801) 587-2144 for the following:

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

1 day prior to spudding.

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 District Manager. 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

Lynn Jackson, Chief, Branch of Fluid Minerals

Office Phone: (801) 259-6111

Home Phone: (801) 259-7990

Paul Brown, I&E Coordinator

Office Phone: (801) 259-6111

Home Phone: (801) 259-7018

24 HOURS ADVANCE NOTICE IS REQUIRED FOR ALL ABANDONMENTS.

WATER PERMIT OK

DIVISION OF OIL, GAS AND MINING

SPUDDING INFORMATION

API NO. 43-037-31432

NAME OF COMPANY: WESGRA CORPORATION

WELL NAME: SAN JUAN FEDERAL #22

SECTION NWSW 8 TOWNSHIP 42S RANGE 19E COUNTY SAN JUAN

DRILLING CONTRACTOR QUALITY DRILLING

RIG # 1

SPUDDED: DATE 12/6/88

TIME _____

How ROTARY

DRILLING WILL COMMENCE _____

REPORTED BY WILLIAM SKEEN

TELEPHONE # 405-521-8960

DATE 12/8/88 SIGNED TAS

ENTITY ACTION FORM - DOGM FORM 6

OPERATOR Wesgra Corp
ADDRESS P.O. Box 367
Mexican Hat, Utah 84531

OPERATOR CODE N-1060
~~00380~~
PHONE NO. 425 521-8960
801 683-2298

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		
N-1060	00380	00380	43-03731432	SAN JUAN #22 Federal	N.E.	8	425	19E	SAN JUAN	12-6-88	12-18-88
COMMENTS: Federal Lease Field-Mexican Hat Not in a Unit Proposed Zone- Goodridge Sandstone (operator has several other wells in sec. 8, producing same formation. Entity 00380 ok. Assign 12-27-88 per											
COMMENTS:											
COMMENTS:											
COMMENTS:											
COMMENTS:											
COMMENTS:											
COMMENTS:											

RECEIVED
DEC 21 1988

DIVISION OF
OIL, GAS & MINING

- 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.C. Speer
SIGNATURE
President
TITLE
12-19-88
DATE

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

(See Instructions on reverse side)

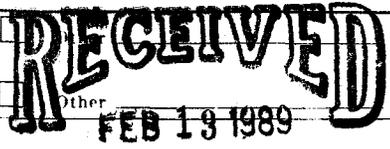
12

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

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

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

2. NAME OF OPERATOR
Wesgra Corporation



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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface, 1916' from the south line
417' from the west line
At top prod. interval reported below
At total depth

DIVISION OF
OIL, GAS & MINING

5. LEASE DESIGNATION AND SERIAL NO.
U-23761-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
San Juan Federal

9. WELL NO.
22

10. FIELD AND POOL, OR WILDCAT
Mexican Hat

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec 8, 42S, 19E

14. PERMIT NO. 43-037-31432 | DATE ISSUED 6-16-88

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

15. DATE SPUNDED 12-6-88 | 16. DATE T.D. REACHED 12-12-88 | 17. DATE COMPL. (Ready to prod.) 12-22-88 | 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4090' | 19. ELEV. CASINGHEAD 4090'

20. TOTAL DEPTH, MD & TVD 208' | 21. PLUG, BACK T.D., MD & TVD | 22. IF MULTIPLE COMPL., HOW MANY* | 23. INTERVALS DRILLED BY rotary TOOLS ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Goodridge 185' to 202'

25. WAS DIRECTIONAL SURVEY MADE NO

26. TYPE ELECTRIC AND OTHER LOGS RUN no logs | 27. WAS WELL CORED no

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	26pd	20'	11'	5 sacks	
5 1/2"	9 1/2 pd	182'	6 3/4"	20 sacks	

29. LINER RECORD

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

30. TUBING RECORD

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 12-22-88 | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pumping | WELL STATUS (Producing or shut-in) producing

DATE OF TEST 12-22-88 | HOURS TESTED 24 | CHOKER SIZE | PROD'N. FOR TEST PERIOD | OIL—BBL. 1/2 | GAS—MCF. | WATER—BBL. none | 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 Clint Howell

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 W. E. Skreen TITLE President DATE 1-30-89

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

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING
 355 West North Temple, 3 Triad, Suite 350, Salt Lake City, UT 84180-1203

MONTHLY OIL AND GAS PRODUCTION REPORT

OPERATOR NAME AND ADDRESS:

BILL SKEEN
 WESGRA CORPORATION
 PO BOX 367
 MEXICAN HAT UT 84531

UTAH ACCOUNT NUMBER: N1060

REPORT PERIOD (MONTH/YEAR): 8 / 95

AMENDED REPORT (Highlight Changes)

Well Name API Number	Entry Location	Producing Zone	Well Status	Days Oper	Production Volumes		
					OIL(BBL)	GAS(MCF)	WATER(BBL)
SAN JUAN FED #3 4303730420 00380 42S 19E 8		GDRSD					
SAN JUAN TRACT 4-2X 4303730733 00380 42S 19E 8		GDRSD					
SAN JUAN FEDERAL #16 4303730889 00380 42S 19E 8		GDRSD					
SAN JUAN FEDERAL 18 4303731423 00380 42S 19E 8		GDRSD					
SAN JUAN FED. 21 4303731431 00380 42S 19E 8		GDRSD					
SAN JUAN FED. 22 4303731432 00380 42S 19E 8		GDRSD					
SAN JUAN FED. TRACT 4 #5 4303731438 00380 42S 19E 8		GDRSD					
SAN JUAN FEDERAL 4-4A 4303731749 00380 42S 19E 8		LTLPP					
SAN JUAN FED #1 4303730393 00381 42S 19E 8		GDRSD					
SAN JUAN FED #2A 4303730397 00381 42S 19E 8		GDRSD					
SAN JUAN FED A.B.#2 4303730475 00381 42S 19E 8		GDRSD					
SAN JUAN FED #7 4303730477 00381 42S 19E 8		GDRSD					
SAN JUAN FED #8 4303730528 00381 42S 19E 8		GDRSD					
TOTALS							

COMMENTS: _____

I hereby certify that this report is true and complete to the best of my knowledge. Date: _____

Name and Signature: _____ Telephone Number: _____

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
SEP 20 1995
DIV. OF OIL, GAS & MINING

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 Federal reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No. _____
 6. Indian, Allottee or Tribe Name _____
 7. If Unit or CA, Agreement Designation _____
 8. Well Name and No. _____
 9. API Well No. _____
 10. Field and Pool, or Exploratory Area _____
 11. County or Parish, State _____

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
 Wesgra Corporation

3. Address and Telephone No.
 P.O. Box 310367, Mexican Hat Utah 84531

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 17 small producing oil wells in Sec 8, and 7
 lease- Goodridge Trust

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent <input type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<table style="width: 100%;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input type="checkbox"/> Other _____ </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water </td> <td style="width: 33%; vertical-align: top;"> <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small> </td> </tr> </table>	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input type="checkbox"/> Other _____	<input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water	<small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small>
<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input type="checkbox"/> Other _____	<input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water	<small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small>		

13. 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.)*

Gentlemen Men:

As of Sept 1, 1995, Wesgra Corporation becomes the property of Mr. Clint Howell long time partner in the firm.

The operation will continue to operate under the same name and the address will remain the same.

It has always been a pleasure dealing with you folks, you have always helpful and corpporative.

Thanks *W.E. Skeen*

W. E. (Bill) Skeen
 President, Wesgra Corporation

Clint Howell
 Clint Howell Ph. No. 801-683-2298
 new president

all corrispondance will be address to the address listed above

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

Signed _____ Title _____ Date _____

(This space for Federal or State office use)

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

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

Division of Oil, Gas and Mining
OPERATOR CHANGE WORKSHEET

***NEW OWNER ONLY!**

Routing:

1	LEC 7-LWP	✓
2	DTE 58-PL	✓
3	VLD 9-SJ	✓
4	RPT 10-FILE	✓
5	FRM 1	
6	OTC	

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

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

The operator of the well(s) listed below has changed (EFFECTIVE DATE: 9-1-95)

TO (new operator)	<u>WESGRA CORPORATION</u>	FROM (former operator)	<u>WESGRA CORPORATION</u>
(address)	<u>PO BOX 367</u>	(address)	<u>PO BOX 367</u>
	<u>MEXICAN HAT UT 84531</u>		<u>MEXICAN HAT UT 84531</u>
	<u>CLINT HOWELL (NEW OWNER)</u>		<u>BILL SKEEN</u>
	phone <u>(801) 683-2298</u>		phone <u>(405) 521-8960</u>
	account no. <u>N1060</u>		account no. <u>N1060</u>

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

Name: **SEE ATTACHED**	API: <u>037-31432</u>	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____

OPERATOR CHANGE DOCUMENTATION

- See 1. (Rule R615-8-10) Sundry or other legal documentation has been received from former operator (Attach to this form). *(Rec'd 9-20-95)*
- See 2. (Rule R615-8-10) Sundry or other legal documentation has been received from new operator (Attach to this form). *(Rec'd 9-20-95)*
- N/A 3. The Department of Commerce has been contacted if the new operator above is not currently operating any wells in Utah. Is company registered with the state? (yes/no) _____ If yes, show company file number: _____.
- N/A 4. (For Indian and Federal Wells ONLY) The BLM has been contacted regarding this change (attach Telephone Documentation Form to this report). Make note of BLM status in comments section of this form. Management review of Federal and Indian well operator changes should take place prior to completion of steps 5 through 9 below.
- N/A 5. Changes have been entered in the Oil and Gas Information System (Wang/IBM) for each well listed above.
- N/A 6. Cardex file has been updated for each well listed above.
- N/A 7. Well file labels have been updated for each well listed above.
- N/A 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to State Lands and the Tax Commission.
- See 9. A folder has been set up for the Operator Change file, and a copy of this page has been placed there for reference during routing and processing of the original documents.

ENTITY REVIEW

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

BOND VERIFICATION (Fee wells only) IDLCC #007230 / \$10,000 "Zions First Nat'l Bank"

- Yes 1. (Rule R615-3-1) The new operator of any fee lease well listed above has furnished a proper bond.
- ____ 2. A copy of this form has been placed in the ^{* Upon compl. of routing.} new and former operators' bond files.
- Yes 3. The former operator has requested a release of liability from their bond (yes/no) ____ . Today's date Sept. 21, 1995 . If yes, division response was made by letter dated Sept. 25, 1995 .

LEASE INTEREST OWNER NOTIFICATION RESPONSIBILITY

- N/A 1. (Rule R615-2-10) The former operator/lessee of any **fee lease** well listed above has been notified by letter dated _____ 19____, of their responsibility to notify any ^{OTS} person with an interest in such lease of the change of operator. Documentation of such _{9/26/95} notification has been requested.
- N/A 2. Copies of documents have been sent to State Lands for changes involving **State leases**.

FILMING

- Yes 1. All attachments to this form have been microfilmed. Date: October 20 1995.

FILING

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

COMMENTS

