

UTAH OIL AND GAS CONSERVATION COMMISSION

REMARKS WELL LOG ELECTRIC LOGS FILE **X** WATER SANDS LOCATION INSPECTED SUB REPORT/abd

Will name change
 * Location Abandoned - Well never drilled - 9-14-82

DATE FILED **3-4-81**

LAND FEE & PATENTED **FEE** STATE LEASE NO

PUBLIC LEASE NO

INDIAN

DRILLING APPROVED: **3-12-81**

SPUDED IN

COMPLETED. PUT TO PRODUCING.

INITIAL PRODUCTION:

GRAVITY API

GOR

PRODUCING ZONES

TOTAL DEPTH:

WELL ELEVATION:

DATE ABANDONED: **LA 9-14-82**

FIELD: ~~Wildcat~~ **3/86 Anschutz Ranch East**

50166
API # 43-043-~~3070~~

COUNTY: **Summit**

WELL NO: ~~Howell~~ **"B" #1** ~~Thousand Peak Ranches~~ **"B" #1**

LOCATION **Surface: 1022** FT. FROM (N) **X** LINE. **1928** FT. FROM **X** (W) LINE. **NE NW** 1/4 - 1/4 SEC **6**

Bottom Hole: 500 FNL 2140 FEL NE NE

TWP	RGE	SEC	OPERATOR	TWP	RGE	SEC	OPERATOR
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3N	8E	6	AMOCO PRODUCTION CO,				
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STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(See instructions on
reverse side)

3

RECEIVED
MAR 12 1981
DIVISION OF
OIL, GAS, AND MINING

5. Lease Designation and Serial No.
Fee

6. If Indian, Allottee or Tribe Name

7. Unit Agreement Name

8. Farm or Lease Name
Howell Livestock "B"

9. Well No.
#1

10. Field and Pool, or Wildcat
Wildcat

11. Sec., T., R., M., or Blk.
and Survey or Area
Sec. 6, T3N-R8E

12. County or Parrish 13. State
Summit Utah

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
Amoco Production Company

3. Address of Operator
P.O. Box 17675, Salt Lake City, Utah 84117

4. Location of Well (Report location clearly and in accordance with any State requirements.)*
At surface **NW/4 NW/4, Section 6, 1022' FNL & 1928' FWL**
At proposed prod. zone **NE/4 NE/4, Section 6, 500' FNL & 2140' FEL**

14. Distance in miles and direction from nearest town or post office*
Approximately 21 miles south of Evanston, Wyoming

15. Distance from proposed* location to nearest property or lease line, ft. (Also to nearest drlg. line, if any) **1022'**

16. No. of acres in lease

17. No. of acres assigned to this well

18. Distance from proposed location* to nearest well, drilling, completed, or applied for, on this lease, ft. **14,350'**

19. Proposed depth **14,350'**

20. Rotary or cable tools **Rotary**

21. Elevations (Show whether DF, RT, GR, etc.) **7815' GR**

22. Approx. date work will start*
When approved

23. PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
17 1/2"	13 3/8"	61,68#	2000	Cmt. to surface
12 1/4"	9 5/8"	62.8,53.5,47,43.5,40#	11800'	Determined from logs
8 1/2"	7"	23,32,35#	14350'	Determined from logs

Amoco Production proposes to develop and test for hydrocarbons in the nugget reserves.

(Well will be drilled in accordance with Rule C-3, General Rules and Regulations. Surface location was selected to provide minimal disturbance to grazing lands, per the request of the surface owner.) (See attachments)

**APPROVED BY THE DIVISION
OF OIL, GAS, AND MINING**
DATE: 3-12-81
BY: [Signature]

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.

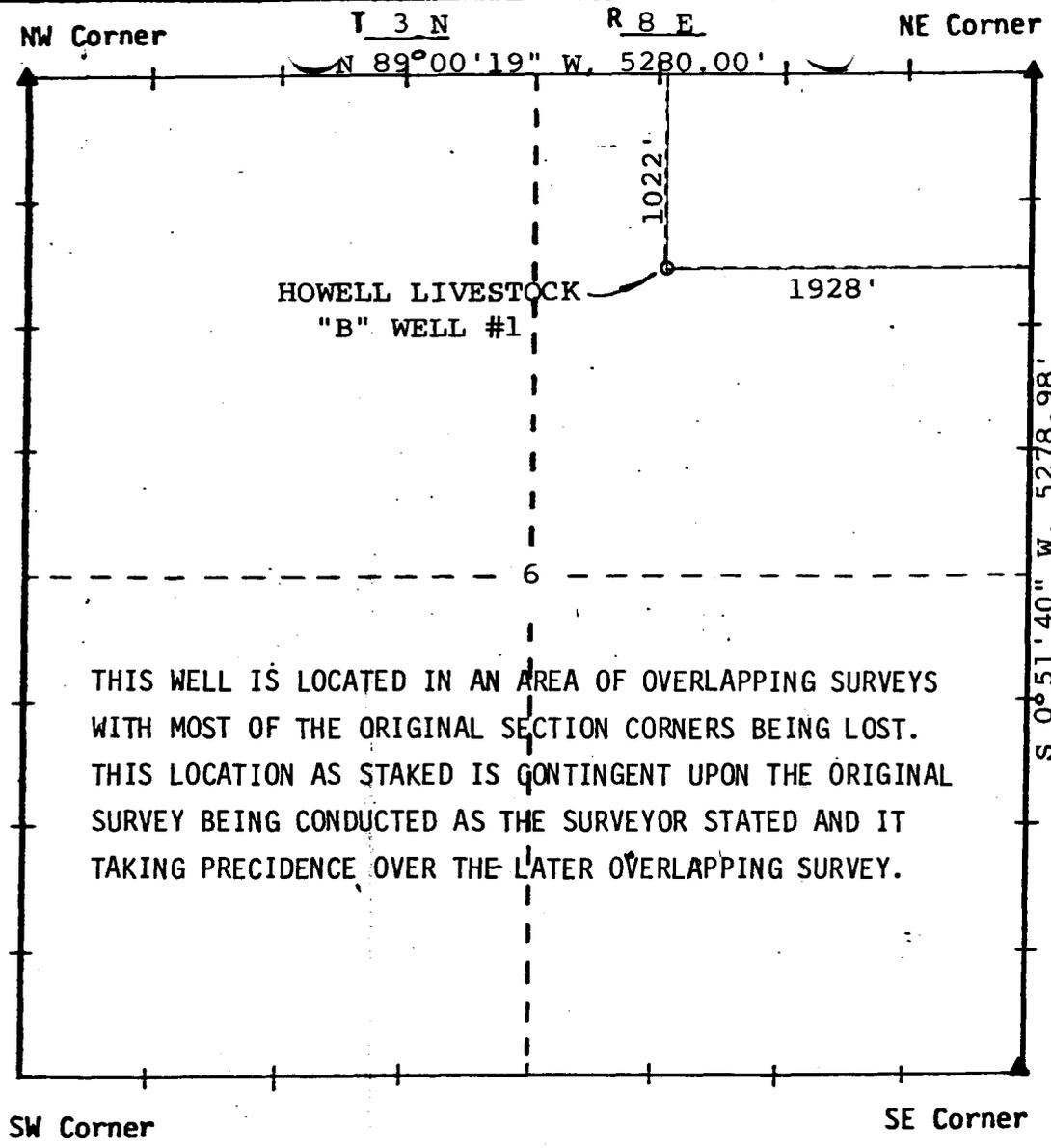
24. Signed: [Signature] Title: **Administrative Supervisor** Date: **3-2-81**

(This space for Federal or State office use)

Permit No. _____ Approval Date _____

Approved by _____ Title _____ Date _____

Conditions of approval, if any:



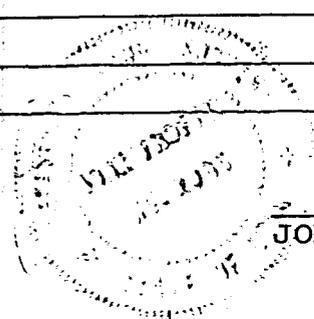
THIS WELL IS LOCATED IN AN AREA OF OVERLAPPING SURVEYS WITH MOST OF THE ORIGINAL SECTION CORNERS BEING LOST. THIS LOCATION AS STAKED IS GONTINGENT UPON THE ORIGINAL SURVEY BEING CONDUCTED AS THE SURVEYOR STATED AND IT TAKING PRECIDENCE OVER THE LATER OVERLAPPING SURVEY.

SCALE: 1" = 1000'

- Found Brass Cap
- Found Stone
- ⊙ Set Brass Cap
- ⊙ Found Stone - Set Brass Cap
- Hub and Tack
- ▲ Proportioned Corner

I, JOHN A. PROFFIT of Evanston, Wyoming certify that in accordance with a request from REED SMITH of EVANSTON, WYOMING for AMOCO PRODUCTION CO. I made a survey on the 12th day of FEBRUARY, 1981 for Location and Elevation of the HOWELL LIVESTOCK "B" WELL #1 as shown on the above map, the wellsite is in the NW¹/₄NW¹/₄ of Section 6, Township 3 N, Range 8 E of the Salt Lake Base & Meridian, Summit County, State of Utah. Elevation is 7815 Feet top of hub Datum U.S.G.S. Quadrangle Porcupine Ridge, UT/Wy BM #15 EAM 1965 Elev. 7122

Reference point _____
 Reference point _____
 Reference point _____
 Reference point _____



John A. Proffit 2/24/81
 JOHN A. PROFFIT UTAH R.L.S. NO. 2860

DATE: 2-13-81
 JOB NO.: 81-10-11

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

Attachment To Form OGC-1a

Howell Livestock 'B' #1

- 1) Geologic name of the surface formation: Tertiary
- 2) Estimated tops of geological markers:

<u>Marker</u>	<u>Depth</u>
Frontier	4150'
Garnett	7150'
Pruess	10,150'
Salt	11,150'
Twin Creek	11,650'
Nugget	13,150'
Ankareh	14,250'

- 3) Estimated depths anticipated to encounter water, oil, gas or other mineral bearing formations:

See item #2, above

- 4) Casing Program: See form OGC - 1a, item #23

- 5) Operators minimum specifications for pressure control equipment are explained on attached schematic diagram. Testing of such is to be performed daily and noted on the IADC Daily Drilling Report. After running surface casing and prior to drilling our, BOP and other pressure equipment will be tested to the full working pressure rating as shown on the attached diagram. Thereafter, the BOP will be checked daily for mechanical operations only and will be noted on the IADC Daily Drilling Report.

- 6) Mud Program

<u>App. Interval</u>	<u>Type Mud</u>	<u>Wt. #/Gal.</u>	<u>Viscosity</u>	<u>W.L. cc/30M</u>	<u>Other Spec's</u>
0-2000'	Native	8.5-8.7#	As required	NC	
2000-11800'	LSND	8.5-10.5#	40	20	mod. salt mud
11800-14350'	LSND	8.7-9.0#	32-38	20	

- 7) Auxilliary Equipment

Kelly cock: floor sub with a full opening valve.
3" choke manifold with remote control choke

- 8) Testing Program

DST (as appropriate)

Logging Program

<u>Type</u>	<u>Depth Interval</u>
DIL-GR	Surface to TD
DLL-MSFL	Surface to TD
CNL-FDC w/GR caliper	Surface to TD
FIL-Dipmeter	Surface to TD
BHC Sonic w/GR caliper	Surface to TD

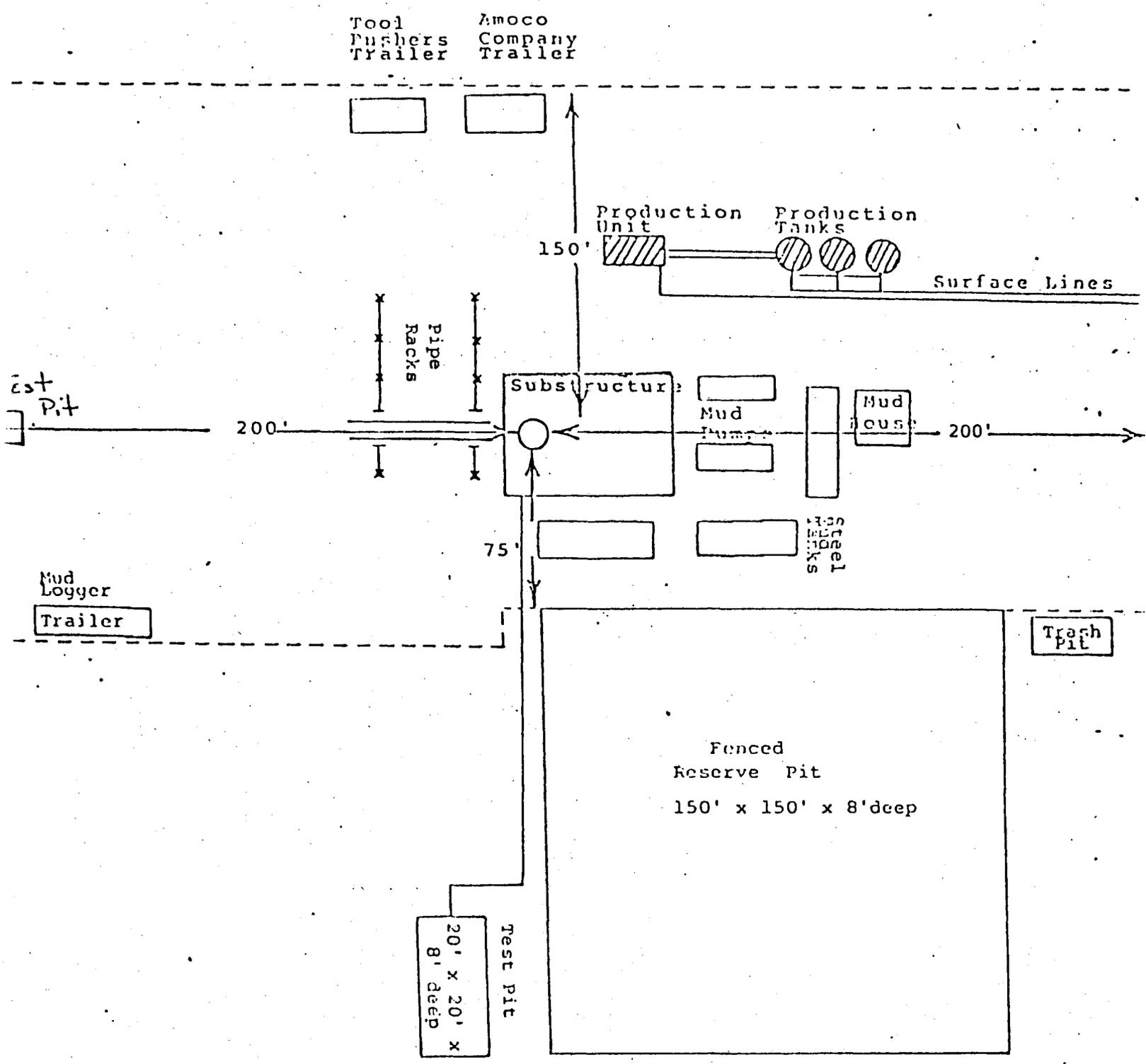
Coring Program

None

Stimulation Program

Perforate with 4 JSPF and acidize with 50-100 gallons 15% Hcl per foot of perforation.

- 9) No abnormal pressure, temperatures or hydrogen sulfide gas is anticipated.
- 10) Anticipated starting date will be when approved and the duration of of the operations will be approximately 180 days.



(Hatched circle) = Shows permanent production equipment to be installed after drilling rig has moved out.
 - - - = Dotted lines indicated perimeter of leveled location.

The fenced pit used for production will be covered if any fluid is present. The drilling and production pads will be constructed with dozers and graders using native material.

TYPICAL
 LOCATION
 LAYOUT

AMOCO PRODUCTION COMPANY
 P. O. Box 17675
 SALT LAKE CITY, UTAH 84117

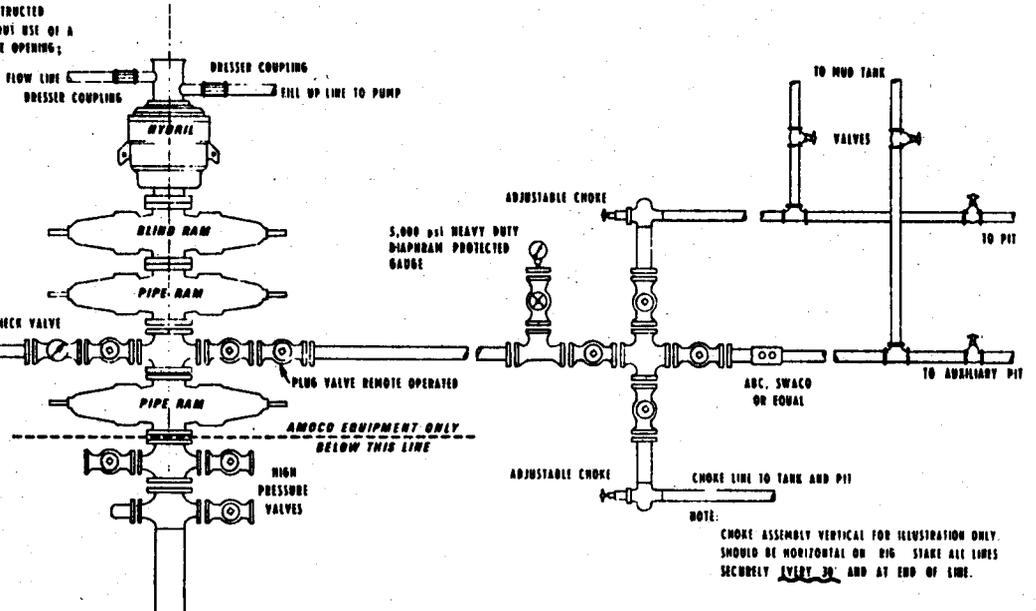
EXHIBIT "D"

**EXHIBIT BOP-5000
MINIMUM BLOW-OUT PREVENTER REQUIREMENTS
5,000 psi W.P.**

NOTE:

1 DRILLING HIPPLE TO BE SO CONSTRUCTED THAT IT CAN BE REMOVED WITHOUT USE OF A WELDED THROUGH ROTARY TABLE OPENING; WITH MINIMUM I.D. EQUAL TO PREVENTER BORE.

2 WEAR RING TO BE PROPERLY INSTALLED IN HEAD.

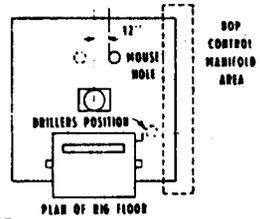


NOTE:

- 1 BLOW-OUT PREVENTERS AND ALL FITTINGS MUST BE IN GOOD CONDITION 5,000 psi W.P. MINIMUM.
- 2 ALL FITTINGS TO BE FLANGED SCREWED CONNECTIONS DOWNSTREAM FROM CHOKES PERMISSIBLE.
- 3 SAFETY VALVE MUST BE AVAILABLE ON RIG FLOOR AT ALL TIMES WITH PROPER CONNECTION OR SWAC VALVE TO BE FULL BORE 5,000 psi W.P. MINIMUM.
- 4 ALL CHOKES AND KILL LINES TO BE SECURELY ANCHORED, ESPECIALLY ENDS OF CHOKE LINES.
- 5 EQUIPMENT THROUGH WHICH BIT MUST PASS SHALL BE AS LARGE AS INSIDE DIAMETER OF THE CASING BEING DRILLED THROUGH.
- 6 RELY COCK OR RELLY.
- 7 EXTENSION WRENCHES AND HAND WHEELS TO BE PROPERLY INSTALLED AND BRACED AT ALL TIMES.
- 8 RIG FLOOR BLOW-OUT PREVENTER CONTROL TO BE LOCATED AS CLOSE TO DRILLERS POSITION AS FEASIBLE.
- 9 BLOW-OUT PREVENTER CLOSING EQUIPMENT TO INCLUDE 20 GALLON ACCUMULATOR, TWO INDEPENDENT SOURCES OF PUMP POWER ON EACH CLOSING UNIT INSTALLATION, AND MEET ALL IADC SPECIFICATIONS.

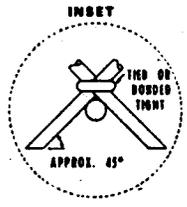
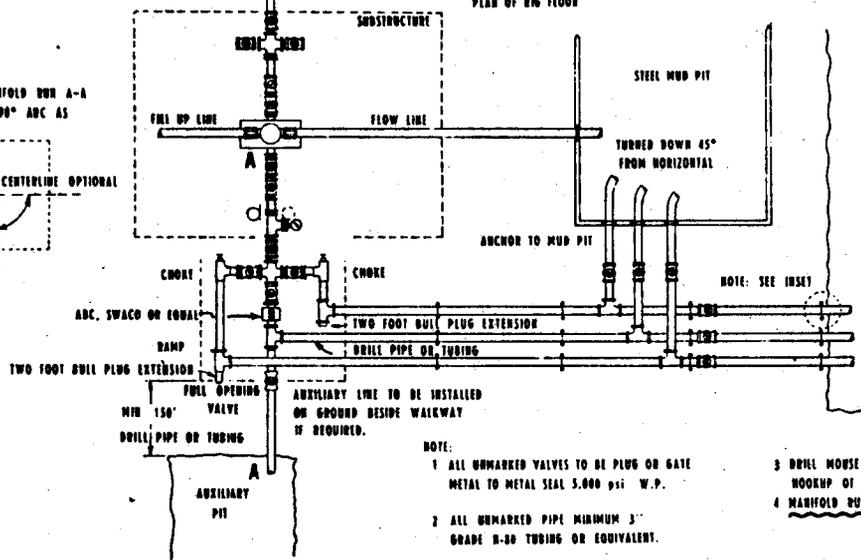
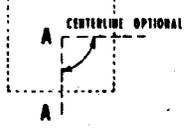
NOTE: ALL VALVES TO BE FULL OPENING.

NOTE: CHOKES ASSEMBLY VERTICAL FOR ILLUSTRATION ONLY. SHOULD BE HORIZONTAL ON RIG. STAKE ALL LINES SECURELY EVERY 30' AND AT END OF LINE.



NOTE:

DIRECTION OF MANIFOLD RUN A-A OPTIONAL WITHIN 90° ADC AS SHOWN BELOW.



- NOTE:
- 1 ALL UNMARKED VALVES TO BE PLUG OR GATE METAL TO METAL SEAL 5,000 psi W.P.
 - 2 ALL UNMARKED PIPE MINIMUM 3" GRADE N-20 TUBING OR EQUIVALENT.

- 3 DRILL MOUSE HOLE 12" OFF CENTER IF HOOKUP OF CHOKES AND MANIFOLD IS UNDER RAMP.
- 4 MANIFOLD RUN A-A TO BE STRAIGHT THRU RUN.

**Amoco Production Company
STANDARD ASSEMBLY FOR FLUID
OPERATED TRIPLE BLOW-OUT PREVENTER
5,000 psi W.P.**

** FILE NOTATIONS **

DATE: March 10, 1981
OPERATOR: Amoco Production Company
WELL NO: Howell Livestock "B" #1
Location: Sec. 6 T. 3N R. 8E County: Summit

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

API Number 43-043-30166

CHECKED BY:

Petroleum Engineer: M.J. Minder 3-12-81

Director: _____

Administrative Aide: (C-3) OK on hndrv. / Too close to proposed
E" #2 gas well in 4N, 7E, Dec 36. & possibly gas well
in 4N, 8E, Dec. 32 (?) chick

APPROVAL LETTER:

Bond Required: Survey Plat Required:

Order No. _____ O.K. Rule C-3

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

Lease Designation Fee Plotted on Map

Approval Letter Written

Hot Line P.I.

March 23, 1981

Amoco Production Company
P. O. Box 17675
Salt Lake City, Utah 84117

Re: Well No. Howell Livestock "B" #1
Sec. 6, T. 3N, R. 8E
Summit County, Utah

Insofar as this office is concerned, approval to drill the above referred to oil well is hereby granted in accordance with Rule C-3, 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:

MICHAEL T. MINDER - Petroleum Engineer
Office: 533-5771
Home: 876-3001

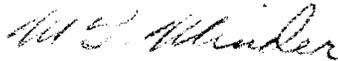
Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling. Your cooperation in completing this form will be appreciated.

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

The API number assigned to this well is 43-043-30166.

Sincerely,

DIVISION OF OIL, GAS, AND MINING



Michael T. Minder
Petroleum Engineer

MTM/ko
cc:

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. Fee	
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Amoco Production Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 17675, Salt Lake City, Utah 84117		8. FARM OR LEASE NAME Howell Livestock "B"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW/4 NW/4 Sec. 6, 1022' FNL & 1928' FWL		9. WELL NO. #1	
14. PERMIT NO. 43-043-30166		10. FIELD AND POOL, OR WILDCAT Wildcat	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7815' GR		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 6, 13N, R8E	
		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) <u>Name Change</u>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

Please accept this sundry notice as Amoco Production Company's request to change the name of the said well to Thousand Peaks Ranches "B" #1.

APPROVED BY THE DIVISION
OF OIL, GAS, AND MINING
DATE: _____
BY: _____

RECEIVED
APR 2 1981

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Administrative Supervisor DATE 3-31-81
(This space for Federal or State office use)

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



STATE OF UTAH
NATURAL RESOURCES & ENERGY
Oil, Gas & Mining

Scott M. Matheson, Governor
Temple A. Reynolds, Executive Director
Cleon B. Feight, Division Director

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

December 15, 1981

Amoco Production Company
P. O. Box 17675
Salt Lake City, Utah 84078

Re: See Attached

Gentlemen:

In reference to the above mentioned wells, considerable time has gone by since approval was obtained from this office.

This office has not received any notification of spudding. If you do not intend to drill these wells, please notify this Division. If spudding or any other activity has taken place, please send necessary forms. If you plan to drill this location at a later date, please notify as such.

Your prompt attention to the above will be greatly appreciated.

Very truly yours,

DIVISION OF OIL, GAS AND MINING

A handwritten signature in cursive script that reads "Cari Furse".

CARI FURSE
CLERK TYPIST

WELL # Louisiana Land & Exploration Federal 1-34
Sec. 34, T. 8N, R. 6E, NE SE
Rich County, Utah

Well # Champlin 55-1 Amoco "B" #1
Sec. 33, T. 3N, R. 4E
Summit County, Utah

Well No. State of Utah "S" #1
Sec. 30, T. 3N, R. 7E, NW SW
Summit County, Utah

Thousand Peaks
Well No. ~~Howell Livestock~~ "B" #1
Sec. 6, T. 3N, R. 8E
Summit County, Utah

Well No. Island Ranching "D" #1
Sec 14, T. 4N, R. 7E
Summit County, Utah

Well No. Island Ranching "E" #1
Sec 36, T. 4N, R. 7E
Summit County, Utah

Well No. Champlin 458 Amoco "D" #4
Sec 29, T. 4N, R. 8E
Summit County, Utah

Well No. Champlin 458 "E" WIU # 1
Sec, 31, T. 4N, R. 8E
Summit County, Utah

Well No. Champlin 458 "E" WIU #2
Sec. 31, T. 4N, R. 8E
Summit County, Utah

Well No. Island Ranching "E" #2
Sec. 36, T. 4N, R. 7E
Summit County, Utah

Well No. Champlin 846- Amoco "B" 1
Sec. 19, T. 5N, R. 8E
Summit County, Utah

Well No. M.A. SMith #2
Sec. 16, T. 3S, R. 10W
Wasatch County

Well No. Island Ranching #C 1

Sec. 26, T. 4N, R. 7E

Summit County

Well No. Thousand Peaks Ranching WIU #1

Sec. 32, T. 4N, R. 8E

Summit Cou-nty, Utah

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

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
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P.O. Box 17675 Salt Lake City, Utah 84117		8. FARM OR LEASE NAME Thousand Peaks Ranches
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1022' FNL & 1928' FWL		9. WELL NO. 'B' #1
14. PERMIT NO. 43-043-30166		10. FIELD AND POOL, OR WILDCAT Anschutz Ranch East
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7815' GR		11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA Sec. 6, T3N, R8E
		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"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> (Other) <input type="checkbox"/>	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) <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> ABANDONMENT* <input type="checkbox"/> 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.)*

The subject site remains a location only - anticipate well to be drilled during 1982



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

SIGNED [Signature] TITLE Administrative Supervisor DATE 1-5-82

(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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>LA</u>		5. LEASE DESIGNATION AND SERIAL NO. <u>Fee</u>																				
2. NAME OF OPERATOR <u>AMOCO PRODUCTION COMPANY</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																				
3. ADDRESS OF OPERATOR <u>P.O. Box 17675 Salt Lake City, Utah 84117</u>		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 <u>1022' FNL & 1928' FWL</u>		8. FARM OR LEASE NAME <u>Thousand Peaks Ranches</u>																				
14. PERMIT NO. <u>43-043-30166</u>	15. ELEVATIONS (Show whether DF, RT, CR, etc.) <u>7815' GR</u>	9. WELL NO. <u>"B" #1</u>																				
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT <u>Anschutz Ranch East</u>																				
<table border="0"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>TEST WATER SHUT-OFF <input type="checkbox"/></td> <td>FULL OR ALTER CASING <input type="checkbox"/></td> <td>WATER SHUT-OFF <input type="checkbox"/></td> <td>REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> <td>SHOOTING OR RECOMPLETION <input type="checkbox"/></td> <td>(Other) <input checked="" type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td colspan="2">LOCATION ABANDONED <input checked="" type="checkbox"/></td> </tr> </table>		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 RECOMPLETION <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/>	REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	LOCATION ABANDONED <input checked="" type="checkbox"/>		11. SEC., T., S., M., OR BLE. AND SUBVY OR AREA <u>Sec. 6, T3N, R8E</u>
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"/>																			
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		12. COUNTY OR PARISH <u>Summit</u>																				
		13. STATE <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"/>	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 RECOMPLETION <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	LOCATION ABANDONED <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion or re-completion on 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.)*

Location Abandoned - Well Not To Be Drilled

Handwritten notes:
D.H. & Steve
1 WE
1 WE
Date 9/14

18. I hereby certify that the foregoing is true and correct
SIGNED K W DEWEY TITLE Administrative Supervisor DATE 9/14/82

(This space for Federal or State office use)
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:



STATE OF UTAH
NATURAL RESOURCES & ENERGY
Oil, Gas & Mining

Scott M. Matheson, Governor
Temple A. Reynolds, Executive Director
Cleon B. Feight, Division Director

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

March 21, 1983

Amoco Production Company
P. O. Box 17675
Salt Lake City, Utah 84117

Re: See attached list of wells

Gentlemen:

In reference to the above mentioned wells, considerable time has gone by since approval was obtained from this office.

This office has not received any notification of spudding. If you do not intend to drill these wells, please notify this Division. If spudding or any other activity has taken place, please send necessary forms. If you plan to drill these locations at a later date, please notify as such.

We will be happy to acknowledge receipt of your response to this notice if you will include an extra copy of the transmittal letter with a place for our signature, and a self addressed envelope for the return. Such acknowledgement should avoid unnecessary mailing of a firm second notice from our agency.

Your prompt attention to the above will be greatly appreciated.

Respectfully,

DIVISION OF OIL, GAS AND MINING

A handwritten signature in cursive script that reads "Cari Furse".

Cari Furse
Well Records Specialist

CF/cf

Well No. Champlin 392 Amoco 'B' # 1
Sec. 1, T. 5N, R. 6E.
Rich County, Utah

Well No. Champlin 391 Amoco 'B' # 1
Sec. 7, T. 6N, R. 7E.
Rich County, Utah

Well No. Champlin 425 Amoco 'B' # 1
Sec. 3, T. 2N, R. 4E.
Summit County, Utah

Well No. Champlin 544 Amoco 'B' # 1
Sec. 1, T. 3N, R. 7E.
Summit County, Utah

Well No. Champlin 389 Amoco 'B' # 1
Sec. 31, T. 3N, R. 7E.
Summit County, Utah

Well No. Thousand Peaks Ranches 'B' # 2
Sec. 6, T. 3N, R. 8E.
Summit County, Utah

Well No. Thousand Peaks Ranches 'B' # 1
Sec. 6, T. 3N, R. 8E.
Summit County, Utah

Well No. Champlin 406 Amoco 'B' # 1
Sec. 19, T. 4N, R. 7E.
Summit County, Utah

Well No. Island Ranching 'E' # 1
Sec. 36, T. 4N, R. 7E.
Summit County, Utah

Well No. Champlin 458 Amoco 'G' # 2
Sec. 17, T. 4N, R. 8E.
Summit County, Utah

Well No. Champlin 458 Amoco 'D' # 4
Sec. 29, T. 4N, R. 8E.
Summit County, Utah

Well No. Thousand Peaks Ranches WIU # 2
Sec. 32, T. 4N, R. 8E.
Summit County, Utah

Well No. M. A. Smith # 2
Sec. 16, T. 3S, R. 10W.
Wasatch County, Utah

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

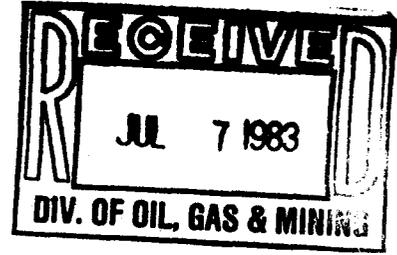
<p align="center">SUNDRY NOTICES AND REPORTS ON WELLS</p> <p align="center">(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</p>		5. LEASE DESIGNATION AND SERIAL NO.	
		Fee	
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Amoco Production Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 829, Evanston, WY 82930		8. FARM OR LEASE NAME Thousand Peaks Ranches	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1087' FSL & 859' FEL SE/4 SE/4		9. WELL NO. B #1	
14. PERMIT NO. 43-043-30178		10. FIELD AND POOL, OR WILDCAT Anschutz Ranch East	
15. ELEVATIONS (Show whether OF, WT, GR, etc.) 7476' GR		11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA Sec. 6, T3N, R8E	
		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>Request for Cancellation</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.)*

Please be informed that the above referenced well will not be drilled. Therefore, please cancel the corresponding permit.



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

SIGNED [Signature] TITLE Staff Admin. Analyst (SG) DATE 6/29/83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____