

UTAH DIVISION OF OIL GAS AND MINING



REMARKS: WELL LOG — ELECTRIC LOGS — FILE WATER SANDS — LOCATION INSPECTED — SUB. REPORT/ABD.

DATE FILED 4-5-78

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

DRILLING APPROVED: 4-5-78

SPUDED IN:

COMPLETED: PUT TO PRODUCING:

INITIAL PRODUCTION:

GRAVITY A.P.I.

GOR:

PRODUCING ZONES:

TOTAL DEPTH:

WELL ELEVATION:

DATE ABANDONED: *Location Abandoned Well Never Drilled 4-3-81*

FIELD: Elkhorn ^{3/86}

UNIT:

COUNTY: Summit

WELL NO. UPRR 19-3

API NO: 43-043-30074

LOCATION 660' FT. FROM (S) LINE. 660' FT. FROM (W) LINE. SW SW 1/4 - 1/4 SEC. 19

13

TWP.	RGE.	SEC.	OPERATOR	TWP.	RGE.	SEC.	OPERATOR
				2N	7E	19	AMERICAN QUASAR PET. CO.

FIELD NOTATIONS

Entered in NID File ✓
Location Map Pinned ✓
Map Indexed ✓

Checked by Chief
Approval Letter
Disapproval Letter

COMPLETION DATA:

Date Well Completed
W..... WW..... TA.....
GW..... OS..... PA.....

Location Inspected
Bond released
State or Fee Land

LOGS FILED

Driller's Log.....
Electric Logs (No.)
E..... I..... Dual I Lat..... GR-N..... Micro.....
BHC Sonic GR..... Lat..... MI-L..... Sonic.....
CBLog..... CCLog..... Others.....

3-5-92
JEP



AMERICAN QUASAR PETROLEUM CO.

330 PACIFIC WESTERN LIFE BUILDING / CASPER / WYOMING 82601 U.S.A. / TELEPHONE (307) 265-3362

OUR NEW ADDRESS:
204 SUPERIOR BLDG.
201 NO. WOLCOTT

March 3, 1978

Division of Oil, Gas & Mining
1588 West North Temple
Salt Lake City, Utah 84116

Attention: Patrick L. Driscoll
Chief Petroleum Engineer



Re: UPRR #19-3
SW $\frac{1}{4}$ SW $\frac{1}{4}$ Section 19-2N-7E
Summit County, Utah

Gentlemen:

Attached is the Application for Permit to Drill the captioned well.

Surveyor's plat will be mailed direct to you as soon as the location is surveyed.

Very truly yours,

Kary J. Kaltenbacher

Kary J. Kaltenbacher
Division Drilling Engineer

KJK:bh
Enc

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL & GAS

5. Lease Designation and Serial No.
(Champlin UPRR fee pooled)

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
 American Quasar Petroleum Co. of New Mexico

3. Address of Operator
 204 Superior Bldg., 201 N. Wolcott, Casper, Wyo. 82601

4. Location of Well (Report location clearly and in accordance with any State requirements.)
 At surface: 660' FWL & 660' FSL (SW $\frac{1}{4}$ SW $\frac{1}{4}$)
 At proposed prod. zone: Nugget

6. If Indian, Allottee or Tribe Name
 N/A

7. Unit Agreement Name
 N/A

8. Farm or Lease Name
 UPRR

9. Well No.
 19-3

10. Field and Pool, or Wildcat
 Elkhorn

11. Sec., T., R., M., or Bk. and Survey or Area
 19-2N-7E

12. County or Parrish
 Summit

13. State
 Utah

14. Distance in miles and direction from nearest town or post office*
 8 mi. south of Upton, Utah

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

16. No. of acres in lease
 Champlin UPRR fee tract

17. No. of acres assigned to this well
 N/A

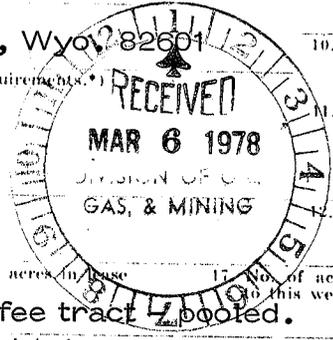
18. Distance from proposed location* to nearest well, drilling, completed, or applied for, on this lease, ft.
 None

19. Proposed depth
 10,800'

20. Rotary or cable tools
 Rotary

21. Elevations (Show whether DF, RT, GR, etc.)
 Estimated 6640' GR

22. Approx. date work will start*
 3/10/78



PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
17-1/2"	13-3/8"	48#	60'	60 sx (to surface)
12-1/4"	9-5/8"	36#	2,000'	1000 sx (to surface)
8-3/4"	5-1/2"	17#	10,800'	500 sx

Proposed operations:

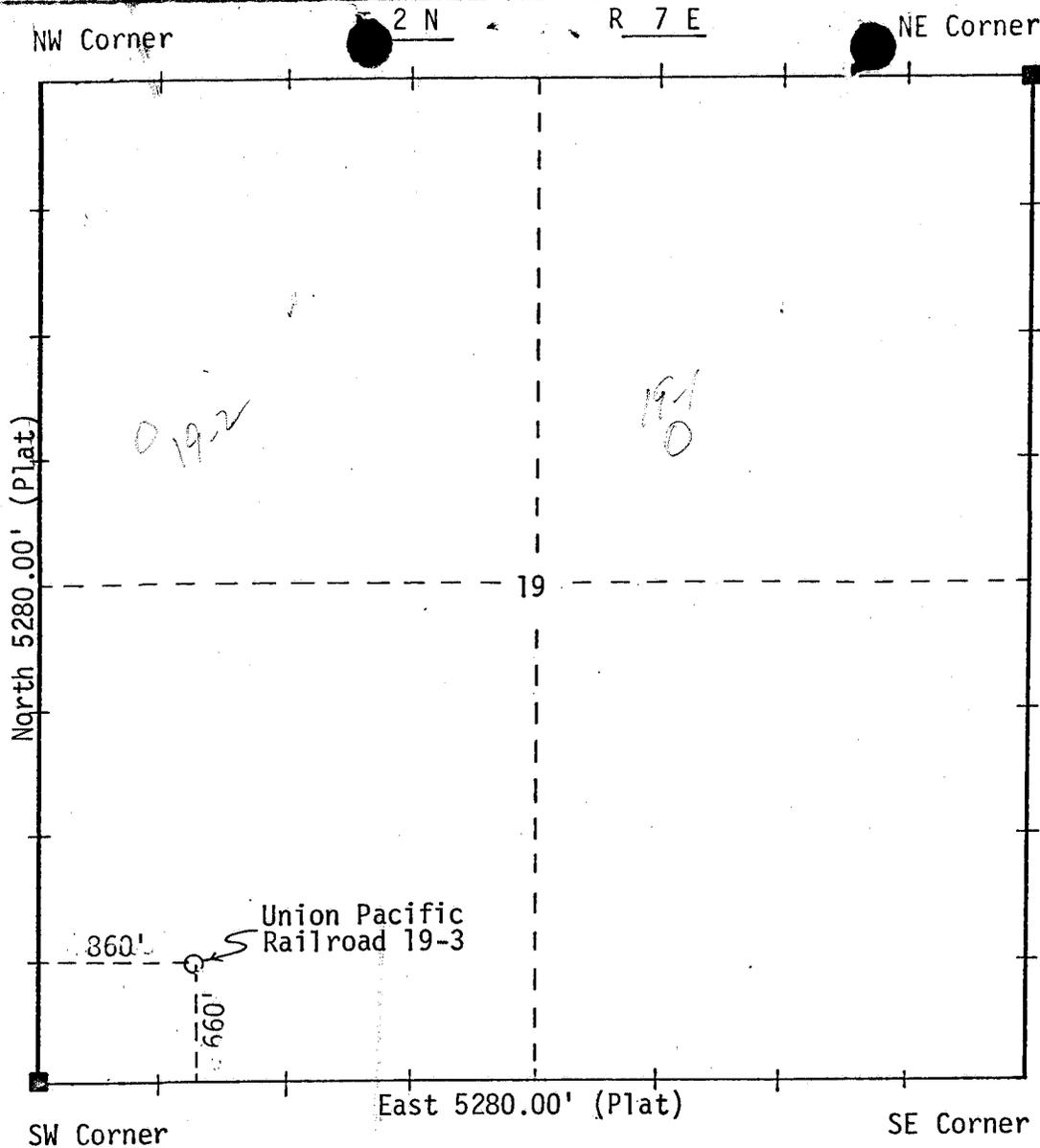
Drill 12 $\frac{1}{4}$ " hole to 2,000'[±], using native mud.
 Run and cement 9-5/8" surface casing.
 Nipple up 10" 5000 psi wp doublegate hydraulic BOP & Hydril. Pressure-test stack.
 Drill 8-3/4" hole to total depth with low solids non-disp.
 Run BHC Sonic-GR-Cal, DIL, CNL-FDC Logs.
 Run production casing if required.

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.

Signed: Kary J. Kaltenbacher Title: Div. Drlg. Engr. Date: 3/3/78
 (This space for Federal or State office use)

Permit No. 43-043-30074 Approval Date

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



SCALE: 1" = 1000'

- Found Brass Cap
- Found Stone
- ⊙ Set Brass Cap
- ⊗ Found Stone - Set Brass Cap
- Hub and Tack

I, John A. Proffit of Evanston, Wyoming certify that in accordance with a request from Max Sims of Coalville, Utah for American Quasar Petroleum Co. I made a survey on the 27 & 28th days of March, 1978 for Location and Elevation of the Union Pacific Railroad 19-3 as shown on the above map, the wellsite is in the Lot 4 of Section 19, Township 2 N, Range 7E of the Salt Lake Base & Meri., Summit County, State of Utah, Elevation is 6626 Feet Datum U.S.G.S Quadrangle Upton, Utah Spot elevation 7181 SW $\frac{1}{4}$ NE $\frac{1}{4}$ Sec. 19, T2N, R7E, SLB & M

Reference point	West 200'	5/8" rebar	Elev. top of bar	6636.2
Reference point	East 200'	"	"	6630.2
Reference point	_____			
Reference point	_____			

John A. Proffit 3/31/78
 John A. Proffit Utah R.L.S./NO. 2860

DATE: 3/31/78
 JOB NO.: 78-14-5

UINTA ENGINEERING & SURVEYING, INC.
 808 MAIN STREET, EVANSTON, WYOMING

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

** FILE NOTATIONS **

Date: March 17

Operator: American Gasar

Well No: UPRR 19-3

Location: Sec. 19 T. 24 R. 7E County: Summit

File Prepared:
Card Indexed:

Entered on N.I.D.:
Completion Sheet:

API NUMBER: 43-043-30074

CHECKED BY:

Administrative Assistant [Signature]

Remarks: OK, for pattern

Petroleum Engineer [Signature]

Remarks:

Director [Signature]

Remarks:

INCLUDE WITHIN APPROVAL LETTER:

Bond Required:

Survey Plat Required: needed.

Order No. 11071

Surface Casing Change
to _____

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

O.K. Rule C-3

O.K. In _____ Unit

Other:

Letter Written/Approved

April 4, 1978

American Quasar Petroleum Company
204 Superior Building
201 N. Wolcott
CAsper, Wyoming 82601

Re: Well No. UPRR 19-3
Sec. 19, T. 2 N, R. 7 E,
Summit County, Utah

Gentlemen:

Insofar as this office is concerned, approval to drill the above referred to well is hereby granted in accordance with the General Rules and Regulations and Rules of Practice and Procedure.

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

PATRICK L. DRISCOLL - Chief Petroleum Engineer
HOME: 582-7247
OFFICE: 533-5771

Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling.

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 43-043-30074.

Very truly yours,

DIVISION OF OIL, GAS, AND MINING

CLEON B. FEIGHT
Director



CALVIN L. RAMPTON
Governor

OIL, GAS, AND MINING BOARD

GORDON E. HARMSTON
Executive Director
NATURAL RESOURCES

STATE OF UTAH

GUY N. CARDON
Chairman

DEPARTMENT OF NATURAL RESOURCES

CHARLES R. HENDERSON
ROBERT R. NORMAN
JAMES P. COWLEY
HYRUM L. LEE

DIVISION OF OIL, GAS, AND MINING

1588 West North Temple

Salt Lake City, Utah 84116

CLEON B. FEIGHT
Director

June 8, 1978

American Quasar Petroleum Company
204 Superior Bldg.
201 N. Wolcott
Casper, Wyoming 82601

Re: Well No. Chournos 19-1
Sec. 19, T. 9N, R. 6E,
Rich County, Utah - Jan. 1978 thru' May 1978
Well No. UPRR 19-3
Sec. 19, T. 2N, R. 7E,
Summit County, Utah - Apr. 1978 thru' May 1978
Well No. Clark 4-2
Sec. 4, T. 2N, R. 7E,
Summit County, Utah - Feb. 1978 thru' May 1978
Well No. Blonquist 26-1
Sec. 26, T. 2N, R. 6E,
Summit County, Utah - Apr. 1978 thru' May 1978

Gentlemen:

Our records indicate that you have not filed a Monthly Report of Operations for the months indicated above on the subject well(s).

Rule C-22, General Rules and Regulations and Rules of Practice and Procedure, requires that said reports be filed on or before the sixteenth (16) day of the succeeding month. This report may be filed on Form OGC-1b, (U.S. Geological Survey Form 9-331) "Sundry Notices and Reports on Wells", or on company forms containing substantially the same information. We are enclosing forms for your convenience.

Your prompt attention to the above will be greatly appreciated.

Very truly yours,

DIVISION OF OIL, GAS, AND MINING

KATHY OSTLER
RECORDS CLERK

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER (Location)		5. LEASE DESIGNATION AND SERIAL NO. Champlin UPRR fee pooled
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyo. 82601		7. UNIT AGREEMENT NAME P
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FWL & 660' FSL (SW $\frac{1}{4}$ SW $\frac{1}{4}$)		8. FARM OR LEASE NAME UPRR
14. PERMIT NO.		9. WELL NO. 19-3
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640' GR (est.)		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 19-2N-7E
		12. COUNTY OR PARISH Summit
		13. STATE 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) <u>Monthly Report of Operations</u> <input checked="" type="checkbox"/>	

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.



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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 6/13/78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. LEASE DESIGNATION AND SERIAL NO.	Champlin UPRR fee pooled
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME	UPRR
9. WELL NO.	19-3
10. FIELD AND POOL, OR WILDCAT SURVEY OR AREA	Elkhorn
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	19-2N-7E
12. COUNTY OR PARISH	Summit
13. STATE	Utah

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER (Location)	
2. NAME OF OPERATOR American Quasar Petroleum Co.	
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyo. 82601	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FWL & 660' FSL (SW¼ SW¼)	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640' GR (est.)

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) Monthly Report of Operations <input checked="" type="checkbox"/>	

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.



18. I hereby certify that the foregoing is true and correct
SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 6/30/78
(This space for Federal or State office use)

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

July 6, 1978

MEMO TO FILE

Re: American Quasar Petroleum Company
Well No. 19-3
Sec. 19, T. 2N., R. 7E.
Summit County, Utah

As of July 6, 1978, the location has not been made for the above well.



CLEON B. FEIGHT
DIRECTOR

CBF/ksw

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

5. LEASE DESIGNATION AND SERIAL NO.
Champion UPRR fee pooled

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. NAME OF LEASE NAME
UPRR 2/11/19

9. WELL NO.
19-3

10. FIELD AND POOL, OR WILDCAT
Elkhorn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
19-2N-7E

12. COUNTY OR PARISH
Summit

13. STATE
Utah

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 (Location)

2. NAME OF OPERATOR
American Quasar Petroleum Co.

3. ADDRESS OF OPERATOR
204 Superior Bldg., Casper, Wyo. 82601

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface 660' FWL & 660' FSL (SW $\frac{1}{4}$ SW $\frac{1}{4}$)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6640' GR (est.)

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

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

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar
(This space for Federal or State office use)

TITLE Division Dirg. Supt.

DATE 8/4/78

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. LEASE DESIGNATION AND SERIAL NO.
Champlin UPRR fee pooled

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
UPRR

9. WELL NO.
19-3

10. FIELD AND POOL, OR WILDCAT
Elkhorn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
19-2N-7E

1. OIL WELL GAS WELL OTHER (Location)

2. NAME OF OPERATOR
American Quasar Petroleum Co.

3. ADDRESS OF OPERATOR
204 Superior Bldg., Casper, Wyo. 82601

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FWL & 660' FSL (SW $\frac{1}{4}$ SW $\frac{1}{4}$)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6640' GR (est.)

12. COUNTY OR PARISH
Summit

13. STATE
Utah

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

NOTICE OF INTENTION TO:

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

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

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

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(Other) Monthly Report of Operations
(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.)*

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar

TITLE Division Dirg. Supt.

DATE 9/1/78

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:



SCOTT M. MATHESON
Governor

GORDON E. HARMSTON
Executive Director,
NATURAL RESOURCES

CLEON B. FEIGHT
Director

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

May 7, 1979

OIL, GAS, AND MINING BOARD

CHARLES R. HENDERSON
Chairman

JOHN L. BELL
C. RAY JUVELIN
THADIS W. BOX
CONSTANCE K. LUNDBERG
EDWARD T. BECK
E. STEELE McINTYRE

American Quasar Petroleum Company
204 Superior Bldg.
Casper, Wyoming 82601

Re: PLEASE SEE ATTACHED SHEET FOR LIST
OF WELLS AND MONTHS DUE-

Gentlemen:

Our records indicate that you have not filed a Monthly Report of Operations for the months indicated above on the subject well(s).

Rule C-22, General Rules and Regulations and Rules of Practice and Procedure, requires that said reports be filed on or before the sixteenth (16) day of the succeeding month. This report may be filed on Form OGC-1b, (U.S. Geological Survey Form 9-331) "Sundry Notices and Reports on Wells", or on company forms containing substantially the same information. We are enclosing forms for your convenience.

Your prompt attention to the above will be greatly appreciated.

Very truly yours,

DIVISION OF OIL, GAS, AND MINING

KATHY AVILA
RECORDS CLERK

Attachment, Monthly Reports due:

- 1) Well No. Hogback Ridge 16-1
Sec. 16, T. 13N, R. 7E,
Rich County, Utah
October 1978 thru' March 1979
- 2) Well No. Bingham 2-5
Sec. 2, T. 2N, R. 7E
Summit County, Utah
December 1978 thru' March 1979
- 3) Well No. Pineview 3-7S
Sec. 3, T. 2N, R. 7E,
Summit County, Utah
February 1979 thru' March 1979
- 4) Well No. Clark 4-2
Sec. 4, T. 2N, R. 7E,
Summit County, Utah
October 1978 thru' March 1979
- 5) Well No. UPRR 11-1
Sec. 11, T. 2N, R. 7E,
Summit County, Utah
WELL COMPLETION DUE
- 6) Well No. UPRR 17-1
Sec. 17, T. 2N, R. 7E
Summit County, Utah
October 1978 thru' March 1979
- 7) Well No. UPRR 19-3
Sec. 19, T. 2N, R. 7E,
Summit County, Utah
October 1978 thru' March 1979
- 8) Well No. Judd 34-2
Sec. 34, T. 2N, R. 6E
Summit County, Utah
February 1979 thru' March 1979

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER (Location)</p> <p>2. NAME OF OPERATOR American Quasar Petroleum Co.</p> <p>3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyo. 82601</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FWL & 660' FSL (SW$\frac{1}{4}$ SW$\frac{1}{4}$)</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. Champlin UPRR fee pooled</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME UPRR</p> <p>9. WELL NO. 19-3</p> <p>10. FIELD AND POOL, OR WILDCAT Elkhorn</p> <p>11. SEC., T., R., M., OR BLK. AND SUBVY OR ABBA 19-2N-7E</p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640' GR (est.)</p>	<p>12. COUNTY OR PARISH Summit</p> <p>13. STATE Utah</p>

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

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 5/16/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u></p> <p>2. NAME OF OPERATOR <u>American Quasar Petroleum Co.</u></p> <p>3. ADDRESS OF OPERATOR <u>204 Superior Bldg., Casper, Wyo. 82601</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>SW¹/₄ SW¹/₄</u></p>		<p>5. LEASE DESIGNATION AND SERIAL NO. <u>Champlin UPRR fee pooled</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <u>UPRR</u></p> <p>9. WELL NO. <u>19-3</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>19-2N-7E</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>6640' GR (est.)</u></p>	<p>12. COUNTY OR PARISH <u>Summit</u></p> <p>18. STATE <u>Utah</u></p>

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

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

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 5/31/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.
Champlin UPRR fee pooled

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

UPRR

9. WELL NO.

19-3

10. FIELD AND POOL, OR WILDCAT

Elkhorn

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

19-2N-7E

12. COUNTY OR PARISH

Summit

18. STATE

Utah

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 Location _____

2. NAME OF OPERATOR
American Quasar Petroleum Co.

3. ADDRESS OF OPERATOR
204 Superior Bldg., Casper, Wyoming 82601

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

SW $\frac{1}{4}$ SW $\frac{1}{4}$

14. PERMIT NO.

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

6640' GR (est.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

FULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Monthly Report of Operations

(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.)*

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.



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

SIGNED

John F. Sindelar
John F. Sindelar
(This space for Federal or State office use)

TITLE

Division Dirg. Supt.

DATE

7/10/79

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u>		5. LEASE DESIGNATION AND SERIAL NO. Fee (pooled)
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyo. 82601		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 SW $\frac{1}{4}$ SW $\frac{1}{4}$		8. FARM OR LEASE NAME UPRR
14. PERMIT NO.		9. WELL NO. 19-3
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640' GR (est.)		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-2N-7E
		12. COUNTY OR PARISH Summit
		13. STATE 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) <input checked="" type="checkbox"/> Monthly Report of Operations	
(Other) <input type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

18. I hereby certify that the foregoing is true and correct
SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 8/10/79
(This space for Federal or State office use)

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

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

SUBMIT ~~3~~ TRIPPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)		5. LEASE DESIGNATION AND SERIAL NO. Fee (pooled)
1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Location _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR American Quasar Petroleum Co.		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyo. 82601		8. FARM OR LEASE NAME UPRR
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SW $\frac{1}{4}$ SW $\frac{1}{4}$		9. WELL NO. 19-3
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Elkhorn
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640' GR (est.)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-2N-7E
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		12. COUNTY OR PARISH Summit
18. STATE 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) <u>Monthly Report of Operations</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 9/6/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

JMA

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u>		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyoming 82601		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 SW $\frac{1}{4}$ SW $\frac{1}{4}$		8. FARM OR LEASE NAME UPRR
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6640' GR (est.)	9. WELL NO. 19-3
		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-2N-7E
		12. COUNTY OR PARISH Summit
		13. STATE 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) <u>Monthly Report of Operations</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED *John F. Sindelar* TITLE Division Dirg. Supt. DATE 10/3/79
John F. Sindelar
 (This space for Federal or State office use)

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

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

SUBMIT IN TRIPPLICATE
(Other instructions on
reverse side)

Handwritten initials: JH

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

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u></p> <p>2. NAME OF OPERATOR <u>American Quasar Petroleum Co.</u></p> <p>3. ADDRESS OF OPERATOR <u>204 Superior Bldg., Casper, Wyoming 82601</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>SW¼ SW¼</u></p>	<p>5. LEASE DESIGNATION AND SERIAL NO. <u>Fee (Pooled)</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <u>UPRR</u></p> <p>9. WELL NO. <u>19-3</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>19-2N-7E</u></p> <p>12. COUNTY OR PARISH <u>Summit</u></p> <p>13. STATE <u>Utah</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, CR, etc.) <u>6640' GR (est.)</u></p>

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

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

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

Approval to drill granted April 4, 1978. ?

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 11/15/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

JH

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"/> Location _____		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)	
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyoming 82601		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 SW¼ SW¼		8. FARM OR LEASE NAME UPRR	
14. PERMIT NO.		9. WELL NO. 19-3	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640' GR (est.)		10. FIELD AND POOL, OR WILDCAT Elkhorn	
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 19-2N-7E	
		12. COUNTY OR PARISH Summit	13. STATE 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) <u>Monthly Report of Operations</u> <input checked="" type="checkbox"/>	

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 12/5/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u></p> <p>2. NAME OF OPERATOR <u>American Quasar Petroleum Co.</u></p> <p>3. ADDRESS OF OPERATOR <u>204 Superior Bldg., Casper, Wyoming 82601</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>SW¼ SW¼</u></p>		<p>5. LEASE DESIGNATION AND SERIAL NO. <u>Fee (Pooled)</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <u>UPRR</u></p> <p>9. WELL NO. <u>19-3</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>19-2N-7E</u></p> <p>12. COUNTY OR PARISH 13. STATE <u>Summit</u> <u>Utah</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DY, RT, CR, etc.) <u>6640' GR (est.)</u></p>	

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

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

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

RECEIVED
JAN 14 1980
DIVISION OF
OIL, GAS & MINING

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

SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 1/11/80
John F. Sindelar

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUBMIT IN TRIPPLICATE
 (Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> <u>Location</u>		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)																										
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																										
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyoming 82601		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 SW¼ SW¼		8. FARM OR LEASE NAME UPRR																										
14. PERMIT NO.		9. WELL NO. 19-3																										
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 6640' GR (est.)		10. FIELD AND POOL, OR WILDCAT Elkhorn																										
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 19-2N-7E																										
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Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED

John F. Sindelar
 John F. Sindelar

TITLE Division Dirg. Supt.

DATE 2/1/80

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS <small>(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</small>		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)
1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Location _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR American Quasar Petroleum Co.		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyoming 82601		8. FARM OR LEASE NAME UPRR
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SW¼ SW¼		9. WELL NO. 19-3
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Elkhorn
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 6640' GR (est.)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-2N-7E
12. COUNTY OR PARISH		13. STATE
Summit		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"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> (Other)	PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> ABANDON* <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREATMENT <input type="checkbox"/> SHOOTING OR ACIDIZING <input type="checkbox"/> (Other) <u>Monthly Report of Operations</u> <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> ABANDONMENT* <input type="checkbox"/>

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 2/29/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u>		5. LEASE DESIGNATION AND SERIAL NO. <u>Fee (Pooled)</u>
2. NAME OF OPERATOR <u>American Quasar Petroleum Co.</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>204 Superior Bldg., Casper, Wyoming 82601</u>		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <u>At surface</u> <u>SW¼ SW¼</u>		8. FARM OR LEASE NAME <u>UPRR</u>
14. PERMIT NO.		9. WELL NO. <u>19-3</u>
15. ELEVATIONS (Show whether DF, RT, CR, etc.) <u>6640' GR (est.)</u>		10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u>
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA <u>19-2N-7E</u>
		12. COUNTY OR PARISH 13. STATE <u>Summit</u> <u>Utah</u>

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) <u>Monthly Report of Operations</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 4/8/80
(This space for Federal or State office use)

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

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

SUBMIT IN TRIPLICATE*
(On instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Location <u> </u>		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyoming 82601		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 SW $\frac{1}{4}$ SW $\frac{1}{4}$		8. FARM OR LEASE NAME UPRR
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6640' GR (est.)	9. WELL NO. 19-3
		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 19-2N-7E
		12. COUNTY OR PARISH Summit
		13. STATE 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) Monthly Report of Operations <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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Approval to drill granted April 4, 1978.
No operations have been commenced as of this date.

RECEIVED
MAY 12 1980

DIVISION OF
OIL, GAS & MINING

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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 5/8/80
(This space for Federal or State office use)

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

*See Instructions on Reverse Side

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u></p> <p>2. NAME OF OPERATOR <u>American Quasar Petroleum Co.</u></p> <p>3. ADDRESS OF OPERATOR <u>204 Superior Bldg., Casper, Wyoming 82601</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <u>At surface</u> <u>SW¼ SW¼</u></p>		<p>5. LEASE DESIGNATION AND SERIAL NO. <u>Fee (Pooled)</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <u>UPRR</u></p> <p>9. WELL NO. <u>19-3</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u></p> <p>11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA <u>19-2N-7E</u></p> <p>12. COUNTY OR PARISH <u>Summit</u></p> <p>13. STATE <u>Utah</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>6640' GR (est.)</u></p>	

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

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

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

RECEIVED

JUN 9 1980

DIVISION OF
OIL, GAS & MINING

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

SIGNED John F. Sindelar TITLE Division Drig. Supt. DATE 6/5/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u></p> <p>2. NAME OF OPERATOR <u>American Quasar Petroleum Co.</u></p> <p>3. ADDRESS OF OPERATOR <u>204 Superior Bldg., Casper, Wyoming 82601</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>SW¼ SW¼</u></p>		<p>5. LEASE DESIGNATION AND SERIAL NO. <u>Fee (Pooled)</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <u>UPRR</u></p> <p>9. WELL NO. <u>19-3</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u></p> <p>11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA <u>19-2N-7E</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, OR, etc.) <u>6640' GR (est.)</u></p>	<p>12. COUNTY OR PARISH 13. STATE <u>Summit Utah</u></p>

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

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

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 7/2/80
(This space for Federal or State office use)

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

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

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"/> Location <u> </u>		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyoming 82601		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 SW $\frac{1}{4}$ SW $\frac{1}{4}$		8. FARM OR LEASE NAME UPRR
14. PERMIT NO.		9. WELL NO. 19-3
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6640' GR (est.)		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLK. AND SUBVY OR AREA 19-2N-7E
		12. COUNTY OR PARISH Summit
		13. STATE 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) Monthly Report of Operations <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 8/5/80
John F. Sindelar
 (This space for Federal or State office use)

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

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

5. LEASE DESIGNATION AND SERIAL NO.
Fee (Pooled)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
UPRR

9. WELL NO.
19-3

10. FIELD AND POOL, OR WILDCAT
Elkhorn

11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA
19-2N-7E

12. COUNTY OR PARISH
Summit

13. STATE
Utah

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 Location _____

2. NAME OF OPERATOR
American Quasar Petroleum Co.

3. ADDRESS OF OPERATOR
204 Superior Bldg., Casper, Wyoming 82601

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
SW $\frac{1}{4}$ SW $\frac{1}{4}$

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)
6640' GR (est.)

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

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

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

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

Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 9/4/80
John F. Sindelar
 (This space for Federal or State office use)

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

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

5. LEASE DESIGNATION AND SERIAL NO.
Fee (Pooled)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
UPRR

9. WELL NO.
19-3

10. FIELD AND POOL, OR WILDCAT
Elkhorn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
19-2N-7E

12. COUNTY OR PARISH
Summit

13. STATE
Utah

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 Location _____

2. NAME OF OPERATOR
American Quasar Petroleum Co.

3. ADDRESS OF OPERATOR
204 Superior Bldg., Casper, Wyoming 82601

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
SW $\frac{1}{4}$ SW $\frac{1}{4}$

14. PERMIT NO. _____

15. ELEVATIONS (Show whether DF, RT, CR, etc.)
6640' GR (est.)

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) Monthly Report of Operations <input checked="" type="checkbox"/>	

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

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Approval to drill granted April 4, 1978.

No operations have been commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 9/30/80
John F. Sindelar

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Location		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., 201 N. Wolcott, Casper, WY 82601		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 SW $\frac{1}{4}$ SW $\frac{1}{4}$		8. FARM OR LEASE NAME UPRR
14. PERMIT NO.		9. WELL NO. 19-3
15. ELEVATIONS (Show whether DF, WT, GR, etc.) 6640' GR (est).		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-2N-7E
		12. COUNTY OR PARISH Summit
		13. STATE 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) <u>Monthly Report of Operations</u> <input checked="" type="checkbox"/>	

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

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Approval to drill granted April 4, 1978.

No operations have commenced as of this date.

RECEIVED

DEC 04 1980

DIVISION OF
OIL, GAS & MINING

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

SIGNED John E. Senejar TITLE Division Drlg. Supt. DATE 11/30/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Location</p> <p>2. NAME OF OPERATOR American Quasar Petroleum Co.</p> <p>3. ADDRESS OF OPERATOR 204 Superior Bldg., 201 N. Wolcott, Casper, Wy 82601</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SW$\frac{1}{4}$ SW$\frac{1}{4}$</p> <p>14. PERMIT NO.</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME UPRR</p> <p>9. WELL NO. 19-3</p> <p>10. FIELD AND POOL, OR WILDCAT Elkhorn</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-2N-7E</p> <p>12. COUNTY OR PARISH Summit</p> <p>13. STATE Utah</p>
<p>15. ELEVATIONS (Show whether DF, ST, GR, etc.) 6640' GR (est).</p>		

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

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

Approval to drill granted April 4, 1978.
No operations have commenced as of this date.

RECEIVED

JAN 14 1981

DIVISION OF
OIL, GAS & MINING

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

SIGNED John F. Sindelar TITLE Division Drilling Supt. DATE 12/31/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

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 Location		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)	
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 204 Superior Bldg, 201 N. Wolcott, Casper, WY 82601		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 SW $\frac{1}{4}$ SW $\frac{1}{4}$		8. FARM OR LEASE NAME UPRR	
14. PERMIT NO.		9. WELL NO. 19-3	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640' GR (est)		10. FIELD AND POOL, OR WILDCAT Elkhorn	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-2N-7E	
		12. COUNTY OR PARISH Summit	13. STATE 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"/>	FULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Monthly Report of Operations <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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No operations have commenced as of this date.

RECEIVED
FEB 9 1981

DIVISION OF
OIL, GAS & MINING

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SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 1/31/81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

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		12. COUNTY OR PARISH Summit
		13. STATE Utah

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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"/>
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Approval to drill granted April 4, 1978.
No operations have commenced as of this date.

DIVISION OF OIL, GAS & MINING

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

SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 2/28/81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Location _____</p> <p>2. NAME OF OPERATOR American Quasar Petroleum Co.</p> <p>3. ADDRESS OF OPERATOR 204 Superior Bldg, 201 N. Wolcott, Casper, Wy 82601</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SW$\frac{1}{4}$SW$\frac{1}{4}$</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME UPRR</p> <p>9. WELL NO. 19-3</p> <p>10. FIELD AND POOL, OR WILDCAT Elkhorn</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-2N-7E</p> <p>12. COUNTY OR PARISH 13. STATE Summit Utah</p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, NT, GR, etc.) 6640' GR (est)</p>	

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FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
EROSION OR ACIDIZING <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) <u>Monthly Report of Operations</u> <input checked="" type="checkbox"/>	
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Approval to drill granted April 4, 1978.
No operations have commenced as of this date.

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

SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 3/31/81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:



AMERICAN QUASAR PETROLEUM CO.
Of New Mexico

204 SUPERIOR BUILDING, 201 NORTH WOLCOTT, CASPER, WYOMING 82601 USA
Telephone (307) 265-3362

April 3, 1981

State of Utah
Department of Natural Resources
Division of Oil, Gas, and Mining
1588 West North Temple
Salt Lake City, Utah 84116

Re: Cancellation of Permits to Drill

Gentlemen:

American Quasar would like to request that the approved Permits to Drill for the following wells be cancelled:

Hogback Ridge 16-1
Sec. 16, T13N-R7E
Rich County, Utah

UPRR 35-33
Sec. 35, T3N-R7E
Summit County, Utah

UPRR 17-1
Elkhorn Field
Sec. 17, T2N-R7E
Summit County, Utah

UPRR 19-3
Elkhorn Field
Sec. 19, T2N-R7E
Summit County, Utah

Clark 4-2
Pineview Field
Sec. 4, T2N-R7E
Summit County, Utah

These wells have not been drilled for various reasons, and we have no current plans to drill them. Should our plans change, new applications for Permits to Drill will be submitted.

Sincerely,

John F. Works
Division Drilling Engineer

JFW/aa

APR 8 1981

OIL, GAS & MINING