

UTAH DIVISION OF OIL, GAS AND MINING



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

DATE FILED 7-17-78

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

DRILLING APPROVED: 7-13-78

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 Undesignated

UNIT: _____

COUNTY: Summit

WELL NO. UPRR 1761

API NO: 43-043-30079

LOCATION 699' FT. FROM XX (S) LINE. 659' FT. FROM XX (W) LINE. SW SW 1/4-1/4 SEC. 17

TWP.	RGE.	SEC.	OPERATOR	TWP.	RGE.	SEC.	OPERATOR
<u>2N</u>	<u>7E</u>	<u>17</u>	<u>AMERICAN QUASAR PETROLEUM</u>				

FILE NOTATIONS

Entered in NID File	.....	Checked by Chief	.....
Location Map Pinned	.....	Approval Letter	.....
Card Indexed	.....	Disapproval Letter	.....

COMPLETION DATA:

Date Well Completed	.....	Location Inspected	.....
OW..... WW..... TA.....		Bond released	
GW..... OS..... PA.....		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..... CLog..... Others.....

3-5-98
Jek

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

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

13

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work: DRILL [X], DEEPEN [], PLUG BACK []
b. Type of Well: Oil Well [X], Gas Well [], Other []
2. Name of Operator: American Quasar Petroleum Co.
3. Address of Operator: 204 Superior Bldg., 201 N. Wolcott, Casper, Wyo. 82601
4. Location of Well: At surface: 659' FWL & 699' FSL
At proposed prod. zone: Same
14. Distance in miles and direction from nearest town or post office*: Approx. 14 miles east of Coalville, Utah
15. Distance from proposed* location to nearest property or lease line, ft. (Also to nearest drig. line, if any): 659'
16. No. of acres in lease: N/A (Pooled)
17. No. of acres assigned to this well: 80.00
18. Distance from proposed location* to nearest well, drilling, completed, or applied for, on this lease, ft.: None
19. Proposed depth: 10,600'
20. Rotary or cable tools: Rotary
21. Elevations (Show whether DF, RT, GR, etc.): 6961' GR
22. Approx. date work will start*: 11/15/78

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.: 17-1
10. Field and Pool, or Wildcat: Elkhorn
11. Sec., T., R., M., or Blk. and Survey or Area: 17-2N-7E
12. County: ~~XXXXX~~ Summit
13. State: Utah

23. PROPOSED CASING AND CEMENTING PROGRAM
Table with 5 columns: Size of Hole, Size of Casing, Weight per Foot, Setting Depth, Quantity of Cement.
Rows: 17-1/2" hole, 13-3/8" casing, 48# weight, 60' depth, 60 sx cement; 12-1/4" hole, 9-5/8" casing, 36# weight, 2,000' depth, 1000 sx cement; 8-3/4" hole, 7" casing, 23,26,29# weight, 10,600' depth, 1000 sx cement.



Proposed operations:

Drill 12 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.

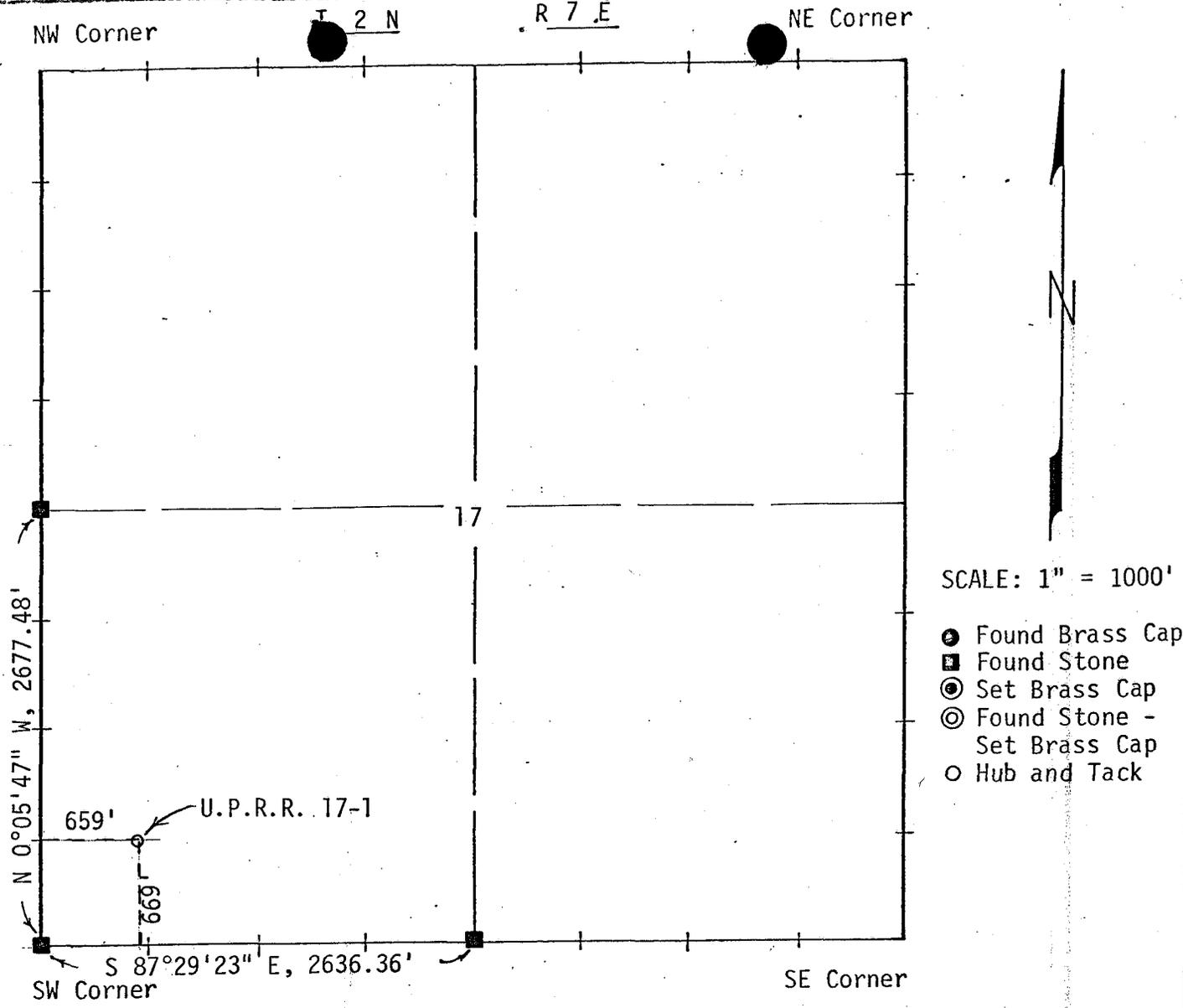
IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. Signed: [Signature] Title: Division Drlg. Engr. Date: 7/10/78
(This space for Federal or State office use)

Permit No.: 43-043-30079 Approval Date:

Approved by: Title: Date:

No other wells in Sec 17



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 Casper, Wyoming for American Quasar Petroleum Company made a survey on the 26th day of June, 19 78 for Location and Elevation of the U.P.R.R. 17-1 as shown on the above map, the wellsite is in the SW₄SW₄ of Section 17, Township 2 N, Range 7 E of the Salt Lake Base & Meridian, Summit County, State of Utah, Elevation is 6961 Feet top of hub Datum U.S.G.S. Quadrangle - Upton, UT
 Spot Elevation 7181 SW₄NE₄ Sec. 19, T 2 N, R 7 E

Reference point	150' North	5/8" rebar	Elev. top of bar	6933.6'
Reference point	350' North	"	"	6908.5'
Reference point	450' North	"	"	6898.0'
Reference point				

John A. Proffit 6/28/78
 JOHN A. PROFFIT UTAH R.L.S. NO. 2860

DATE: 6-27-78
 JOB NO.: 78-14-13

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

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

** FILE NOTATIONS **

Date: July 13
Operator: American Gasar
Well No: UPRR 17-1
Location: Sec. 17 T. 2N R. 7E County: Summit

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

API NUMBER: 43-043-30079

CHECKED BY:

Administrative Assistant [Signature]
Remarks: No other wells - Sec. 17
Petroleum Engineer [Signature]
Remarks: [Signature]
Director [Signature]
Remarks:

INCLUDE WITHIN APPROVAL LETTER:

Bond Required: Survey Plat Required:
Order No. 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

July 13, 1978

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

Re: Well No. UPRR 17-1
Sec. 17, 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 Rule C-3, General Rules and Regulations.

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 43-043-30079.

Very truly yours,

DIVISION OF OIL, GAS, AND MINING

CLEON B. FEIGHT
Director

July 19, 1978

MEMO TO FILE:

Re: American Quasar Petroleum Company
Well No. 17-1
Sec. 17, T. 2N, R. 7E
Summit County, Utah

The above referred to well has been temporarily plugged. The pertinent information is as follows:

Total Depth 10,732 Thains
Plugged Back to 9,700'; 7" casing set with 200 sacks of cement plug with
the top at 9,700' and the bottom at 10,003,
100 sacks of cement set at 6,000' to 6,200' half in and half out of the
casing,
Set easy drill bridge plug at 6,400',
85 degree dip,
3,500' Nugget,

CLEON B. FEIGHT
DIRECTOR
DIVISION OF OIL, GAS, AND MINING

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

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

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., 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 659' FWL & 699' FSL (SW $\frac{1}{4}$ SW $\frac{1}{4}$)		8. FARM OR LEASE NAME UPRR
14. PERMIT NO.		9. WELL NO. 17-1
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6961' GR		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 17-2N-7E
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*		12. COUNTY OR PARISH 18. STATE Summit Utah

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> (Other) <input type="checkbox"/>	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) <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> ABANDONMENT* <input type="checkbox"/> (Other) <input checked="" type="checkbox"/>

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

Approval to drill granted July 13, 1978.

No operations have been commenced as of this date.

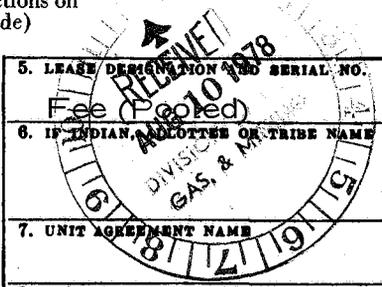
18. I hereby certify that the foregoing is true and correct

SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 8/4/78
 (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

SUBMIT 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 (Location)		5. LEASE DESIGNATION AND SERIAL NO. Free (Proposed)
2. NAME OF OPERATOR American Quasar Petroleum Co.		6. IF INDIAN, ALCOTTE 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 659' FWL & 699' FSL (SW $\frac{1}{4}$ SW $\frac{1}{4}$)		8. FARM OR LEASE NAME UPRR
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6961' GR	9. WELL NO. 17-1
		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 17-2N-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 July 13, 1978.

No operations have been commenced as of this date.

P

18. I hereby certify that the foregoing is true and correct
SIGNED John F. Sindelar TITLE Division Drlg. Supt. DATE 8/4/78
(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

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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., Casper, Wyo. 82601		7. UNIT AGREEMENT NAME
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		12. COUNTY OR PARISH Summit
		13. STATE Utah

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TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
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 <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 July 13, 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.)

1. <input type="checkbox"/> 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 659' FWL & 699' FSL (SW¼ SW¼)		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. 17-1 10. FIELD AND POOL, OR WILDCAT Elkhorn 11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA 17-2N-7E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6961' GR	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 type="checkbox"/>	(Other) <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 July 13, 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 5/16/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. <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>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>17-1</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>17-2N-7E</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>6961' GR</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) <input checked="" type="checkbox"/> Monthly Report of Operations	

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

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Approval to drill granted July 13, 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 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)

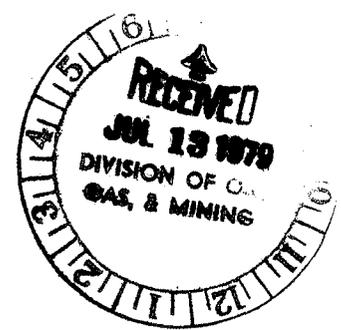
<p>SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)</p>
<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Location</u></p>		<p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p>
<p>2. NAME OF OPERATOR American Quasar Petroleum Co.</p>		<p>7. UNIT AGREEMENT NAME</p>
<p>3. ADDRESS OF OPERATOR 204 Superior Bldg., Casper, Wyoming 82601</p>		<p>8. FARM OR LEASE NAME UPRR</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>9. WELL NO. 17-1</p>
<p>14. PERMIT NO.</p>		<p>10. FIELD AND POOL, OR WILDCAT Elkhorn</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6961' GR</p>		<p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 17-2N-7E</p>
<p>16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data</p>		<p>12. COUNTY OR PARISH 18. STATE Summit 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 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 July 13, 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 7/10/79
(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

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 _____

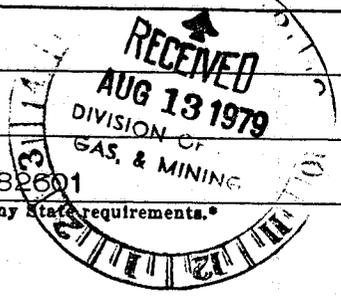
2. NAME OF OPERATOR
American Quasar Petroleum Co.

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, OR, etc.)
6961' GR



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.
17-1

10. FIELD AND POOL, OR WILDCAT
Elkhorn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
17-2N-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 July 13, 1978.

No operations 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 8/10/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

7

August 29, 1979

MEMORANDUM

TO: File

FROM: Frank M. Hamner *FMS*
Chief Petroleum Engineer
Division of Oil, Gas
and Mining

Re: American Quasar Petroleum
Well No. UPRR #17-1
Sec. 17, T. 2N, R. 7E.,
Summit County, Utah

This well has not been drilled and the location looks abandoned.
The rat hole is not filled and the pad is eroding.

cc

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

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

JMS

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, GR, etc.) 6961' GR	9. WELL NO. 17-1
		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 17-2N-7E
		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"/>	

(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 July 13, 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
(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, ALLOTTED 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>17-1</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u></p> <p>11. SEC., T., R., M., OR BLE. AND SURVEY OR ABNA <u>17-2N-7E</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, OR, etc.) <u>6961' GR</u></p>	<p>12. COUNTY OR PARISH 18. STATE <u>Summit</u> <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 July 13, 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

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.		9. WELL NO. 17-1
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6961' GR		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 BLK. AND SURVEY OR AREA 17-2N-7E
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> (Other) <input type="checkbox"/>		SUBSEQUENT REPORT OF: WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREATMENT <input type="checkbox"/> SHOOTING OR ACIDIZING <input type="checkbox"/> (Other) <input checked="" type="checkbox"/> 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.)*		12. COUNTY OR PARISH 13. STATE Summit Utah

Approval to drill granted July 13, 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 Dirlg. 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.)

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	
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14. PERMIT NO.		9. WELL NO. 17-1	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6961' GR		10. FIELD AND POOL, OR WILDCAT Elkhorn	
		11. SEC., T., R., M., OR BLK. AND SUBVY OR AREA 17-2N-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"/>	

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Approval to drill granted July 13, 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

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>17-1</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u></p> <p>11. SEC., T., R., M., OR BLE. AND SUBVT OR ARBA <u>17-2N-7E</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, ST, GR, etc.) <u>6961' GR</u></p>	<p>12. COUNTY OR PARISH <u>Summit</u></p> <p>13. 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.)

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Approval to drill granted July 13, 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 2/1/80

(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.)

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. 17-1
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6961' GR		10. FIELD AND POOL, OR WILDCAT Elkhorn
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		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"/>
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No operations have been commenced as of this date.

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

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Summit

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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
SW¼ SW¼

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
6961' GR

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TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
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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SIGNED John F. Sindelar TITLE Division Dirg. Supt. DATE 4/8/80
(This space for Federal or State office use)

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

SUNDRY NOTICES AND REPORTS ON WELLS

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<p>1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> <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>17-1</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Elkhorn</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR ABDA <u>17-2N-7E</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, OR, etc.) <u>6961' GR</u></p>	<p>12. COUNTY OR PARISH <u>Summit</u></p> <p>13. 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"/>	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 July 13, 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 Drlg. Supt. DATE 5/8/80

(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
(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 <u>Location</u>		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 SW $\frac{1}{4}$ SW $\frac{1}{4}$		9. WELL NO. 17-1
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Elkhorn
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6961' GR		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 17-2N-7E
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		12. COUNTY OR PARISH 18. 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"/>	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 July 13, 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 Drlg. Supt. DATE 6/5/80

(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 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 DV, RT, OR, etc.)
6961' GR

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.
17-1

10. FIELD AND POOL, OR WILDCAT
Elkhorn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
17-2N-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"/>	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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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

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. 17-1	
10. FIELD AND POOL, OR WILDCAT Elkhorn	
11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 17-2N-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 DP, RT, GR, etc.)
6961' GR

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

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

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

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. 17-1
10. FIELD AND POOL, OR WILDCAT Elkhorn
11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA 17-2N-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
SW¼ SW¼

14. PERMIT NO. _____

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
6961' GR

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

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

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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:

*See Instructions on Reverse Side

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.
17-1

10. FIELD AND POOL, OR WILDCAT
Elkhorn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
17-2N-7E

12. COUNTY OR PARISH | 13. STATE
Summit | 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
SW¼ SW¼

14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.)
6961' GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) 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 July 13, 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 9/30/80
(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

STANDARD TRIPPLICATE*
(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		7. UNIT AGREEMENT NAME _____
3. ADDRESS OF OPERATOR 204 Superior Bldg., 201 N. Wolcott, Casper, WY 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. 17-1
14. PERMIT NO. _____		10. FIELD AND POOL, OR WILDCAT Elkhorn
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6961' GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 17-2N-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:																		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">TEST WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">PULL OR ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> </tr> <tr> <td colspan="2">(Other) _____</td> </tr> </table>	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) _____		<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT* <input checked="" type="checkbox"/></td> </tr> <tr> <td colspan="2">(Other) <u>Monthly Report of Operations</u></td> </tr> </table> <p style="font-size: small; text-align: center;">(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</p>	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 checked="" type="checkbox"/>	(Other) <u>Monthly Report of Operations</u>	
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) _____																			
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 checked="" type="checkbox"/>																		
(Other) <u>Monthly Report of Operations</u>																			

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 July 13, 1978.
No operations have commenced as of this date.

RECEIVED

NOV 3 1980

DIVISION OF
OIL, GAS & MINING

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

SIGNED <u>John F. Sindelar</u>	TITLE <u>Division Drlg. Supt.</u>	DATE <u>10/31/80</u>
--------------------------------	-----------------------------------	----------------------

(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. 17-1	
10. FIELD AND POOL, OR WILDCAT Elkhorn	
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA 17-2N-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

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.* 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.)
6961' GR

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

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

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.)*

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RECEIVED

DEC 04 1980

DIVISION OF OIL, GAS & MINING

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SIGNED John F. Sindelar 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

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 GAS WELL OTHER Location

2. NAME OF OPERATOR
American Quasar Petroleum

3. ADDRESS OF OPERATOR
204 Superior Bldg., 201 N. Wolcott, Casper, WY 82601

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
SW₂ SE₂

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, OR, etc.)
6961' GR

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.
17-1

10. FIELD AND POOL, OR WILDCAT
Elkhorn

11. SEC., T., S., M., OR BLE. AND SURVEY OR AREA
17-2N-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 COMPLETION <input type="checkbox"/>		FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>	
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>		SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>	
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>		(Other) <input type="checkbox"/>		

Monthly Report of Operations

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

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JAN 14 1981
DIVISION OF
OIL, GAS & MINING

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

SIGNED John E. 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:

*See Instructions on Reverse Side

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Location		5. LEASE DESIGNATION AND SERIAL NO. Fee (Pooled)
2. NAME OF OPERATOR American Quasar Petroleum		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 204 Superior Bldg., 201 No. 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.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6961' GR	9. WELL NO. 17-1
		10. FIELD AND POOL, OR WILDCAT Elkhorn
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17-2N-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 July 13, 1978

No operations have commenced as of this date.

FEB 9 1981

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

Approval to drill granted July 13, 1978
No operations have commenced as of this date.

MAR 09 1981
DIVISION OF OIL, GAS & MINING

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

SIGNED *J. F. Sindelar* TITLE Division Dir. 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</p> <p>3. ADDRESS OF OPERATOR 204 Superior Bldg., 201 No. 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$\frac{1}{2}$SW$\frac{1}{2}$</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. 17-1</p> <p>10. FIELD AND POOL, OR WILDCAT Elkhorn</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17-2N-7E</p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, ST, GR, etc.) 6961' GR</p>	<p>12. COUNTY OR PARISH 13. STATE Summit 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"/>	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.)*

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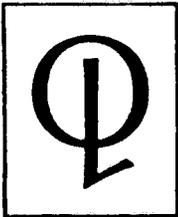
18. I hereby certify that the foregoing is true and correct

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