

Converted to water injection well
5-1-69

FILE NOTATIONS

Entered in NID File
Entered On S R Sheet _____
Location Map Pinned _____
Card Indexed
I W R for State or Fee Land _____

Checked by Chief RLS
Copy NID to Field Office _____
Approval Letter Submit
Disapproval Letter _____

COMPLETION DATA:

Date Well Completed 8-26-62 Location Inspected _____
OW WW _____ TA _____ Bond released _____
GW _____ OS _____ PA _____ State of Fee Land _____

LOGS FILED

Driller's Log 9-10-62
Electric Logs (No.) 3
E _____ I _____ E-I GR _____ GR-N _____ Micro
Lat. _____ Mi-L _____ Sonic Others _____

Utah

(SUBMIT IN TRIPLICATE)

Land Office 066357 -- SLC
Lease No. Walker Hollow
Unit _____

X	12		

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF.....	
NOTICE OF INTENTION TO CHANGE PLANS.....		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....		SUBSEQUENT REPORT OF ALTERING CASING.....	
NOTICE OF INTENTION TO RE-DRILL OR REPAIR WELL.....		SUBSEQUENT REPORT OF RE-DRILLING OR REPAIR.....	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....		SUBSEQUENT REPORT OF ABANDONMENT.....	
NOTICE OF INTENTION TO PULL OR ALTER CASING.....		SUPPLEMENTARY WELL HISTORY.....	
NOTICE OF INTENTION TO ABANDON WELL.....			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

April 19, 19 62

Walker Hollow Unit
Well No. 17 is located 1980 ft. from N line and 660 ft. from W line of sec. 12
SW NW Section 12 7S 23E 31M
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)
Walker Hollow Red Wash Field Uintah Utah
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is _____ ft. 5402.5' W

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Rotary drilling equipment will be used to drill to approximately 5600', a Green River test. Surface Casing: Approximately 300' of 8-5/8" cemented to surface. Production Casing: Required amount of 5-1/2" cemented with required amount of cement. Mud program will be to use native mud to top of pay, then convert to gal mud to total depth. All oil and gas shows will be tested. Electric logs will be run before setting casing or abandonment. Stimulation treatments, such as fracturing or acidizing may be employed in completion.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Humble Oil & Refining Company
Address P. O. Box 3082
Durango, Colorado
By COPY (ORIGINAL SIGNED) B. M. BRADLEY
Title Dist. Supt.

COMPANY HUMBLE OIL & REFINING COMPANY

Well Name & No. Walker Hollow # 17

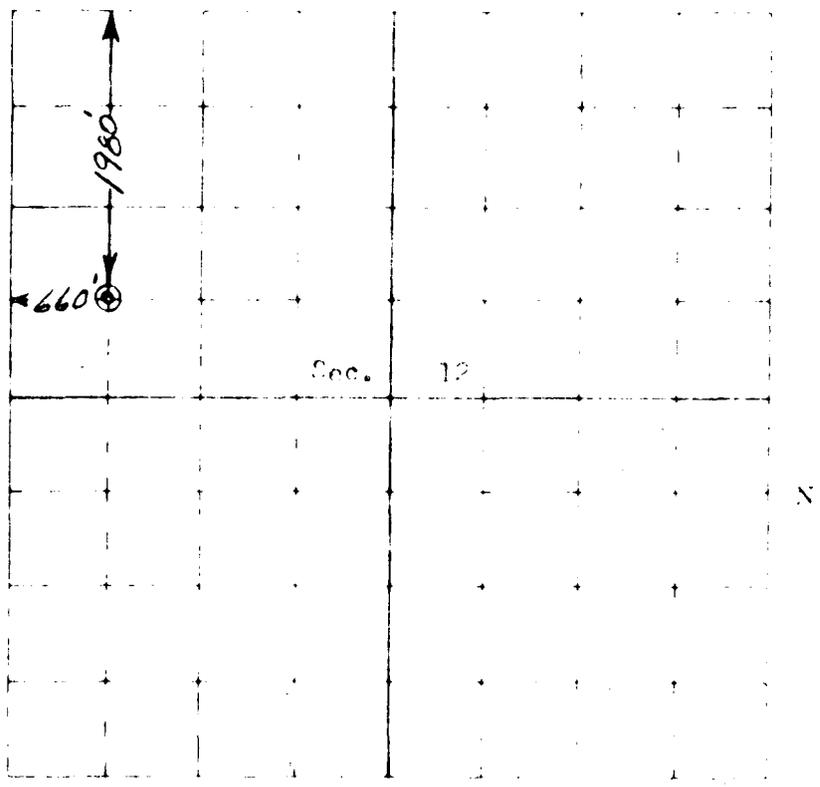
Lease No.

Location 1980' FROM THE NORTH LINE & 660' FROM THE WEST LINE

Being in center S¹/₂ N¹/₂

Sec 12 T 7 S, R 23 E, S.1.M., Uintah County, Utah

Ground Elevation 5402.5' ungraded



Scale - 4 inches equals 1 mile

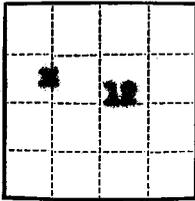
Surveyed 18 April

19 62

This is to certify that the above plat was prepared from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

James P. Lese

Registered Land Surveyor
James P. Lese
Lic. No. 1477



(SUBMIT IN TRIPLICATE)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Land Office **Utah**
Lease No. **066357 - 210**
Unit **Walker Hollow**

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	SUBSEQUENT REPORT OF WATER SHUT-OFF.....	
NOTICE OF INTENTION TO CHANGE PLANS.....	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....	SUBSEQUENT REPORT OF ALTERING CASING.....	
NOTICE OF INTENTION TO RE-DRILL OR REPAIR WELL.....	SUBSEQUENT REPORT OF RE-DRILLING OR REPAIR.....	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....	SUBSEQUENT REPORT OF ABANDONMENT.....	
NOTICE OF INTENTION TO PULL OR ALTER CASING.....	SUPPLEMENTARY WELL HISTORY.....	
NOTICE OF INTENTION TO ABANDON WELL.....		

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

April 19, 19 **62**

Walker Hollow Unit

Well No. **17** is located **2980** ft. from **{N}** **S** line and **660** ft. from **{E}** **W** line of sec. **12**

SW NW Section 12 **T3** **R3E** **S1M**

($\frac{1}{4}$ Sec. and Sec. No.) (Twp.) (Range) (Meridian)

Walker Hollow **Utah**

(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is **5102.5'** ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Rotary drilling equipment will be used to drill to approximately 5600', a 8 run River test. Surface Casings: Approximately 300' of 8-5/8" cemented to surface. Production Casings: Required amount of 5-1/2" cemented with required amount of cement. Mud program will be to use native mud to top of pay, then convert to gal mud to total depth. All oil and gas shows will be tested. Electric logs will be run before setting casing or abandonment. Stimulation treatments, such as fracturing or acidizing may be employed in completion.

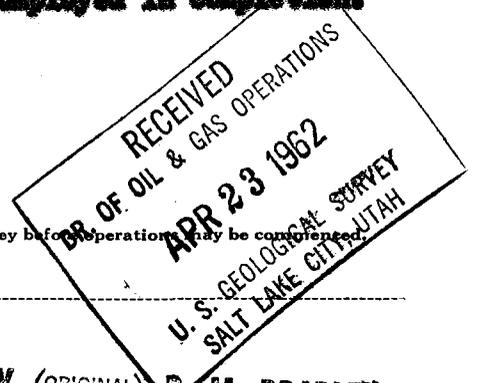
I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company **Humble Oil & Refining Company**

Address **P. O. Box 3082**
Durango, Colorado

By **P. M. BRADLEY**
Title **Dist. Supt.**

CONDITIONS OF APPROVAL ATTACHED



COMPANY HUMBLE OIL & REFINING COMPANY

Well Name & No Walker Hollow #17

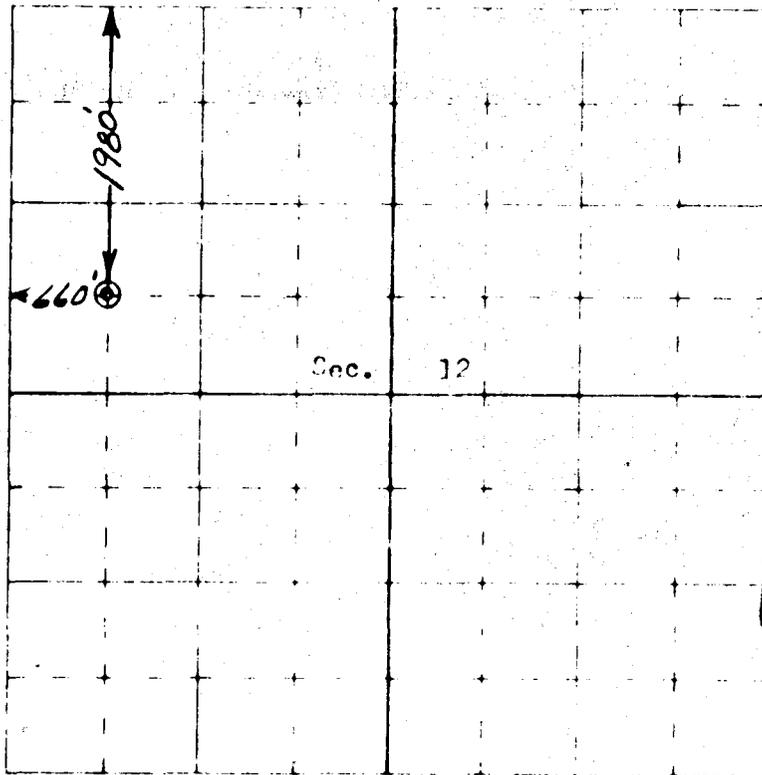
Lease No.

Location 1980' FROM THE NORTH LINE & 660' FROM THE WEST LINE

Being in center SW 1/4

Sec 12 T 7 S, R 23 E, S.1.W., Uintah County, Utah

Ground Elevation 5492.5' ungraded



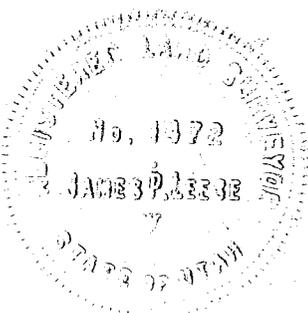
BMB	PZB	JAB	FGB	WDC	DVE
FILE	RECEIVED APR 27 1962 Durango District				HLE
CNC					WSF
MMV					ANG
EDW					HSG
YES					LHN
MDS	JLS	JML	GCL	AFI	WRB

Scale 1/4 inches equals 1 mile

Surveyed 18 April

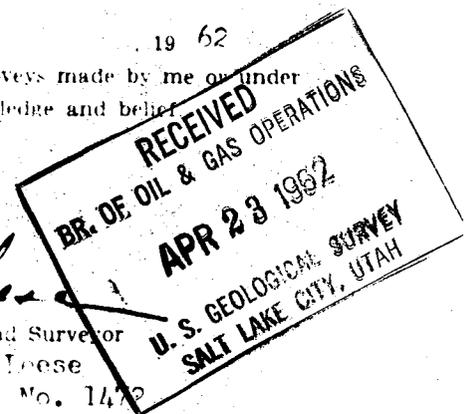
19 62

This is to certify that the above plat was prepared from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

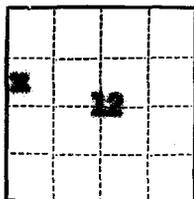


James P. Leese

Registered Land Surveyor
James P. Leese
Utah Reg. No. 1472



Copy H. L. C.



(SUBMIT IN TRIPLICATE)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Land Office **Utah**
Lease No. **056357 - 810**
Unit **Walker Hollow**

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO RE-DRILL OR REPAIR WELL	SUBSEQUENT REPORT OF RE-DRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	COMPLETION REPORT & RECOMPLETION	X

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

October 11, 1962

Walker Hollow Unit

Well No. **17** is located **1980** ft. from **N** line and **660** ft. from **W** line of sec. **12**

SW NW Section 12
(¼ Sec. and Sec. No.)

T8
(Twp.)

R3E
(Range)

R1M
(Meridian)

Walker Hollow
(Field)

Utah
(County or Subdivision)

Utah
(State or Territory)

The elevation of the derrick floor above sea level is **5402.5'** **06**

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

COMPLETION REPORT: TD 5520, FVID 5486', completed 8-26-62 as an oil well. Pumped 187 b.o. and 10 b.w. per day thru open choke from Green River "D", Upper and Lower, 4470' to 5520', 38' net pay after free. Perforations: 5466-69', 5430-36', 5370-66', 5046-36', 4879-62', 4638-30', 4607-04' and 4500-4487'. Set 5 1/2" casing @ 5520'.

RECOMPLETION REPORT: FVID 5486'. Recompleted 10-3-62 as an oil well, pumped 114 b.o. and 2 b.w. per day thru open choke from Green River "D", Upper and Lower, 4470-5520', 38' net pay after recompletion. Perforations squeezed off 4638-30'.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company **Humble Oil & Refining Company**

Address **P. O. Box 3082**
Durango, Colorado

By **COPY (ORIGINAL SIGNED) B. M. BRADLEY**

Title **Dist. Supt.**

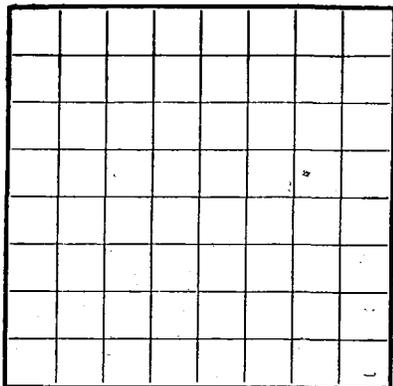
MID
cont
L
9

ONE
5

Form OGCC-3

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

Salt Lake City, Utah



LOCATE WELL CORRECTLY

To be kept Confidential until _____
(Not to exceed 4 months after filing date)

LOG OF OIL OR GAS WELL

Operating Company Humble Oil & Refining Co Address P. O. Box 3082, Durango, Colorado
Lease or Tract Walker Hollow Field Redwash State Utah
Well No. 17 Sec. 12 T. 7S R. 23E Meridian _____ County Uintah
Location 1980' ft. S. of N. Line and 660' ft. E. of W. Line of Section 12 Elevation 5491' GL
(Derrick floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon
so far as can be determined from all available records.

Signed BY B. M. BRADLEY

Date September 7, 1962 Title Dist. Prod. Supr.

The summary on this page is for the condition of the well at above date.

Commenced drilling 6-17-62, 19____ Finished drilling 7-9-62, 19____

OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 5034 to 5042 No. 4, from _____ to _____
No. 2, from 5090 to 5115 No. 5, from _____ to _____
No. 3, from _____ to _____ No. 6, from _____ to _____

IMPORTANT WATER SANDS

No. 1, from _____ to _____ No. 3, from _____ to _____
No. 2, from _____ to _____ No. 4, from _____ to _____

CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From-	To-	
8-5/8	24#	8	J-55	460'	Guide				Surface
5-1/2	15.5#	8	J-55	115'					Production
5-1/2	14#	8	J-55	5309'					Production

MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
8-5/8	479'	350			
5-1/2	5520'	365			

MARK

PLUGS AND ADAPTERS

Heaving plug—Material ----- Length ----- Depth set -----
 Adapters—Material ----- Size -----

SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out

TOOLS USED

Rotary tools were used from zero feet to 5520 feet, and from ----- feet to ----- feet
 Cable tools were used from 0 feet to 0 feet, and from ----- feet to ----- feet

DATES

Date P & A -----, 19----- Put to producing 8-26-62, 19-----

The production for the first 24 hours was 177 barrels of fluid of which 94 % was oil; ----- % emulsion; 6 % water; and ----- % sediment. Gravity, °Bé. 30.2 @ 122°

If gas well, cu. ft. per 24 hours ----- Gallons gasoline per 1,000 cu. ft. of gas -----

Rock pressure, lbs. per sq. in. -----

EMPLOYEES

-----, Driller -----, Driller
 -----, Driller -----, Driller

FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
			At the end of complete Driller's Log add Geologic Tops. State whether from Electric Logs or samples.
0	5520 TD	5520	Green River

166.
11
77

[OVER]

HISTORY OF OIL OR GAS WELL

It is of the greatest importance to have a complete history of the well. Please state in detail the dates of redrilling, together with the reasons for the work and its results. If there were any changes made in the casing, state fully, and if any casing was "sidetracked" or left in the well, give its size and location. If the well has been dynamited, give date, size, position, and number of shots. If plugs or bridges were put in to test for water, state kind of material used, position, and results of pumping or hauling.

State whether electric logs were run.

Spudded 6-17-62.

Completed 8-26-62 as an oil well. Pumped 167 BO and 10 BW per day thru open choke from Green River D, Upper and Lower, 4470-5520, 43' net pay after frac. CP 400#, TP 300# GOR 8276 cu ft/bbl. Gravity 30.2 @ 122°. Set 5½" csg. at 5520 with 365 sx, perforated. 5466-60, 5430-16, 5370-66, 5046-36, 4679-62, 4638-30, 4607-04, 4500-4487.

DST #1 4516-25 Tool open 4 hrs w/weak blow increase to strong in 15 min. Gas to surface in 3 hrs 42 min. too small to measure. Rec 60' Heavy Oil Cut Mud, 180' oil/water cut mud, 270' muddy water, 1361' water (fresh) total 1871' fluid.

DST #2 4548-60 Tool open 3 hrs w/good blow decreasing to weak at end of test no gas to surface. Rec. 90' water cut and oil cut mud, 3350' water (fresh).

DST #3 4663-4681 Tool open 4 hrs open with strong blow gts in 11 min. gas measurements in 45 min. IV - 79, mcf decrease to 28.7 mcf after 4 hrs - Rec. 1377' fld as follows 1125' clean oil, 222' of oil gas cut mud. Gravity 27 @ 60 degrees.

DST #4 5034-42 Tool open 4 hrs with fail blow. Increase to strong in 15 min. gradually decrease to weak in 2 hrs and 31 min with gas to surface at this time too small to measure. Rec. 415' clean oil, 140' oil gas cut mud. Gravity 25.2 @ 60 degrees.

DST #5 5090-5115 Tool open 4 hrs strong blow, gas to surface in 1 hr 30 min. too small to measure. Gravity 29.3 @ 166 degrees. Rec 360' clean oil 90' oil gas cut mud, 435' gas oil cut water (fresh).

No cores taken.

Frac treated oerfs 5356-70, 5416-30, 5460-66 with 7200 gals #5 Burner Fuel + 7200# 10-30 sand + 144 gals Humblefrac.

Frac treated perfs 4662-79 w/5100 gals #5 Burner Fuel + 5100# 10-30 water wet sand + 102 gals Humble frac.

Frac treated perfs 5036-46 w/3000 gals #5 Burner Fuel + 3000# 10-30 water-wet sand + 60 gals Humble frac.

Frac treated 4630-48 w/2400 gals #5 Burner Fuel + 2400# sand + 48 gals Humblefrac.

TD 5520, PBTD 5486'.

CHECKLIST FOR INJECTION WELL APPLICATION AND FILE REVIEW

* * * * *

Operator: EXXON Well No. WHU #17
 County: Utah T 15 R 23E Sec. 12 API# 43-047-15567
 New Well Conversion Disposal Well Enhanced Recovery Well

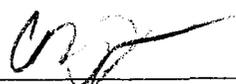
	YES	NO
UIC Forms Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Plat including Surface Owners, Leaseholders, and wells of available record	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Schematic Diagram	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fracture Information	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Pressure and Rate Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Adequate Geologic Information	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fluid Source	<u>Steam</u>	

Analysis of Injection Fluid Yes No TDS 7000+
 Analysis of Water in Formation to be injected into Yes No TDS 7000+

Known USDW in area Utah - less than Depth 200'
 Number of wells in area of review 8 Prod. 8 P&A 0
 Water 0 Inj. 0

Aquifer Exemption Yes NA
 Mechanical Integrity Test Yes No
 Date _____ Type _____

Comments: Top of cement 3700' Bottom 5520'

Reviewed by: 

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THIS CATEGORY
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424

PHD
PS

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Humble Oil & Refining Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 120, Denver, Colorado 80201		7. UNIT AGREEMENT NAME Walker Hollow
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 660' FWL		8. FARM OR LEASE NAME Walker Hollow Unit
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5503 KB	9. WELL NO. 17
		10. FIELD AND POOL, OR WILDCAT Walker Hollow
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 12-7S-23E
		12. COUNTY OR PARISH Uintah
		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 type="checkbox"/>
(Other) Convert to Water Input Well <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.)*

This well was originally completed 8-26-62 as an oil well producing 167 BO and 10 BW per day thru perforations 5460-66', 5416-30', 5366-70', 5036-46', 4662-79', 4630-38', 4604-07' and 4487-4500'. Well is currently producing 60 BO and 132 BW per day through these perforations except 4630-38' which was squeezed off in September, 1962 to shut-off gas. It is Humble's intention to convert this oil well into a water input well.

Clean out to PBTD 5486'. Spot 50 bbls. distillate mixed with 20 gals. of Enjay 7816 paraffin solvent down open ended tubing at 5470' followed by 30 bbls. of water. Soak overnight and reverse circulate with hot water containing 1% surfactant (Enjay 7655). Circulate hole with hot surfactant solution for approx. 4 hrs. to clean. Set packer on tubing at approx. 4400', connect well to injection system, and inject into perforations 5460-66'(1a), 5416-30(8d), 5366-70(8c), 5036-46(6c), 4662-79(4d), 4604-07(4c), and 4487-4500(4a).

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION

DATE 4-16-69
BY Clem B. Feight

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE District Chief Engineer DATE April 15, 1969

(This space for Federal or State office use)

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

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

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

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> CONVERT TO WATER INJECTION</p> <p>2. NAME OF OPERATOR Humble Oil & Refining Company</p> <p>3. ADDRESS OF OPERATOR P. O. Box 120, Denver, Colorado 80201</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SW NW (1930' FWL & 660' FWL) of Section 12</p>	<p>5. LEASE DESIGNATION AND SERIAL NO.</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME Walker Hollow Unit</p> <p>8. FARM OR LEASE NAME Walker Hollow Unit</p> <p>9. WELL NO. 17</p> <p>10. FIELD AND POOL, OR WILDCAT Walker Hollow</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12-75-23E - 31M</p> <p>12. COUNTY OR PARISH Uintah</p> <p>13. STATE Utah</p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5503' KB</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) Convert to Water Injection <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.)*

Hot oiled well with a mixture of 2/3 Walker Hollow crude and 1/3 distillate. Pulled rods. Lowered tubing to TD and strapped out to check PBTD. Ran casing scraper on tubing and cleaned out to 5473'. Spotted 50 bbls. distillate with 20 gals. Enjay 7316 paraffin solvent down open-ended tubing at 5470' followed by 30 bbls. water. Shut in and let soak overnight. Reverse circulated with hot water containing 1% surfactant (Enjay 7655) until returns were clean. Pressure tested tubing to 4000#. Ran tubing with Baker Model A packer and set packer at 4399'. Pressure tested annulus to 2000#. Connected to plant and started injecting water 5-1-69 at rate of 1250 BPD at 400#.

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

SIGNED J. Roy Dorrough TITLE Dist. Supt. DATE 6-6-69

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SLC-066357

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Walker Hollow Unit

8. FARM OR LEASE NAME

Walker Hollow Unit

9. WELL NO.

17

10. FIELD AND POOL, OR WILDCAT

Walker Hollow

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

Sec. 12-T7S-R23E

12. COUNTY OR PARISH 13. STATE

Uintah

Utah

1. OIL WELL GAS WELL OTHER Water Injection Well

2. NAME OF OPERATOR
Humble Oil & Refining Company

3. ADDRESS OF OPERATOR
P. O. Box 120, Denver, Colo. 80201

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

1980' FNL, 660' FWL, Sec. 12

14. PERMIT NO.

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

5503' KB

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) _____

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

(Other) Open addl. zones to waterflood

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.)*

It is proposed to squeeze perms 5036-46' w/30 sx cement. Clean out and pressure test. Perforate 5088-90', 5100-04', 5110-13', and 4894-4906' w/2 SPF. Breakdown each zone with 100 gals. 15% BDA w/10% mutual solvent. Run tubing & packer and put well on injection.

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION

DATE 9-5-72

BY *Paul A. Durrnell*

2cc: Utah Division of Oil & Gas Conservation
1cc: Chevron
1cc: Oil & Gas Acctg., Midland

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

SIGNED COPY (ORIGINAL) I. ROY DORROUGH

TITLE Dist. Supt.

DATE 8-30-72

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SIC-066357

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 **Water Injection Well**

7. UNIT AGREEMENT NAME

Walker Hollow Unit

2. NAME OF OPERATOR
Humble Oil & Refining Company

8. FARM OR LEASE NAME

Walker Hollow Unit

3. ADDRESS OF OPERATOR
P. O. Box 120, Denver, Colo. 80201

9. WELL NO.

17

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

10. FIELD AND POOL, OR WILDCAT

Walker Hollow

1980' FNL, 660' FWL, Sec. 12

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

Sec. 12-7S-23E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5503' KB

12. COUNTY OR PARISH
Uintah

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
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) **Open addl. zones to inj.**

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(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.)*

Moved in workover rig 9-12-72. Squeezed perms 5036-46' w/30 sx cement with .7% HALAD 9 and 1% CaCl. Displaced to top of perms. No standing pressure. Reversed out and resqueezed w/30 sx as above. Displaced to top of perms. Standing pressure 250#. Reversed out and resqueezed w/75 sx as above. Standing pressure 1000#. SI overnight. Tested squeeze job to 3000#, held OK. Reset BP & perforated w/2 SPF 5088-90, 5100-5105, 5110-13, and 4894-4960'. Acidized each of following zones w/100 gals. 15% BDA w/10% Musol followed by 50 BW at 5 BPM - 5366-70, 5088-5113, and 4894-4960'. Returned well to injection service. On test 9-20-72 injected 864 BWPD at 1500#. Injection prior to workover 1445 BPD at 1900#.

2cc: Utah Division of Oil & Gas Conservation
1cc: Chevron
1cc: Oil & Gas Acctg., Midland

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

SIGNED J. Roy Dorrough

TITLE Dist. Supt.

DATE 10-10-72

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

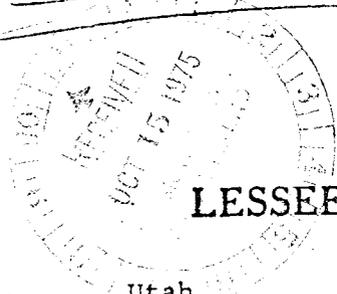
DATE

CORRECTED COPY

Form approved,
Budget Bureau No. 42-R356.5.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LAND OFFICE
LEASE NUMBER
UNIT Walker Hollow Unit.....



LESSEE'S MONTHLY REPORT OF OPERATIONS

State Utah County Uintah Field Walker Hollow

The following is a correct report of operations and production (including drilling and producing wells) for the month of August, 1975,

Agent's address P. O. Box 1600 Company Exxon Corporation
Midland, Texas 79701 Signed [Signature]

Phone (915) 684-4411 Agent's title Unit Head, Oil & Gas Acctg.

SEC. AND 1/4 OF 1/4	TWP.	RANGE	WELL NO.	DATE PRODUCED	BARRELS OF OIL	GRAVITY	CU. FT. OF GAS	GALLONS OF GASOLINE RECOVERED	BARRELS OF WATER (If none, so state)	REMARKS (If drilling, depth; if shut down, cause; date and result of test for gasoline content of gas)	
							(In thousands)		Cum.		
							Current Mo. Bbls. Inj.		Bbls. Inj.	PSIG	
WALKER HOLLOW UNIT											
SW SE 12	7S	23E	4		Casing		-		95107		
					Tubing		29.610		3961894	1600	
SW SE 7	7S	24E	6		Casing		-		137397		
					Tubing		12.342		2479943	1900	
SW SE 8	7S	24E	8		Casing		-		168519		
					Tubing		20183		2840816	1600	
SW NW 9	7S	24E	10		Tubing		16625		2037840	1600	
SW SE 4	7S	24E	12		Tubing		1930		1412843	1900	
SW SW 12	7S	23E	17		Tubing		25716		2442190	2000	
SW SE 1	7S	23E	18		Tubing		48709		2429472	1900	
SW SE 11	7S	23E	22		Tubing		33391		2154410	1600	
SW NW 11	7S	23E	26		Tubing		2470		243328	2000	
SW NW 8	7S	24E	27		Tubing		12192		1034048	2000	
SW SE 2	7S	23E	30		Tubing		4714		611473	2000	
SW NE 9	7S	24E	31		Tubing		-		271760	-	
SW SW 7	7S	24E	34		Tubing		8406		568317	2000	
TOTAL BARREL INJECTED								216288		23591257	

NOTE.—There were runs or sales of oil; M cu. ft. of gas sold;

..... runs or sales of gasoline during the month. (Write "no" where applicable.)

NOTE.—Report on this form is required for each calendar month, regardless of the status of operations, and must be filed in duplicate with the supervisor by the 6th of the succeeding month, unless otherwise directed by the supervisor.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

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 **Water Injection**

2. NAME OF OPERATOR
Exxon Corporation

3. ADDRESS OF OPERATOR
P. O. Box 1600, Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980' FNL, 660 FWL, Sec. 12

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5503 KB

5. LEASE DESIGNATION AND SERIAL NO.
SLC-066357

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME
Walker Hollow Unit

8. FARM OR LEASE NAME
Walker Hollow Unit

9. WELL NO.
17

10. FIELD AND POOL, OR WILDCAT
Walker Hollow

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 12-7S-23E

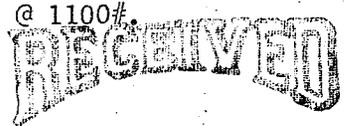
12. COUNTY OR PARISH **Utah** 13. STATE **Utah**

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>Clean out & acidize Inj. Well</u> <input checked="" type="checkbox"/>	
(Other) _____		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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

Unhooked water injection line. Backflowed well approx 50 bbls. Unseated packer and pulled 2 7/8" tbg. Went in hole with 5 1/2" scraper--tagged fill @ 5467'. Washed sand from 5467 to 5476--circ hole clean--started 1000 gal. paraffin solvent across perms--allowed to soak 30 minutes. Ran Baker pkr on 2 7/8" tbg. to 4399--set pkr--Halliburton treated down 2 7/8" tbg w/4000 gal 15% acid containing 7 drums 7610 correxit and 160 ball sealers--displaced w/50 bbls produced wtr. Job complete 12-20-79--Inj. rate 2377 BWPD @ 1100#.



JAN 9 1980

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct
SIGNED D. L. Clemmer TITLE Unit Head DATE 1-7-80

(This space for Federal or State office use)

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

EXXON COMPANY, U.S.A.

2000 CLASSEN CENTER-EAST • OKLAHOMA CITY, OKLAHOMA 73106 • (405) 528-2411

June 23, 1980

RECEIVED
JUN 25 1980

Mr. Mike Minder
1588 West North Temple
Salt Lake City, Utah

DIVISION OF
OIL, GAS & MINING

Mr. Minder:

We appreciate your verbal approval to proceed with the injectivity profiles at Walker Hollow. In answer to your questions regarding the procedure, a half millicurie of radioactive isotope with a half life of eight days is emitted in the injection well. The velocity and intensity of the isotope is measured at various points in the well bore during injection. With this information, the amount of injection into each zone can be determined. This is a very common waterflood surveillance technique in Oklahoma and Texas for multi-zone fields.

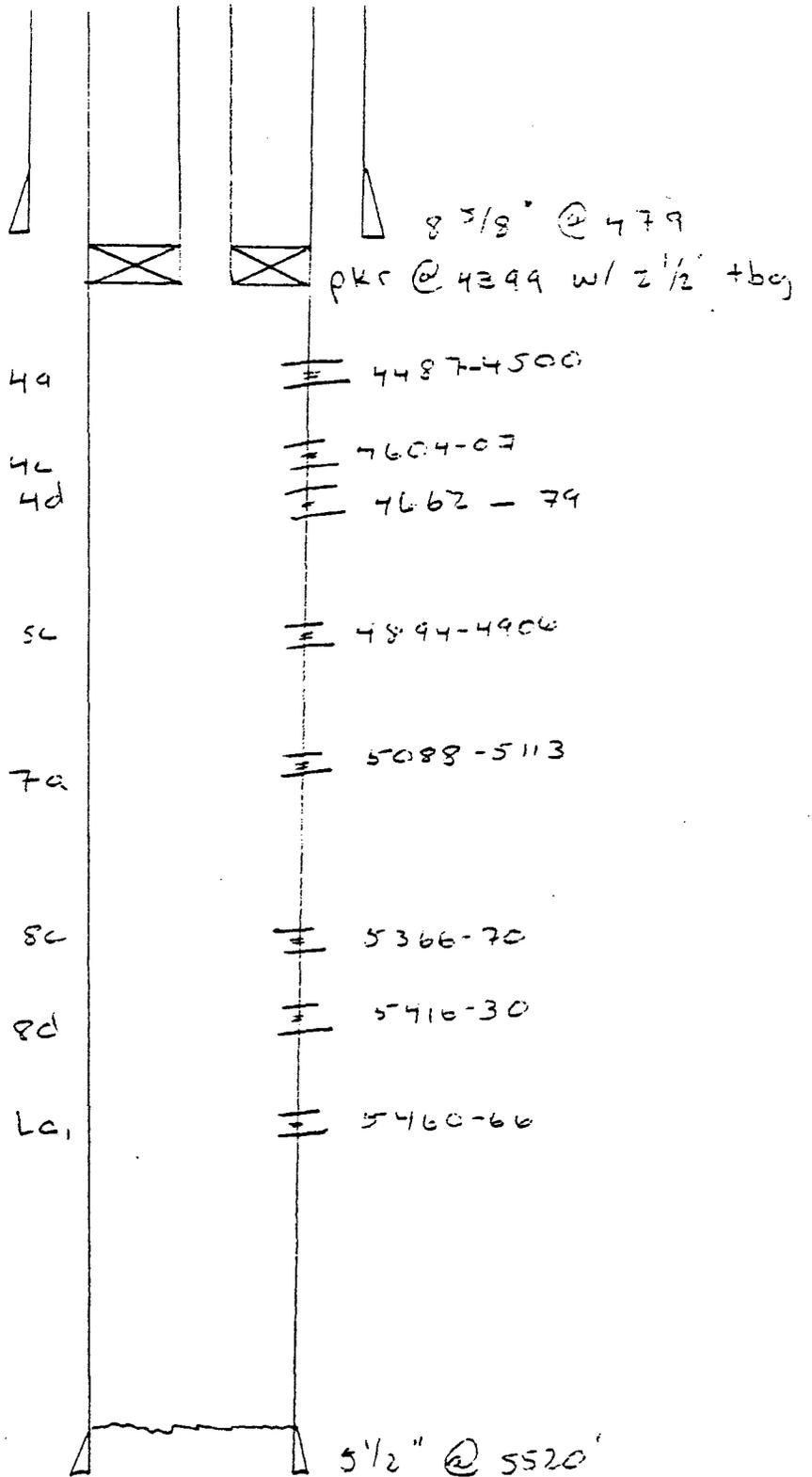
If you have any questions, feel free to contact me in this office at 405-528-2411.

Fred J. Wagner

FJW:fm

WELL NUMBER 17

ELEVATION: 5491' GL
5503' KB



PBTD :

TD :

Water produced from several Walker Hollow Unit wells- to be reinjected. Also water from Green River formation (Producing and injection formations are the same.)

SOONER CHEMICAL SPECIALTIES, INC.

P.O. Box 711 SEMINOLE, OKLAHOMA 74868 Phone (405) 382-2000
 P.O. Box 696 GRAND JUNCTION, COLORADO 81502 Phone (303) 858-9765
 P.O. Box 1436 ROOSEVELT, UTAH 84066 Phone (801) 722-3386

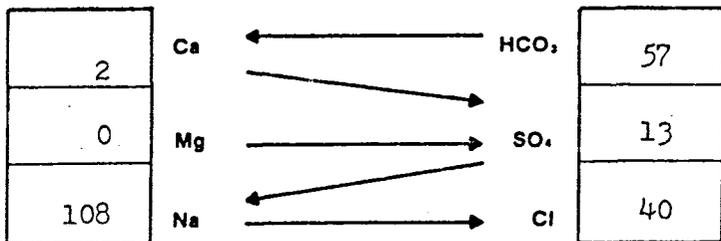
WATER ANALYSIS REPORT

COMPANY Exxon Company USA ADDRESS Vernal, Utah DATE: 7-15-83
 SOURCE # 1 FWKO DATE SAMPLED 7-14-83 ANALYSIS NO. 1148

Analysis	Mg/l (ppm)	*Meq/l
1. PH	8.2	
2. H ₂ S (Qualitative)	6.0 ppm	
3. Specific Gravity	1.0100	
4. Dissolved Solids		
5. Suspended Solids		
6. Anaerobic Bacterial Count <u>Initiated Culture</u> C/MI		
7. Methyl Orange Alkalinity (CaCO ₃)	2,840	
8. Bicarbonate (HCO ₃)	HCO ₃ 3,465	+61 57 HCO ₃
9. Chlorides (Cl)	Cl 1,416	+35.5 40 Cl
10. Sulfates (SO ₄)	SO ₄ 600	+48 13 SO ₄
11. Calcium (Ca)	Ca 38	+20 2 Ca
12. Magnesium (Mg)	Mg 4	+12.2 0 Mg
13. Total Hardness (CaCO ₃)	110	
14. Total Iron (Fe)	0.8	
15. Barium (Qualitative)	0	
16. Phosphate Residuals		

*Milli equivalents per liter

PROBABLE MINERAL COMPOSITION



Compound	Equiv. Wt.	X	Meq/l	=	Mg/l
Ca (HCO ₃) ₂	81.04		2		162
Ca SO ₄	68.07				
Ca Cl ₂	55.50				
Mg (HCO ₃) ₂	73.17				
Mg SO ₄	60.19				
Mg Cl ₂	47.62				
Na HCO ₃	84.00		55		4,620
Na ₂ SO ₄	71.03		13		923
Na Cl	58.46		40		2,338

Saturation Values	Distilled Water 20°C
Ca CO ₃	13 Mg/l
Ca SO ₄ · 2H ₂ O	2,090 Mg/l
Mg CO ₃	103 Mg/l

REMARKS _____

Water from source well- To be used as injection fluid in
4 Walker Hollow Unit wells.

LABORATORY WATER ANALYSIS

To: Exxon Company USA
Vernal, UT

Well No. Source Water (Chevron)
Legal Desc. Sec. 1-T6S-R22E
County Uintah State Utah

Date Sampled 6-3-82
Sample Location Waterflood Station
Sampled by H. Langen

Formation Green River
Depth 30'
Water B/D _____

pH 6.8
Carbon Dioxide (CO₂) 30
Dissolved Oxygen (O₂) ND
Sulfide as H₂S 0

Specific Gravity 60/60 _____
Resistivity (ohm meters) _____
Saturation Index 70°F +0.05
150°F +0.8

DISSOLVED SOLIDS

Cations	mg/l	me/l	Anions	mg/l	me/l
Calcium, Ca	<u>168</u>	<u>8</u>	Carbonate, CO ₃	<u>180</u>	<u>3</u>
Magnesium, Mg	<u>29</u>	<u>2</u>	Bicarbonate, HCO ₃	<u>500</u>	<u>10</u>
Sodium, Na	<u>138</u>	<u>6</u>	Sulfate, SO ₄	<u>110</u>	<u>3</u>
Hardness, total	<u>540</u>	<u>-</u>	Chloride, Cl	<u>-</u>	<u>-</u>
Barium, Ba	<u>0</u>	<u>-</u>			
Total Dissolved Solids, Calc.	<u>1125</u>		Iron, Total		
Total Suspended Solids			Iron, Sol.		

PROBABLE MINERAL COMPOSITION

Cations	Anions	Compound	Equiv. wt.	x meg/l	= mg/l
<u>8</u> Ca	<u>3</u> HCO ₃	Ca (HCO ₃) ₂	81.04	<u>3</u>	<u>243</u>
<u>2</u> Mg	<u>10</u> SO ₄	CaSO ₄	68.07	<u>5</u>	<u>340</u>
<u>6</u> Na	<u>3</u> CL	CaCL ₂	55.50		
		Mg (HCO ₃) ₂	73.17		
		MgSO ₄	60.19	<u>2</u>	<u>120</u>
		MgCL ₂	47.62		
		NaHCO ₃	84.00		
		NaSO ₃	71.03	<u>3</u>	<u>213</u>
		NaCL ₄	58.46	<u>3</u>	<u>175</u>

Submitted by: T. Lye

Sample of produced water; to be reinjected. Also formation water (Producing and injection formation are the same.)

SOONER CHEMICAL SPECIALTIES, INC.

P.O. Box 711 SEMINOLE, OKLAHOMA 74868 Phone (405) 382-2000
 P.O. Box 696 GRAND JUNCTION, COLORADO 81502 Phone (303) 858-9765
 P.O. Box 1436 ROOSEVELT, UTAH 84066 Phone (801) 722-3386

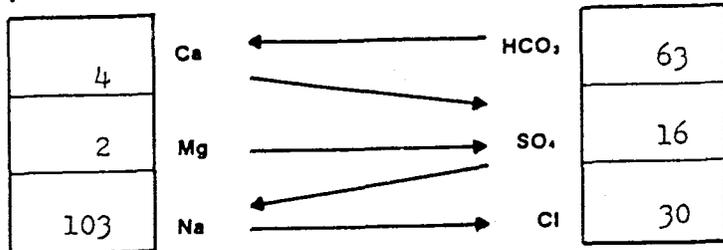
WATER ANALYSIS REPORT

COMPANY Exxon Company USA ADDRESS Vernal, Utah DATE: 7-15-83
 SOURCE Walker Hollow Unit # 3 DATE SAMPLED 7-14-83 ANALYSIS NO. 1150

Analysis	Mg/l (ppm)	*Meq/l
1. PH	<u>7.6</u>	
2. H ₂ S (Qualitative)	<u>2.5 ppm</u>	
3. Specific Gravity	<u>1.0050</u>	
4. Dissolved Solids		
5. Suspended Solids		
6. Anaerobic Bacterial Count	<u>100-999</u> C/MI	
7. Methyl Orange Alkalinity (CaCO ₃)	<u>3,160</u>	
8. Bicarbonate (HCO ₃)	<u>3,855</u> ÷61 <u>63</u> HCO ₃	
9. Chlorides (Cl)	<u>1,062</u> ÷35.5 <u>30</u> Cl	
10. Sulfates (SO ₄)	<u>750</u> ÷48 <u>16</u> SO ₄	
11. Calcium (Ca)	<u>78</u> ÷20 <u>4</u> Ca	
12. Magnesium (Mg)	<u>26</u> ÷12.2 <u>2</u> Mg	
13. Total Hardness (CaCO ₃)	<u>300</u>	
14. Total Iron (Fe)	<u>0.2</u>	
15. Barium (Qualitative)	<u>0</u>	
16. Phosphate Residuals		

*Milli equivalents per liter

PROBABLE MINERAL COMPOSITION



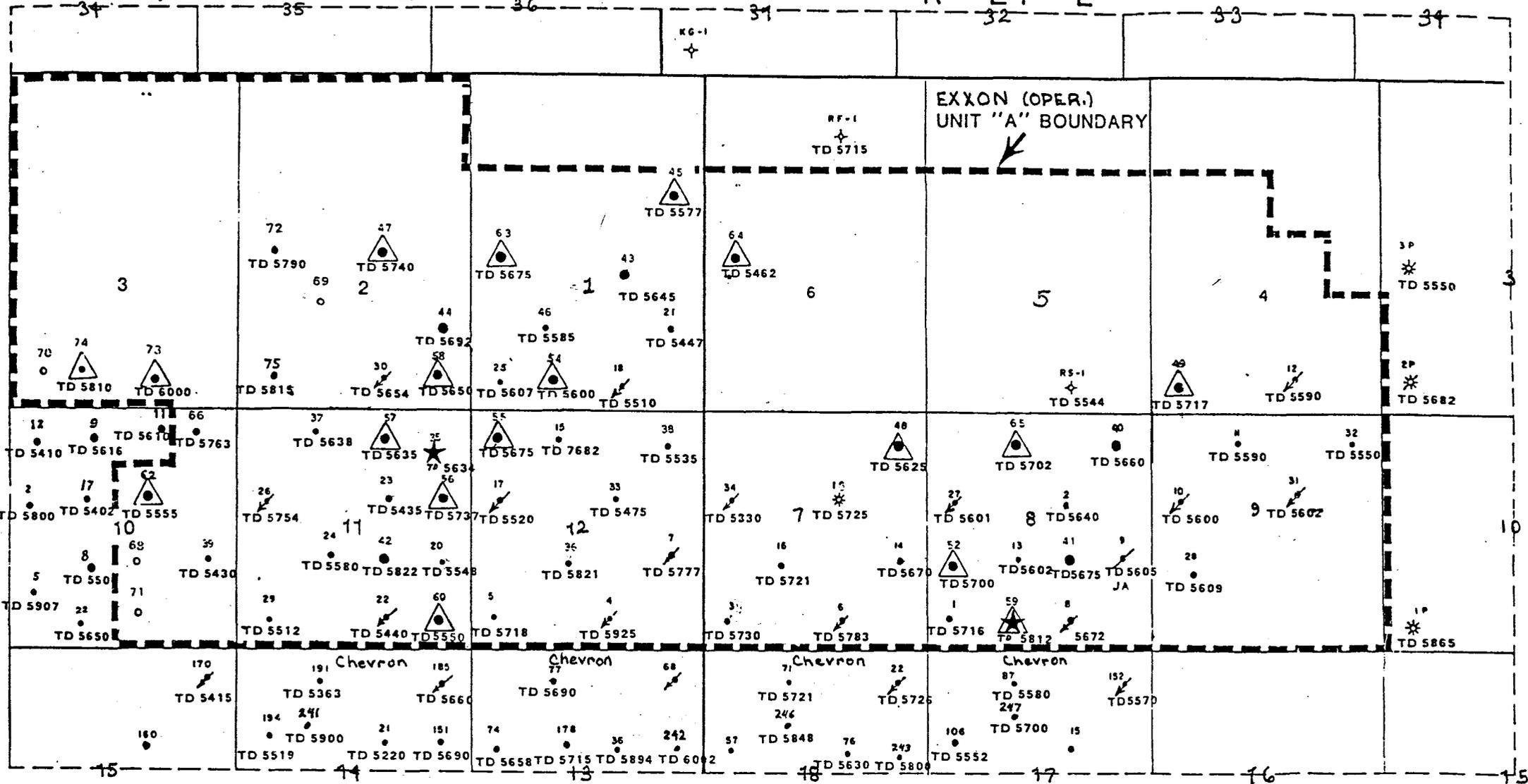
Saturation Values	Distilled Water 20°C
Ca CO ₃	13 Mg/l
Ca SO ₄ · 2H ₂ O	2,090 Mg/l
Mg CO ₃	103 Mg/l

Compound	Equiv. Wt.	X	Meq/l	=	Mg/l
Ca (HCO ₃) ₂	81.04		<u>4</u>		<u>324</u>
Ca SO ₄	68.07				
Ca Cl ₂	55.50				
Mg (HCO ₃) ₂	73.17		<u>2</u>		<u>146</u>
Mg SO ₄	60.19				
Mg Cl ₂	47.62				
Na HCO ₃	84.00		<u>57</u>		<u>4,788</u>
Na ₂ SO ₄	71.03		<u>16</u>		<u>1,136</u>
Na Cl	58.46		<u>30</u>		<u>1,754</u>

REMARKS _____

R 23 E

R 24 E



RED WASH FIELD - WALKER HOLLOW UNIT
 UTAH COUNTY, UTAH

- Producing Well
- ⚡ Injection Well
- ★ Proposed Injection Well

SCALE: 0 3000'

STATE OF UTAH
 DIVISION OF OIL, GAS, AND MINING
 ROOM 4241 STATE OFFICE BUILDING
 SALT LAKE CITY, UTAH 84114
 (801) 533-5771
 (RULE I-5 & RULE I-4)

FORM NO. DOGM-UIC-1
 (Revised 1982)

IN THE MATTER OF THE APPLICATION OF
Exxon Corporation
 ADDRESS P. O. Box 1600
Midland, TX ZIP 79702
 INDIVIDUAL PARTNERSHIP CORPORATION X
 FOR ADMINISTRATIVE APPROVAL TO DISPOSE OR
 INJECT FLUID INTO THE Walker Hollow #17 WELL
 SEC. 12 TWP. 7S RANGE 23E
Uintah COUNTY, UTAH

CAUSE NO. _____

ENHANCED RECOVERY INJ. WELL	<input checked="" type="checkbox"/>
DISPOSAL WELL	<input type="checkbox"/>
LP GAS STORAGE	<input type="checkbox"/>
EXISTING WELL (RULE I-4)	<input type="checkbox"/>

APPLICATION

Comes now the applicant and shows the Corporation Commission the following:

1. That Rule I-5 (g) (iv) authorizes administrative approval of enhanced recovery injections, disposal or LP Gas storage operations.
2. That the applicant submits the following information.

Lease Name <u>Walker Hollow Unit</u>	Well No. <u>17</u>	Field <u>Walker Hollow</u>	County <u>Uintah</u>
Location of Enhanced Recovery Injection or Disposal Well <u>NW/4</u> Sec. <u>12</u> Twp. <u>7S</u> Rge. <u>23E</u>			
New Well To Be Drilled Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Old Well To Be Converted - Existing Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Injector	Casing Test Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u>N/A</u>	
Depth-Base Lowest Known Fresh Water Within 1/2 Mile <u>Unknown</u>	Does Injection Zone Contain Oil-Gas-Fresh Water Within 1/2 Mile YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State What Oil	
Location of Injection Source(s) <u>Walker Hollow Unit Production</u>	Geologic Name(s) and Depth of Source(s) <u>Green River 5000'</u>		
Geologic Name of Injection Zone <u>Green River</u>	Depth of Injection Interval <u>4487'</u> to <u>5466'</u>		
a. Top of the Perforated Interval: <u>4487'</u>	b. Base of Fresh Water: <u>Shallower than 300'</u>	c. Intervening Thickness (a minus b) <u>Unknown</u>	
Is the intervening thickness sufficient to show fresh water will be protected without additional data? [YES] NO			
Lithology of Intervening Zones <u>Shale and Sandstone</u>			
Injection Rates and Pressures Maximum <u>2500</u> B/D <u>2500</u> PSI			
The Names and Addresses of Those to Whom Notice of Application Should be Sent. <u>Not required for existing wells</u>			

State of Texas

W. H. Crause for J. H. Lytle
 Applicant

County of Midland

Before me, the undersigned authority, on this day personally appeared W. H. Crause
 known to me to be the person whose name is subscribed to the above instrument, who being by me duly sworn on
 oath states, that he is duly authorized to make the above report and that he has knowledge of the facts stated
 therein, and that said report is true and correct.

Suscribed and sworn to before me this 6th day of October 19 83

SEAL

Judith R. [Signature]

My commission expires 11-10-84

Notary Public in and for Midland Co., Texas

(OVER)

INSTRUCTIONS

1. Attach qualitative and quantitative analysis of representative sample of water to be injected and a qualitative and quantitative analysis of the injection formation of water.
2. Attach plat showing subject well and all known oil and gas wells, abandoned, drilling and dry holes within one-half mile, together and with the name of the operator(s).
3. Attach Drillers Log (Form DOGM-UIC-2). (Appropriate Surety must be on file with Conservation Division or appropriate government agencies.)
4. Attach Electric or Radioactivity Log of Subject well (if released).
5. Attach schematic drawing of subsurface facilities including; Size, setting depth, amount of cement used measured or calculated tops of cement surface, intermediate (if any) and production casings; size and setting depth of tubing; type and setting depth of packer; geologic name of injection zone showing top and bottom of injection interval.
6. If the application is for a NEW well the original and six (6) copies of the application and three (3) complete sets of attachments shall be mailed to the Division. For EXISTING well applications (Rule I-4) only ONE copy of the application and ONE complete set of attachments are required to be mailed to the Division.
7. The Division is required to send notice of application to the surface owner of the land within one-half mile of the injection well and to each operator of a producing leasehold within one-half mile of the injection well. List all required names and addresses in the appropriate space provided on the front of this form.
8. Notice that an application has been filed shall be published by the Division in a newspaper of general circulation in the county of publication before the application is approved. The notice shall include the name and address of applicant, location of proposed injection or disposal well, injection zone, injection pressure and volume. If no written objection is received within 15 days from date of publication the application may be approved administratively.
9. A well shall not be used for injection or disposal unless completed machine accounting Form DOGM-UIC-3b is filed by January 31st each year.
10. Approval of this application, if granted, is valid only as long as there is no substantial change in the operations set forth in the application. A substantial operation change requires the approval of a new application.
11. If there is less intervening thickness required by Rule I-5 (b) 4, attach sworn evidence and data.
12. For enhanced recovery projects, information required by Rule I-4 which is common to more than one well, need be reported only once on the application.

CASING AND TUBING DATA

NAME OF STRING	SIZE	SETTING DEPTH	SACKS CEMENT	TOP OF CEMENT	TOP DETERMINED BY
Surface	8-5/8"	460'	350	Surface	Circulation
Intermediate					
Production	5-1/2"	5520'	365	3700'	Calculation
Tubing	2-7/8"	4800'	Name - Type - Depth of Tubing Packer Baker Model "A" @ 4800'		
Total Depth 5520'	Geologic Name - Inj. Zone Green River	Depth - Top of Inj. Interval 4487'	Depth - Base of Inj. Interval 5466'		

NOTE: THIS FORM MUST BE FILED WITH THE STATE ARCHIVES AND THE STATE ARCHIVES MUST BE FILED WITH THIS FORM.

PLEASE TYPE OR USE BLACK INK ONLY

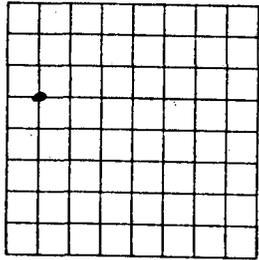
(To be filed within 30 days after drilling is completed)

DEPARTMENT OF NATURAL RESOURCES AND ENERGY

COUNTY LEASE NO.

DIVISION OF OIL, GAS, AND MINING
Room 4241 State Office Building
Salt Lake City, Utah 84114

API NO. _____
640 Acres
N



S
Locate Well Correctly
and Outline Lease

COUNTY Uintah SEC. 12 TWP. 7S RGE. 23E

COMPANY OPERATING Exxon Corporation

OFFICE ADDRESS P. O. Box 1600

TOWN Midland, STATE ZIP TX 79702

FARM NAME Walker Hollow WELL NO. #17

DRILLING STARTED 6-17 19 62 DRILLING FINISHED 7-9 19 62

DATE OF FIRST PRODUCTION _____ COMPLETED 10-4-62

WELL LOCATED SE ¼ SW ¼ NW ¼

3300 FT. FROM SE OF ¼ SEC. & 660 FT. FROM WL OF ¼ SEC.

ELEVATION DERRICK FLOOR _____ GROUND 5491

TYPE COMPLETION

Single Zone _____ X

Multiple Zone _____

Comingled _____

LOCATION EXCEPTION

OIL OR GAS ZONES

Name	From	To	Name	From	To

CASING & CEMENT

Casing Set				Csg. Test	Cement		
Size	Wgt.	Grade	Feet	Psi	Sax	Fillup	Top
8-5/8"	24#	J-55	460	350			Surface
5-1/2"	14/15.5	J-55	5520	365			3700

TOTAL DEPTH 5520

PACKERS SET

DEPTH Baker Model "A" @ 4800

NOTE: THIS FORM MUST ALSO BE ATTACHED WHEN FILING PLUGGING FORM DOGM-UIC-6

COMPLETION & TEST DATA BY PRODUCING FORMATION

FORMATION	1	2	3
FORMATION	Green River		
SPACING & SPACING ORDER NO.			
CLASSIFICATION (DISPOSAL WELL, ENHANCED RECOVERY, LP GAS STORAGE)	Enhanced Recovery		
PERFORATED	4487-5466		
INTERVALS			
ACIDIZED?			
FRACTURE TREATED?	Sand Frac		

INITIAL TEST DATA

Date	10/4/62		
Oil, bbl./day	314		
Oil Gravity	27		
Gas, Cu. Ft./day	55	CF	CF
Gas-Oil Ratio Cu. Ft./Bbl.	175		
Water-Bbl./day	4		
Pumping or Flowing	Flowing		
CHOKE SIZE			
FLOW TUBING PRESSURE	70#		

A record of the formations drilled through, and pertinent remarks are presented on the reverse.
(use reverse side)

I, the undersigned, being first duly sworn upon oath, state that this well record is true, correct and complete according to the records of this office and to the best of my knowledge and belief.

Original signed by

Telephone _____ B. M. Bradley for H. L. Harris, 9/7/62

Name and title of representative of company

Subscribed and sworn before me this _____ day of _____, 19 _____

FIELD

Walker Allow Unit

WEL WHU # 17

ELEVATIONS: KB 5503' (GL-SY91) (Sec 12; T7S, R23E)

W/O OBJECTIVE:

TBG	SIZE	WT	ORDE	CLPSE*	BRST*	TEN*
Csg	5 1/2"	14#	J-55	2378	3254	—
Csg	5 1/2"	15.5#	J-55	3,079	3,666	—
Tbg	2 7/8"	6.5	J-55	5854	5,533	55,400.

1.372 SF
1.512 SF
1.8 SF

1.125 SF.

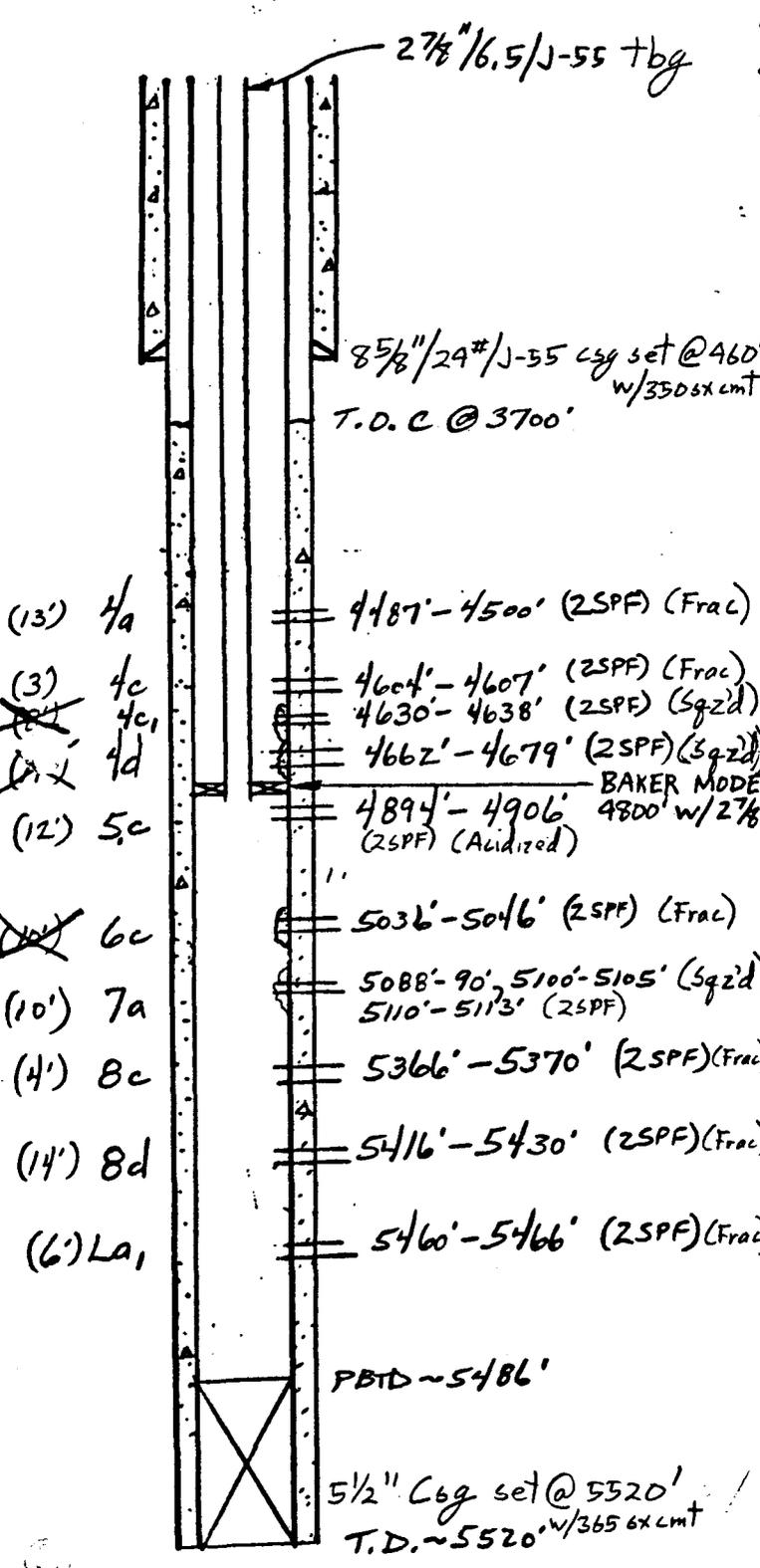
*(API)

WORKOVER HISTORY:

- 8/62 - INITIAL CONIP.
- 10/62 - SQZ 4c₁ gas prod 314 Ed/4F.1
- 12/65 - PARAFFIN SOLVENT JOB 98/16
- 5/69 - CONVERT TO WIW 1250 DWID
- 9/72 - SQZ 6c, PERF 7a, PERF 5c
- 9/79 - ACD TO INCREASE INJ.
- 1/82 - Several attempts to sqz 4c₁ zone unsuccessful. Accidentally sqz'd 5c, 7a, 8c, 8d, & La₁ zone. Reperforated and acidized 5c, 8c, 8d & La₁ zone. Ran injectivity profile A PKR@ TBG.
- 1-83 - Current inj. rate is 687 BWPD @ 1775 psi. This well is not a dual gas producer/ WIW.

ADDITIONAL INFORMATION:

- 1) Permit #
 - 2) Vol & pressure limitations:
 - 3) The 4c₁ zone was sqz'd in 1962 with 75sx cmt. In 1982, four attempts were made to resqz' the 4c₁ zone (50sx each attempt) unsuccessfully.
 - 4) The 4d zone was sqz'd in 1972 w/ 30sx Class C cmt. Tested to 3000psi.
 - 5) The 7a zone was unintentionally sqz'd during 1982 workover. Zone swabbed dry.
- | | | |
|--|-------------------------------------|--|
| YES | NO | |
| 6) <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does well have opening with valve to annulus? Is it kept closed? |
| 7) <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does well have inj. pres. connection? |
| 8) <input type="checkbox"/> | <input checked="" type="checkbox"/> | Does well have an inhibited packer fluid containing a bactericide & corrosion inhibitor? |



Cement bond between casing and formation is adequate.

JEA 2/7/83

ER

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE
(Obtain instructions on reverse side)

Form approved. 046
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.
SLC-066357

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Walker Hollow

8. FARM OR LEASE NAME
Walker Hollow Unit

9. WELL NO.
17

10. FIELD AND POOL, OR WILDCAT
Walker Hollow

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 12, T7S-R23E

12. COUNTY OR PARISH
Uintah

13. STATE
Utah

RECEIVED
OCT 26 1987

**DIVISION OF
OIL, GAS & MINING**

1. OIL WELL GAS WELL OTHER Injector

2. NAME OF OPERATOR
Exxon Corp. Attn: Permits Supervisor

3. ADDRESS OF OPERATOR
P. O. Box 1600, Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1980' FNL and 660' FWL of Sec. 12, (SWNE)

14. PERMIT NO. 15567
43-047-05566

15. ELEVATIONS (Show whether DF, ST, OR, etc.)
Kb-5503

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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) _____	

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

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

9-23-87 MIRU well service unit.
Cleaned well out to 5,485'.
Treated existing Green River perforations with 2375 gals. of Well Chem's Well Aid 360 and Supersoll 50/50 mixture.
Added perforations at 2 spf in the following intervals: 4517'-4525', 4551'-4564', 4584'-4590', 4663'-4680', 4780'-4788', 4793'-4797', 4880'-4884', 4928'-4931', 5036'-5044', 5062'-5067', 5098'-5104', 5110'-5113', 5138'-5152', 5158'-5166', 5360'-5365'.
Acidized with 7700 gals. 15% HCL.
R.I.H. 2 7/8" tubing and set packer at 4410'.
Put well back on injection 10-3-87.

10-19-87 FRW Injection Test: 809 Bbls. at 500 psi in 24 hours.

in wells

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

SIGNED David A. Murray TITLE Permits Supervisor DATE 10-22-87
David A. Murray

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SLC 066357

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

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

RECEIVED
APR 02 1990

1. OIL WELL GAS WELL OTHER injection well

7. UNIT AGREEMENT NAME
Walker Hollow Unit

2. NAME OF OPERATOR
Exxon Corporation Attn: Permits Supervisor

8. FARM OR LEASE NAME
Walker Hollow Unit

3. ADDRESS OF OPERATOR
P.O. Box 1600, Midland TX 79702

9. WELL NO.

17

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

10. FIELD AND POOL, OR WILDLAND

Walker Hollow

1980' FNL & 660' FWL of Sec.

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

Sec. 12, T7S, R23E

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, HT, GR, etc.)

43-047-15567

5503 KB

12. COUNTY OR PARISH 13. STATE

Uintah

UT

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANE

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

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(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.)*

2-20-90 A 2" steel injection line failed due to internal corrosion and pressure. The problem was remedied by welding in new pipe. 50 bbls of produced water were lost on wash and grassland. The spill was picked up by vacuum truck and covered.

No surface water was affected.

A sketch and details of the incident are attached.

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

SIGNED Stephen Johnson TITLE Administrative Specialist DATE 3-28-90

(This space for Federal or State office use) (915) 688-7548

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

*See Instructions on Reverse Side

RECEIVED

SOUTHWESTERN DIVISION SPILL REPORT
APR 02 1990

DATE OF SPILL 2-20-90

DRLG/OPER Southwest Rocky Div. DIVISION OF OIL, GAS & MINING SPCC PLAN _____
 FIELD Walker Hollow COUNTY AND STATE UTAH COUNTY, UT.
 LEASE W.H. d. #17 Injection BLOCK _____ SURVEY _____
 FACILITY Water Flood SECTION 11 TOWNSHIP 7S RANGE 23E
 (SHOW WELL NO., TANK BATTERY NO., OR SYSTEM) _____
 ITEM THAT FAILED 2" Injection Line
 CAUSE OF FAILURE Pipe aging bad plus Pressure
 TYPE OF MATERIAL steel
 HOW WAS PROBLEM REMEDIED? Welded new pipe in place & WRAPPED

(EXAMPLE: REPAIRED PIPE, REPLACED FLOWLINE, REPLACED PACKING, MODIFIED PROCEDURE, INSTALLED EQUIPMENT, ETC)
 BARRELS OF OIL SPILLED 0 OIL RECOVERED 0
 BARRELS OF S.W. SPILLED 50 BBLs SW RECOVERED 0
 OTHER SUBSTANCES EMITTED 0 APPROX. AMOUNT N/A

(EXAMPLE: GASES, SMOKE)
 CHEMICAL SPILLS: DESCRIPTION N/A
 AMOUNT SPILLED N/A AMOUNT RECOVERED N/A
 TYPE OF LAND AFFECTED Wash grassland AREA COVERED 2' x 1/2 mile
 (EXAMPLE: CULTIVATED, RANGE, BRUSH, FOREST)

HOW WAS SPILL CLEANED UP? covered & vacuum truck where possible - clean water
 (EXAMPLE: PICKED UP, COVERED, BURIED, BURNED, REMOVED TO DISPOSAL)

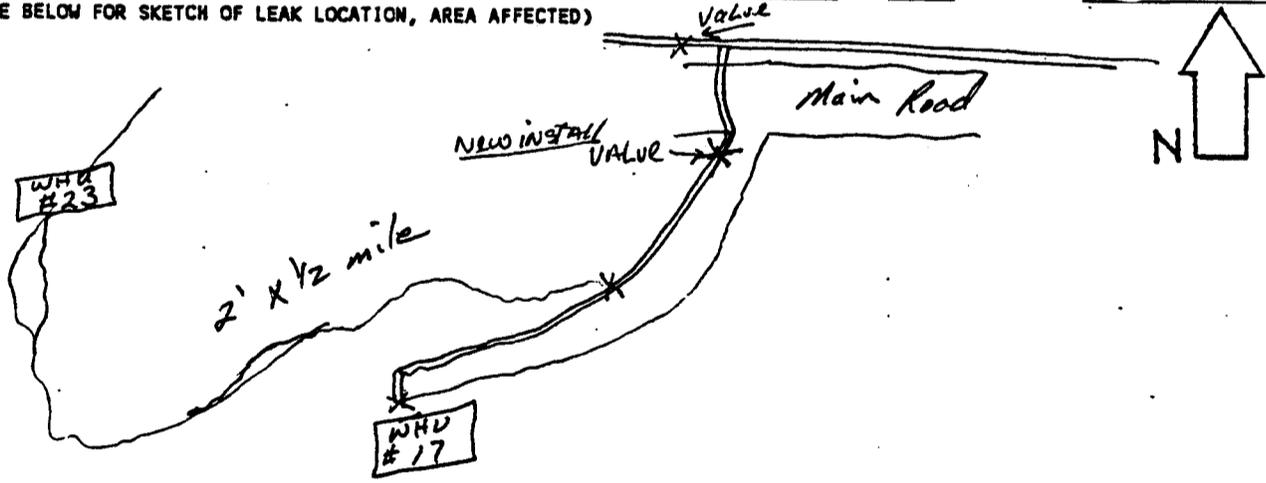
HOW WAS CONTAMINATED MATERIAL DISPOSED OF? N/A
 DISPOSAL NAME/LOCATION N/A
 WAS SURFACE WATER AFFECTED? No IF YES, IDENTIFY N/A
 (NAME OF CREEK, RIVER OR LAKE)

WAS FEDERAL RESPONSE CENTER NOTIFIED? No IF NOT, WHY? clean Prod Water
 (PRIVATE POND, PLAYA LAKE, ETC)

AGENCY NOTIFIED	PERSON NOTIFIED	TIME	DATE
<u>BLM</u>	<u>E J Boudreaux Jr</u>	<u>8:30 AM</u>	<u>2-23-90</u>

LANDOWNER OR TENANT NAME BLM ADDRESS 170 S 500 East Vernal, UT.
 DOES HE KNOW OF SPILL? Yes, E J Boudreaux Jr. MADE CLAIM? WRITTEN NOTICE & Verbal
 IF OUTSIDER CAUSED SPILL, GIVE N/A (NAME) (ADDRESS)

COST: REPAIRS \$ _____ CLEAN UP \$ _____ OIL LOSS \$ _____ TOTAL \$ _____
 (USE SPACE BELOW FOR SKETCH OF LEAK LOCATION, AREA AFFECTED)



RECOMMENDATIONS/COMMENTS INSTALL block valve on Line at Jnt To better control future leaks. We are chking welds on ins line. for erosion on one Repairing & RWRAP as needed.

REPORTED BY Doug Frost Sr. Relief Operator 2-20-90
 (NAME) (TITLE) (DATE)
AC Barrauday 2-21-90
 (FIELD SUPT) (DATE) (OP SUPT) (DATE) (OPER/DRLG MGR) (DATE)
RBB

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO.
SLC 066357

SUNDRY NOTICES AND REPORTS ON WELLS

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

APR 02 1990

1. OIL WELL GAS WELL OTHER injection well

2. NAME OF OPERATOR Exxon Corporation Attn: Permits Supervisor

3. ADDRESS OF OPERATOR P.O. Box 1600, Midland TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1980' FNL & 660' FWL of Sec.

14. PERMIT NO. 43-047-15567

15. ELEVATIONS (Show whether DF, ST, OR, etc.) 5503 KB

INDIAN, ALLOTTEE OR TRIBE NAME

6. UNIT AGREEMENT NAME Walker Hollow Unit

7. FARM OR LEASE NAME Walker Hollow Unit

8. WELL NO. 17

10. FIELD AND POOL, OR WITHIN Walker Hollow

11. SEC., T., S., N., OR BLK. AND SURVEY OR AREA Sec. 12, T7S, R23E

12. COUNTY OR PARISH Uintah

13. STATE UT

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 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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) Spill Report	

(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.)

2-18-90 A 2" steel injection line failed due to internal corrosion and pressure. The problem was remedied by welding in new pipe. 5 bbls of produced water were lost on wash and grassland. The spill was picked up by vacuum truck and covered.

No surface water was affected.

A sketch and details of the incident are attached.

UIC
GLH ✓
DJJ ✓
BGH
COMPUTER
MICROFILM
FILE

OIL AND GAS	
DRN	RNF
JRB	1 - GLH ✓
DTS	SLS
2 - JLT ✓	
3 - TAS	
4 - MICROFILM	
5 - FILE	

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

SIGNED Stephen Johnson TITLE Administrative Specialist DATE 3-28-90

(This space for Federal or State office use) (915) 688-7548

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED
SOUTHWESTERN DIVISION SPILL REPORT
APR 02 1990

DATE OF SPILL 2-18-90

DRLG/OPER Southwest Division SPCC PLAN _____
FIELD Walker Hollow DIVISION OF _____ COUNTY AND STATE Uintah County, UT
LEASE W.H.U. #17 Injection OIL, GAS & MINING _____ SURVEY _____
FACILITY Water Flood SECTION 12 TOWNSHIP 7S RANGE 23E

(SHOW WELL NO., TANK BATTERY NO., OR SYSTEM)

ITEM THAT FAILED 2" Injection Line
CAUSE OF FAILURE Deterioration of Pipe plus Pressure.
TYPE OF MATERIAL Steel
HOW WAS PROBLEM REMEDIED? cut out bad pipe replaced with new pipe

(EXAMPLE: REPAIRED PIPE, REPLACED FLOWLINE, REPLACED PACKING, MODIFIED PROCEDURE, INSTALLED EQUIPMENT, ETC)

BARRELS OF OIL SPILLED 0 OIL RECOVERED 0
BARRELS OF S.W. SPILLED 4-5 BBL'S SW RECOVERED 0
OTHER SUBSTANCES EMITTED 0 APPROX. AMOUNT N/A

(EXAMPLE: GASES, SMOKE)

CHEMICAL SPILLS: DESCRIPTION N/A
AMOUNT SPILLED 0 AMOUNT RECOVERED N/A
TYPE OF LAND AFFECTED Wash, grassland AREA COVERED 10'x10' then 12" x 10'

(EXAMPLE: CULTIVATED, RANGE, BRUSH, FOREST)

HOW WAS SPILL CLEANED UP? vacuum truck as needed & covered - clean water
(EXAMPLE: PICKED UP, COVERED, BURIED, BURNED, REMOVED TO DISPOSAL)

HOW WAS CONTAMINATED MATERIAL DISPOSED OF? N/A

DISPOSAL NAME/LOCATION N/A

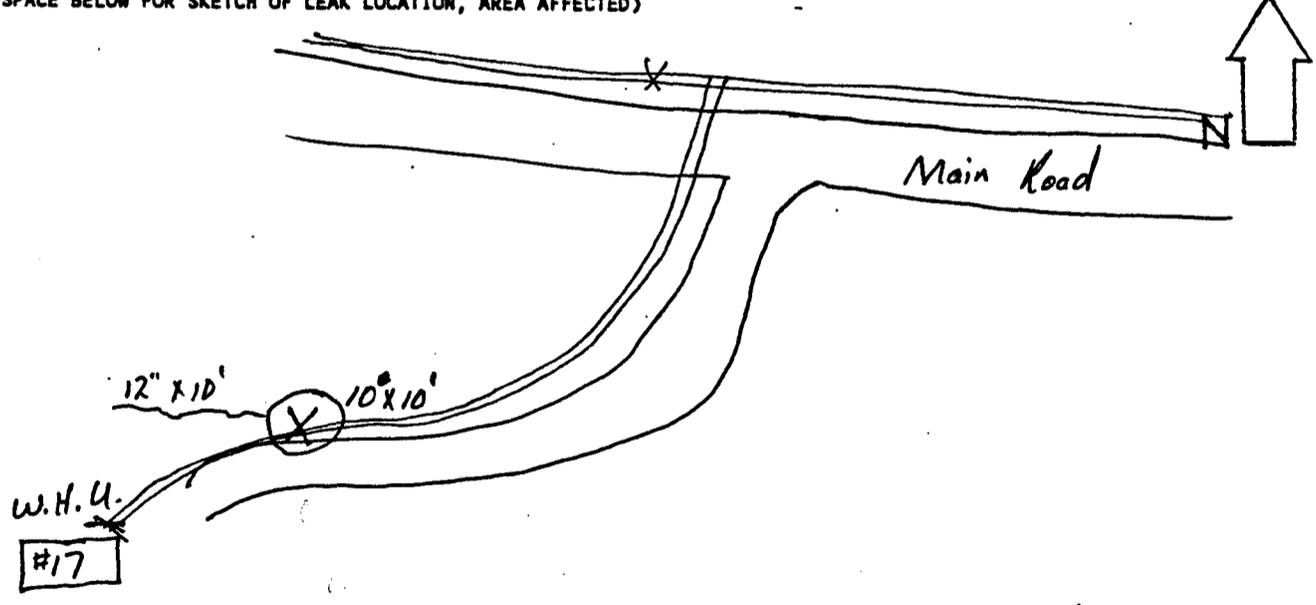
WAS SURFACE WATER AFFECTED? No IF YES, IDENTIFY _____

WAS FEDERAL RESPONSE CENTER NOTIFIED? No IF NOT, WHY? clean Prod. Water
(PRIVATE POND, PLAYA LAKE, ETC)

AGENCY NOTIFIED	PERSON NOTIFIED	TIME	DATE
<u>BLM</u>	<u>E.J. Boudreaux Jr</u>	<u>8:30AM</u>	<u>2-23-90</u>

LANDOWNER OR TENANT NAME BLM ADDRESS 170 S 500 E, Vernal, UT. 84078
DOES HE KNOW OF SPILL? YES, E.J. Boudreaux Jr. MADE CLAIM? WRITTEN & VERBAL NOTICE
IF OUTSIDER CAUSED SPILL, GIVE N/A

COST: REPAIRS \$ _____ CLEAN UP \$ _____ OIL LOSS \$ _____ TOTAL \$ _____
(USE SPACE BELOW FOR SKETCH OF LEAK LOCATION, AREA AFFECTED)



RECOMMENDATIONS/COMMENTS _____

REPORTED BY Doug Frost Sr. Relief Operator 2-18-90
(NAME) (TITLE) (DATE)
R.C. Boudreaux 2-21-90
(FIELD SUPT) (DATE) (OPER/DRLG MGR) (DATE)
RBB (DATE)

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO. SLC-066357
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME Walker Hollow Unit
8. FARM OR LEASE NAME Walker Hollow Unit
9. WELL NO. 17
10. FIELD AND POOL, OR WILDCAT Green River
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12 - 7S - 23E
12. COUNTY OR PARISH Unintah
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

2. NAME OF OPERATOR
Exxon Corp. Attn: Sharon B. Timlin

3. ADDRESS OF OPERATOR
P. O. Box 1600, Midland, TX 79702 915-688-7509

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

1980' FNL and 660' FWL of Sec. 12

14. PERMIT NO. 43-047-15367-05586 15. ELEVATIONS (Show whether DF, RT, OR, etc.) Wll

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>Mechanical Integrity Test</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.)*

2-21-91 well tested, witnessed by Gus Stoltz
beginning 427#
ending 422#

RECEIVED

MAR 11 1991

DIVISION OF
OIL GAS & MINING

18. I hereby certify that the foregoing is true and correct
SIGNED Sharon B. Timlin TITLE Staff Office Assistant DATE 3-6-91

(This space for Federal or State office use)

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other **WATER INJECTION**

2. Name of Operator

EXXON CORPORATION ATTN: REGULATORY AFFAIRS

3. Address and Telephone No.

P. O. BOX 1600 MIDLAND, TX 79702 (915) 688-7509

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SEC. 8-7S-24E SW SW

12 23

5. Lease Designation and Serial No.

U-02512

6. If Indian, Allottee or Tribe Name

UTE

7. If Unit or CA, Agreement Designation

8. Well Name and No.

WALKER HOLLOW UNIT

17

9. API Well No.

4304705586

15567

10. Field and Pool, or Exploratory Area

WALKER HOLLOW

11. County or Parish, State

UINTAH

UT

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

TYPE OF SUBMISSION

- Notice of Intent
- Subsequent Report
- Final Abandonment Notice

TYPE OF ACTION

- Abandonment
- Recompletion
- Plugging Back
- Casing Repair
- Altering Casing
- Other
- Change of Plans
- New Construction
- Non-Routine Fracturing
- Water Shut-Off
- Conversion to Injection

RESET PACKER

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

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

FILED TO SHOW CURRENT PACKER DEPTH OF 4422

RECEIVED

JAN 21 1992

DIVISION OF
OIL GAS & MINING

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

Signed *Sharon B. Timlin*

Sharon B. Timlin
Title **Sr. staff office assistant**

Date **12/09/91**

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other **INJECTION LINE.**

2. Name of Operator

EXXON CORPORATION ATTN: REGULATORY AFFAIRS

3. Address and Telephone No.

P. O. BOX 1600 MIDLAND, TX 79702 (915) 688-6748

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SWNW, SECTION 12, T7S-R23E

5. Lease Designation and Serial No.

SLC-0066357

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

WALKER HOLLOW (GREEN RIVER) UNIT 17

9. API Well No.

4304705586 15567

10. Field and Pool, or Exploratory Area

WALKER HOLLOW

11. County or Parish, State

UINTAH UT

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

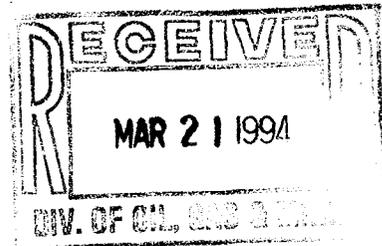
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection

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

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

ON MARCH 10, 1994, 282 BARRELS OF PRODUCED WATER WERE RELEASED AT THE FACILITY REFERENCED ABOVE.

THE RELEASE WAS DUE TO CORROSION AND PRESSURE ON AN INJECTION LINE. APPROXIMATELY 200 BARRELS OF PRODUCED WATER HAVE BEEN RECOVERED. THE INJECTION LINE HAS BEEN REPAIRED.



UTAH BOARD OF OIL, GAS & MINING

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

Signed Sally R. Urby

Title Sally R. Urby Staff Office Assistant

Date 03/15/94

(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval, if any:

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other **INJECTION LINE.**

2. Name of Operator
EXXON CORPORATION ATTN: REGULATORY AFFAIRS

3. Address and Telephone No.
P. O. BOX 1600 MIDLAND, TX 79702 (915) 688-6748

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SWNW, SECTION 12, T7S-R23E

5. Lease Designation and Serial No.

SLC-0066357

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
WALKER HOLLOW (GREEN RIVER) UNIT 17

9. API Well No.
4304705586

10. Field and Pool, or Exploratory Area
WALKER HOLLOW

11. County or Parish, State
UINTAH UT

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

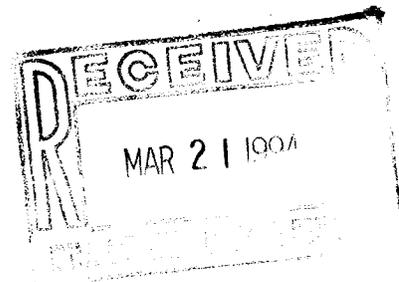
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection

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

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

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THE RELEASE WAS DUE TO CORROSION AND PRESSURE ON AN INJECTION LINE. APPROXIMATELY 200 BARRELS OF PRODUCED WATER HAVE BEEN RECOVERED. THE INJECTION LINE HAS BEEN REPAIRED.



C: UTAH BOARD OF OIL, GAS & MINING

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

Signed Sally R. Urby

Title Sally R. Urby Staff Office Assistant

Date 03/15/94

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____ Date _____

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. Lease Designation and Serial No.

SLC-0066357

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**WALKER HOLLOW (GREEN RIVER) UNIT
17**

9. API Well No.

4304705586

10. Field and Pool, or Exploratory Area

WALKER HOLLOW

11. County or Parish, State

UINTAH UT

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other **INJECTION LINE.**

2. Name of Operator

EXXON CORPORATION ATTN: REGULATORY AFFAIRS

3. Address and Telephone No.

P. O. BOX 1600 MIDLAND, TX 79702 (915) 688-6748

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SWNW, SECTION 12, T7S-R23E

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

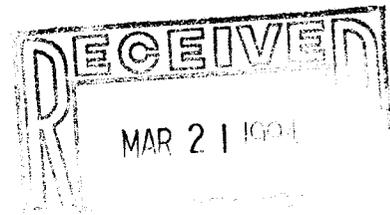
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection

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

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

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THE RELEASE WAS DUE TO CORROSION AND PRESSURE ON AN INJECTION LINE. APPROXIMATELY 200 BARRELS OF PRODUCED WATER HAVE BEEN RECOVERED. THE INJECTION LINE HAS BEEN REPAIRED.



C: UTAH BOARD OF OIL, GAS & MINING

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

Signed Sally R. Urby

Title Sally R. Urby
Staff Office Assistant

Date 03/15/94

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____ Date _____

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

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

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

	5. Lease Designation and Serial Number: SLC-0066357
	6. If Indian, Allottee or Tribe Name:
	7. Unit Agreement Name: Walker Hollow (Green River)
1. Type of Well: OIL <input type="checkbox"/> GAS <input type="checkbox"/> OTHER: Injection line	8. Well Name and Number: Unit Walker Hollow #17
2. Name of Operator: Exxon Corporation	9. API Well Number: 43-047-05586 15567
3. Address and Telephone Number: P.O. Box 1600, Midland, TX 79702	10. Field and Pool, or Wildcat: Walker Hollow
4. Location of Well Footages: QQ, Sec., T., R., M.: SWNW, Section 12, T-7S-R23E	County: Uintah State: Utah

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

NOTICE OF INTENT (Submit in Duplicate)

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

Approximate date work will start _____

SUBSEQUENT REPORT (Submit Original Form Only)

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

Date of work completion _____

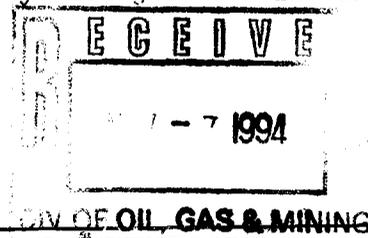
Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION AND LOG form.

* Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

On October 27, 1994, 230 barrels of produced water were released at the facility referenced above.

The release was due to corrosion on an injection line. Approximately 200 barrels of produced water have been recovered. A 3-foot section of injection line has been replaced. The affected area will be remediated by adding fertilizer and raking it into the soil.



13. Name & Signature: Sally R. Urby *Sally R. Urby* Title: Staff-Office Assistant Date: 11/2/94

(This space for State use only)

EXXON COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

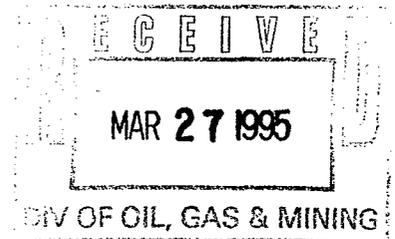
MIDLAND PRODUCTION ORGANIZATION

OPERATIONS INTEGRITY

March 23, 1995

Operator Change
Walker Hollow (Green River) Unit
Summit County, Utah

Utah Oil & Gas Conservation Commission
Utah Division of Oil, Gas & Mining
355 West North Temple
State Office Building
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203



Attention: Leisha Cordova

Effective April 1, 1995, Citation Oil & Gas Corp. will replace Exxon Corp. as operator of the Walker Hollow (Green River) Unit. Attached is a list of locations, API numbers and lease numbers for wells in the subject unit.

Please direct questions concerning this property transfer to me at (915) 688-7875.

Sincerely,

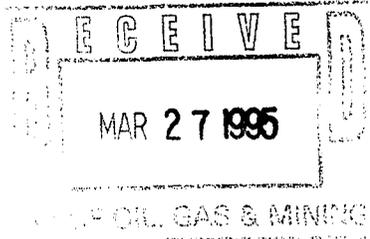
A handwritten signature in black ink, appearing to read "S. Johnson".

Stephen Johnson

SJJ/mym
Enclosure

WALKER HOLLOW (GREEN RIVER) UNIT WELLS

WELL	1/4 SEC	S-T-R	API NUMBER	LEASE NUMBER
1	SWSW	8-7S-24E	4304715554 ✓	U-02512
2	SWNE	8-7S-24E	4304715556 ✓	SLC-066357
3	SWSW	7-7S-24E	4304715557 ✓	SLC-066357
4	SWSE	12-7S-23E	4304716501 <i>w/w</i>	SLC-066357
5	SWSW	12-7S-23E	4304715558 ✓	SLC-066357
6	SWSE	7-7S-24E	4304716502 <i>w/w</i>	SLC-066357
7	NESE	12-7S-23E	4304715559 <i>w/w</i>	SLC-066357
8	SWSE	8-7S-24E	4304716503 <i>w/w</i>	U-02512
10	SWNW	9-7S-24E	4304715561 <i>w/w</i>	U-02512
11	NENW	9-7S-24E	4304715562 ✓	U-02512
12	SWSE	4-7S-24E	4304716504 <i>w/w</i>	SLC-066313
13	NESW	8-7S-24E	4304715563 ✓	U-02512
14	NESE	7-7S-24E	4304715564 ✓	SLC-066357
15	NENW	12-7S-23E	4304715565 ✓	SLC-066357
16	NESW	7-7S-24E	4304715566 ✓	SLC-066357
17	SWNW	12-7S-23E	4304715567 <i>w/w</i>	SLC-066357
18	SWSE	1-7S-23E	4304715568 <i>w/w</i>	SLC-066312
20	NESE	11-7S-23E	4304715569 ✓	SLC-066357
21	NESE	1-7S-23E	4304715570 ✓	SLC-066312
22	SWSE	11-7S-23E	4304715571 <i>w/w</i>	SLC-066357
23	SWNE	11-7S-23E	4304715572 ✓	SLC-066357
24	NESW	11-7S-23E	4304715573 ✓	SLC-066357
25	SWSW	1-7S-23E	4304730040 ✓	SLC-066312
26	SWNW	11-7S-23E	4304715548 <i>w/w</i>	SLC-066357
27	SWNW	8-7S-24E	4304730082 <i>w/w</i>	SLC-066357
28	NWSW	9-7S-24E	4304730092 ✓	U-02512
29	SWSW	11-7S-23E	4304730093 ✓	SLC-066357
30	SWSE	2-7S-23E	4304730094 <i>w/w</i>	ML-3175
31	SWNE	9-7S-24E	4304711512 <i>w/w</i>	U-02512
32	NENE	9-7S-24E	4304730132 ✓	U-02512
33	SWNE	12-7S-23E	4304730133 ✓	SLC-066357
34	SWNW	7-7S-24E	4304730134 <i>w/w</i>	SLC-066357
35	NENE	11-7S-23E	4304730281 <i>w/w</i>	SLC-066357
36	NESW	12-7S-23E	4304730282 ✓	SLC-066357
37	NENW	11-7S-23E	4304730417 ✓	SLC-066357
38	NENE	12-7S-23E	4304730418 ✓	SLC-066357
39	NESE	10-7S-23E	4304730415 ✓	U-02651-C
40	NENE	8-7S-24E	4304730690 ✓	SLC-066357
41	NWSE	8-7S-24E	4304730691 ✓	U-02512
42	NWSE	11-7S-23E	4304730692 ✓	SLC-066357
43	SWNE	1-7S-23E	4304730687 ✓	SLC-066312
44	NESE	2-7S-23E	4304730688 ✓	ML-3175
45	NENE	1-7S-23E	4304730897 ✓	SLC-066312
46	NESW	1-7S-23E	4304730416 ✓	SLC-066312
47	SWNE	2-7S-23E	4304730888 ✓	SLC-066312
48	NENE	7-7S-24E	4304730891 ✓	SLC-066357
49	SWSW	4-7S-24E	4304730892 ✓	SLC-066313
52	NWSW	8-7S-24E	4304730945 ✓	U-02512
54	SESW	1-7S-23E	4304730893 ✓	SLC-066312
55	NWNW	12-7S-23E	4304730894 ✓	SLC-066357
56	SENE	11-7S-23E	4304730911 ✓	SLC-066357
57	NWNE	11-7S-23E	4304730895 ✓	SLC-066357
58	SESE	2-7S-23E	4304730912 ✓	ML-3175
59	SESW	8-7S-24E	4304730946 ✓	U-02512
60	SESE	11-7S-23E	4304730913 ✓	SLC-066357
62	SWNE	10-7S-23E	4304730914 ✓	U-02651-C
63	SWNW	1-7S-23E	4304730916 ✓	SLC-066312
64	SWNW	6-7S-24E	4304730947 ✓	SLC-066313
66	NENE	10-7S-23E	4304731131 ✓	U-02651-C
69	NESW	2-7S-23E	4304731665 ✓	ML-3175
72	SWNW	2-7S-23E	4304731227 ✓	ML-3175
73	SWSE	3-7S-23E	4304731032 ✓	SLC-066312
74	SESW	3-7S-23E	4304731031 ✓	SLC-066357
75	SWSW	2-7S-23E	4304731182 ✓	ML-3175
76	NENW	1-7S-23E	4304731542 ✓	SLC-066312
77	NENE	1-7S-23E	4304731563 ✓	SLC-066312
101	SWNE	7-7S-24E	4304715555 ✓	SLC-066357



REGISTRATION

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. Lease Designation and Serial Number:

6. If Indian, Allottee or Tribe Name:

7. Unit Agreement Name:

Walker Hollow Unit

8. Well Name and Number:

see below

9. API Well Number:

see below

10. Field and Pool, or Wildcat:

Walker Hollow (Green River)

1. Type of Well: OIL GAS OTHER:

2. Name of Operator:
Citation Oil & Gas Corp.

3. Address and Telephone Number:
8223 Willow Place S. Ste 250 Houston, TX 77070 713-469-9664

4. Location of Well

Footages:

QQ, Sec., T., R., M.:

County: Uintah

State: Utah

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

NOTICE OF INTENT
(Submit in Duplicate)

- Abandonment
- Casing Repair
- Change of Plans
- Conversion to Injection
- Fracture Treat
- Multiple Completion
- Other Change of Operator
- New Construction
- Pull or Alter Casing
- Recompletion
- Shoot or Acidize
- Vent or Flare
- Water Shut-Off

Approximate date work will start _____

SUBSEQUENT REPORT
(Submit Original Form Only)

- Abandonment
- Casing Repair
- Change of Plans
- Conversion to Injection
- Fracture Treat
- Other _____
- New Construction
- Pull or Alter Casing
- Shoot or Acidize
- Vent or Flare
- Water Shut-Off

Date of work completion _____

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

* Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Effective April 1, 1995 Citation Oil & Gas Corp. took over as operator of the Walker Hollow Unit from Exxon Company, USA.

The wells involved are as follows:

Walker Hollow Unit #1	43-047-15554	Sec. 8 T7S R24E
Walker Hollow Unit #2	43-047-15556	Sec. 8 T7S R24E
Walker Hollow Unit #3	43-047-15557	Sec. 7 T7S R24E
Walker Hollow Unit #4	43-047-16501	Sec.12 T7S R23E
Walker Hollow Unit #5	43-047-15558	Sec.12 T7S R23E
Walker Hollow Unit #6	43-047-16502	Sec. 7 T7S R24E
Walker Hollow Unit #7	43-047-05580	Sec.12 T7S R23E
Walker Hollow Unit #8	43-047-16503	Sec. 8 T7S R24E
Walker Hollow Unit #9	43-047-15560	Sec. 8 T7S R24E
Walker Hollow Unit #10	43-047-15561	Sec. 9 T7S R24E

13.

continued on back

Name & Signature: Sharon Ward *Sharon Ward* Title: Production Reg. Supv. Date: 4-6-95

(This space for State use only)

The following are the list of wells involved in the change of operator on the Walker Hollow Unit from Exxon Company USA to Citation Oil & Gas Corp. effective April 1, 1995.

Walker Hollow Unit #11	43-047-15562	Sec. 9 T7S R24E
Walker Hollow Unit #12	43-047-16504	Sec. 4 T7S R24E
Walker Hollow Unit #13	43-047-15563	Sec. 8 T7S R24E
Walker Hollow Unit #14	43-047-15564	Sec. 7 T7S R24E
Walker Hollow Unit #15	43-047-15565	Sec.12 T7S R23E
Walker Hollow Unit #16	43-047-15566	Sec. 7 T7S R24E
Walker Hollow Unit #17	43-047-15567	Sec.12 T7S R23E
Walker Hollow Unit #18	43-047-15568	Sec. 1 T7S R23E
Walker Hollow Unit #20	43-047-15569	Sec.11 T7S R23E
Walker Hollow Unit #21	43-047-15570	Sec. 1 T7S R23E
Walker Hollow Unit #22	43-047-15571	Sec.11 T7S R23E
Walker Hollow Unit #23	43-047-15572	Sec.11 T7S R23E
Walker Hollow Unit #24	43-047-15573	Sec.11 T7S R23E
Walker Hollow Unit #25	43-047-30040	Sec. 1 T7S R23E
Walker Hollow Unit #26	43-047-15548	Sec.11 T7S R23E
Walker Hollow Unit #27	43-047-30082	Sec. 8 T7S R24E
Walker Hollow Unit #28	43-047-30092	Sec. 9 T7S R24E
Walker Hollow Unit #29	43-047-30093	Sec.11 T7S R23E
Walker Hollow Unit #30	43-047-30094	Sec. 2 T7S R23E
Walker Hollow Unit #31	43-047-11512	Sec. 9 T7S R24E
Walker Hollow Unit #32	43-047-30132	Sec. 9 T7S R24E
Walker Hollow Unit #33	43-047-30133	Sec.12 T7S R23E
Walker Hollow Unit #34	43-047-30134	Sec. 7 T7S R24E
Walker Hollow Unit #35	43-047-30281	Sec.11 T7S R23E
Walker Hollow Unit #36	43-047-30282	Sec.12 T7S R23E
Walker Hollow Unit #37	43-047-30417	Sec.11 T7S R23E
Walker Hollow Unit #38	43-047-30418	Sec.12 T7S R23E
Walker Hollow Unit #39	43-047-30415	Sec.12 T7S R23E
Walker Hollow Unit #40	43-047-30690	Sec. 8 T7S R24E
Walker Hollow Unit #41	43-047-30691	Sec. 8 T7S R24E
Walker Hollow Unit #42	43-047-30692	Sec.11 T7S R23E
Walker Hollow Unit #43	43-047-30687	Sec. 1 T7S R23E
Walker Hollow Unit #44	43-047-30688	Sec. 2 T7S R23E
Walker Hollow Unit #45	43-047-30897	Sec. 1 T7S R23E
Walker Hollow Unit #46	43-047-30416	Sec. 1 T7S R23E
Walker Hollow Unit #47	43-047-30888	Sec. 2 T7S R23E
Walker Hollow Unit #48	43-047-30891	Sec. 7 T7S R24E
Walker Hollow Unit #49	43-047-30892	Sec. 4 T7S R24E
Walker Hollow Unit #52	43-047-30945	Sec. 8 T7S R24E
Walker Hollow Unit #54	43-047-30893	Sec. 1 T7S R23E
Walker Hollow Unit #55	43-047-30894	Sec.12 T7S R23E
Walker Hollow Unit #56	43-047-30911	Sec.11 T7S R23E
Walker Hollow Unit #57	43-047-30895	Sec.11 T7S R23E
Walker Hollow Unit #58	43-047-30912	Sec. 2 T7S R23E
Walker Hollow Unit #59	43-047-30946	Sec. 8 T7S R24E
Walker Hollow Unit #60	43-047-30913	Sec.11 T7S R23E
Walker Hollow Unit #62	43-047-30914	Sec.10 T7S R23E
Walker Hollow Unit #63	43-047-30916	Sec. 1 T7S R23E
Walker Hollow Unit #64	43-047-30947	Sec. 6 T7S R24E
Walker Hollow Unit #66	43-047-31131	Sec.10 T7S R23E
Walker Hollow Unit #69	43-047-31665	Sec. 2 T7S R23E
Walker Hollow Unit #72	43-047-31227	Sec. 2 T7S R23E
Walker Hollow Unit #73	43-047-31032	Sec. 3 T7S R23E
Walker Hollow Unit #74	43-047-31031	Sec. 3 T7S R23E
Walker Hollow Unit #75	43-047-31182	Sec. 2 T7S R23E
Walker Hollow Unit #76	43-047-31542	Sec. 1 T7S R23E
Walker Hollow Unit #77	43-047-31563	Sec. 1 T7S R23E
Walker Hollow Unit #78	43-047-31645	Sec. 1 T7S R23E
Walker Hollow Unit #101	43-047-15555	Sec. 7 T7S R24E

Division of Oil, Gas and Mining
PHONE CONVERSATION DOCUMENTATION FORM

Route original/copy to:

Well File _____

(Location) Sec ___ Twp ___ Rng ___
(API No.) _____

Suspense
(Return Date) _____
(To - Initials) _____

Other
OPER. CHG. _____

1. Date of Phone Call: 5-2-95 Time: 8:23

2. DOGM Employee (name) L. CORDOVA (Initiated Call
Talked to:

Name SHARON WARD (Initiated Call - Phone No. (713) 469-9664
of (Company/Organization) CITATION O&G CORP.

3. Topic of Conversation: OPERATOR OF THE "WALKER HOLLOW (GRRV) UNIT?
BLM APRV CITATION 1994 INVESTMENT LP. IS COMPANY CHANGING NAME FROM CITATION
O&G CORP?

4. Highlights of Conversation: _____
MS. WARD "CITATION" CALLED BLM TO CHANGE APRV'L TO CITATION O&G CORP. NOT
CITATION 1994 INVESTMENT LP. PER BLM/SL THE CHANGE SHOULD NOT TAKE LONG.

*BLM/SL - SIMPLE CHANGE, SHOULD ONLY TAKE A COUPLE OF DAYS.

NOTICE OF TRANSFER OF OWNERSHIP

Present operator: Exxon Corp. Telephone: (915) 688-7875

Address: P.O. Box 1600

City: Midland State: TX ZIP: 79702

Well no.: Walker Hollow (Green River) Unit Field or Unit name: _____

Sec.: see attachment Twp.: _____ Rng.: _____ County: Summit Lease no.: see attachment

Effective date of transfer: April 1, 1995

S. Johnson
Signature of present operator Stephen Johnson

March 31, 1995
Date

New operator: Citation Oil & Gas Corp.

Address: 8223 Willow Place South, Suite 250

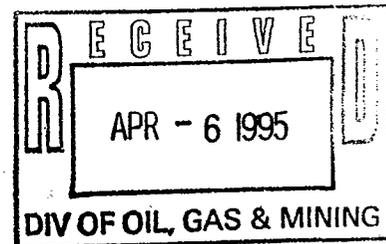
City: Houston State: TX ZIP: 77070-5623

Sharon Ward
Signature of new operator Sharon Ward

April 3, 1995
Date

(This space for DOGM approval)

CAUSE # 117-1



Approved by: *A. Hunt* Title: Exxon Manager Date: 5-3-95

WALKER HOLLOW (GREEN RIVER) UNIT INJECTION WELLS

WELL	1/4 SEC	S-T-R	API NUMBER	LEASE NUMBER
4	SWSE	12-7S-23E	4304716501	SLC-066357
6	SWSE	7-7S-24E	4304716502	SLC-066357
7	NESE	12-7S-23E	4304715559	SLC-066357
8	SWSE	8-7S-24E	4304716503	U-02512
10	SWNW	9-7S-24E	4304715561	U-02512
12	SWSE	4-7S-24E	4304716504	SLC-066313
17	SWNW	12-7S-23E	4304715567	SLC-066357
18	SWSE	1-7S-23E	4304715568	SLC-066312
22	SWSE	11-7S-23E	4304715571	SLC-066357
26	SWNW	11-7S-23E	4304715548	SLC-066357
27	SWNW	8-7S-24E	4304730082	SLC-066357
30	SWSE	2-7S-23E	4304730094	ML-3175
31	SWNE	9-7S-24E	4304711512	U-02512
34	SWNW	7-7S-24E	4304730134	SLC-066357
35	NENE	11-7S-23E	4304730281	SLC-066357

CORRECTION TO DIRECTOR'S MINUTES OF SEPTEMBER 21, 1994; ML 44446 BUILDING STONE/LIMESTONE

The Director's Minutes of September 21, 1994, list State of Utah Building Stone/Limestone Lease ML 44446 as being cancelled for non-payment. Chemcial Lime Company, lessee, has been notified of their default in this matter and with the right to cure, they have complied with this office and provided the required past due rentals with interest and pentalites. Therefore, the Director's Minutes of Septemer 21, 1994, should be corrected to show that ML 44446 was not cancelled for non-payment.

Upon recommendation of Mr. Cooper, the Director approved the correction to the Director's Minutes of September 21, 1994.

* * * * *

TERMINATION OF THE INDIANOLA UNIT

Hunt Oil Company, operator of the Indianola Unit, has furnished this office with evidence that this unit was terminated by the Bureau of Land Management on February 24, 1995.

The records of the following leases should be noted to show the termination of this unit.

- | | |
|----------|------------------------------|
| ML 41655 | Shell Onshore Ventures, Inc. |
| ML 41658 | Shell Onshore Ventures, Inc. |

Due to the termination of the unit, the terms of ML 41655 and ML 41658 will be extended until February 24, 1997.

Upon recommendation of Mr. Bonner, the Director noted the termination of the Indianola Unit and approved the extension of ML 41655 and ML 41658.

STATEWIDE BOND OF LESSEE

Citation Oil & Gas Corporation has submitted an \$80,000 State of Utah Statewide Bond of Lessee to cover their oil and gas exploration and development operations on Trust lands. The surety is Gulf Insurance Company, Bond No. 587800.

Upon recommendation of Mr. Bonner, the Director accepted Bond No. 587800 as described above.

United States Department of the Interior

BUREAU OF LAND MANAGEMENT

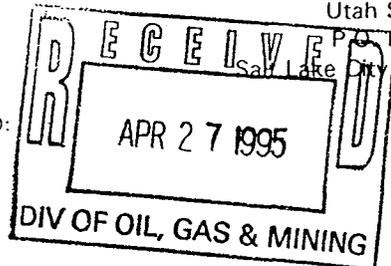
Utah State Office

P.O. Box 45155

Salt Lake City Utah 84145-0155

COPY

IN REPLY REFER TO:
UT-922



April 26, 1995

Citation 1994 Investment LP
Attn: Christopher E. Cottrell
8223 Willow Place South, Suite 250
Houston, Texas 77070-5623

Re: Walker Hollow (Green River) Unit
Uintah County, Utah

Gentlemen:

We received an indenture dated March 22, 1995, whereby Exxon Company, U.S.A. resigned as Unit Operator and Citation 1994 Investment Limited Partnership was designated as Successor Unit Operator for the Walker Hollow (Green River) Unit, Uintah County, Utah.

This indenture was executed by all required parties and the signatory parties have complied with Sections 5 and 6 of the unit agreement. The instrument is hereby approved effective April 26, 1995.

Your nationwide (Montana) oil and gas bond No. 0630 will be used to cover all operations within the Walker Hollow (Green River) Unit.

It is requested that you notify all interested parties of the change in unit operator. Copies of the approved instruments are being distributed to the appropriate federal offices, with one copy returned herewith.

Sincerely,

/s/ Assad M. Raffoul

for Robert A. Henricks
Chief, Branch of Fluid Minerals

Enclosure

bcc: District Manager - Vernal (w/enclosure)
~~Division of Oil, Gas & Mining~~
Division of Lands and Mineral Operations U-923
File - Walker Hollow (GR) Unit (w/enclosure)
MMS - Data Management Division
Agr. Sec. Chron
Fluid Chron

U-922:TAThompson:tt:04-26-95

Division of Oil, Gas and Mining
OPERATOR CHANGE WORKSHEET

1- LWP GTH
2-LWP 7-PL
3-DTS 8-SJ
4-VLC 9-FILR
5-RJF
6-LWP <i>LWP</i>

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

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

The operator of the well(s) listed below has changed (EFFECTIVE DATE: 4-1-95)

TO (new operator) <u>CITATION OIL & GAS CORP</u>	FROM (former operator) <u>EXXON CORPORATION</u>
(address) <u>8223 WILLOW PL S #250</u>	(address) <u>PO BOX 4721</u>
<u>HOUSTON TX 77070-5623</u>	<u>HOUSTON TX 77210-4721</u>
<u>SHARON WARD</u>	<u>STEPHEN JOHNSON/MIDLAND</u>
phone (713) <u>469-9664</u>	phone (915) <u>688-7875</u>
account no. <u>N 0265</u>	account no. <u>N 0420</u>

Well(s) (attach additional page if needed): ***WALKER HOLLOW (GREEN RIVER) UNIT**

Name: **SEE ATTACHED**	API: <u>047-15567</u>	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____
Name: _____	API: _____	Entity: _____	Sec _____	Twp _____	Rng _____	Lease Type: _____

OPERATOR CHANGE DOCUMENTATION

- Lee 1. (Rule R615-8-10) Sundry or other legal documentation has been received from former operator (Attach to this form). *(Rec'd 3-27-95)*
- Lee 2. (Rule R615-8-10) Sundry or other legal documentation has been received from new operator (Attach to this form). *(Rec'd 4-5-95) (Rec'd 4-6-95) (Rec'd 4-10-95)*
- N/A 3. The Department of Commerce has been contacted if the new operator above is not currently operating any wells in Utah. Is company registered with the state? (yes/no) _____ If yes, show company file number: _____.
- Lee 4. (For Indian and Federal Wells ONLY) The BLM has been contacted regarding this change (attach Telephone Documentation Form to this report). Make note of BLM status in comments section of this form. Management review of **Federal and Indian** well operator changes should take place prior to completion of steps 5 through 9 below.
- Lee 5. Changes have been entered in the Oil and Gas Information System (Wang/IBM) for each well listed above. *(5-2-95)*
- Lup 6. Cardex file has been updated for each well listed above. *5-8-95*
- Lup 7. Well file labels have been updated for each well listed above. *5-8-95*
- Lee 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to State Lands and the Tax Commission. *(5-2-95)*
- Lee 9. A folder has been set up for the Operator Change file, and a copy of this page has been placed there for reference during routing and processing of the original documents.

ENTITY REVIEW

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

BOND VERIFICATION (Fee wells only)

**950308 Trust Lands Admin. Surety # 587800 / 80,000 "Gulf Ins. Co."*

- Yes 1. (Rule R615-3-1) The new operator of any fee lease well listed above has furnished a proper bond.
- N/A 2. A copy of this form has been placed in the new and former operators' bond files.
- N/A 3. The former operator has requested a release of liability from their bond (yes/no) no. Today's date _____ 19____. If yes, division response was made by letter dated _____ 19____.

LEASE INTEREST OWNER NOTIFICATION RESPONSIBILITY

- yes 1. (Rule R615-2-10) The former operator/lessee of any fee lease well listed above has been notified by letter dated 5/10/95 19____, of their responsibility to notify any person with an interest in such lease of the change of operator. Documentation of such notification has been requested.
- N/A 2. Copies of documents have been sent to State Lands for changes involving State leases.

FILMING

- 1. All attachments to this form have been microfilmed. Date: May 18 1995.

FILING

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

COMMENTS

950329 Exxon / Steve Johnson "Req WIC F5"
950406 Rec'd WIC F5 "Old Form"
950426 BLM Aprv. "Citation 1994 Investment L.P."
950502 Unit opn. nm. chg. from "Citation 1994 Investment L.P." to "Citation O&G Corp."
in progress. (see phone DOC.)

United States Department of the Interior **COPY**

BUREAU OF LAND MANAGEMENT

Utah State Office
P.O. Box 45155
Salt Lake City, Utah 84145-0155

MAY 5 1995

IN REPLY REFER TO:
UT-922

May 9, 1995

Citation Oil & Gas Corporation
Attn: Sharon Ward
8223 Willow Place South, Suite 250
Houston, Texas 77070-5623

Re: Walker Hollow (Green River) Unit
Uintah County, Utah

Gentlemen:

We received an indenture dated May 2, 1995, whereby Citation 1994 Investment Limited Partnership resigned as Unit Operator and Citation Oil & Gas Corporation was designated as Successor Unit Operator for the Walker Hollow (Green River) Unit, Uintah County, Utah.

This indenture was executed by all required parties and the signatory parties have complied with Sections 5 and 6 of the unit agreement. The instrument is hereby approved effective May 9, 1995.

Your nationwide (Montana) oil and gas bond No. 0630 will be used to cover all operations within the Walker Hollow (Green River) Unit.

It is requested that you notify all interested parties of the change in unit operator. Copies of the approved instruments are being distributed to the appropriate federal offices, with one copy returned herewith.

Sincerely,

/s/ Robert A. Henricks

Robert A. Henricks
Chief, Branch of Fluid Minerals

Enclosure

bcc: District Manager - Vernal (w/enclosure)
Division of Oil, Gas & Mining
Division of Lands and Mineral Operations U-923
File - Walker Hollow (GR) Unit (w/enclosure)
MMS - Data Management Division
Agr. Sec. Chron
Fluid Chron

U-922:TAThompson:tt:05-09-95

Mechanical Integrity Test Casing or Annulus Pressure Test

U.S. Environmental Protection Agency
Underground Injection Control Program, UIC Implementation Section, 8WM-DW
999 18th Street, Suite 500, Denver, CO 80202-2466

EPA Witness: _____ Date 10/2/96 Time 1:10 am/☉
 Test conducted by: M JOHNSON
 Others present: _____

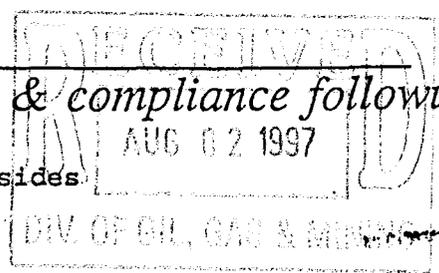
Well: <u>W.H.N #17. 43-047-15567</u> Field: <u>WALKER Hollow.</u> Well Location: <u>SW 1/4, NW 1/4 SEC. 12, T. 9S, R. 23E S. 2M</u>	Well ID: <u>SLC 066351</u> Company: <u>BIG RED CITATION OIL AND GAS CORPORATION</u> Address: <u>8223 Willow Place S. 250 Houston TX 77070</u>
--	--

Time	Test #1	Test #2	Test #3
0 min	<u>1110</u> psig	_____ psig	_____ psig
5	_____	_____	_____
10	_____	_____	_____
15	_____	_____	_____
20	_____	_____	_____
25	_____	_____	_____
30 min	<u>1080</u>	_____	_____
35	_____	_____	_____
40	_____	_____	_____
45	<u>1080</u>	_____	_____
50	_____	_____	_____
55	_____	_____	_____
60 min	_____	_____	_____
Tubing press	_____ psig	_____ psig	_____ psig

Result (circle) Pass Fail Pass Fail Pass Fail

Signature of EPA Witness: _____
See back of page for any additional comments & compliance followup.

This is the front side of two sides.



PRINTED IN U.S.A.

FIRST DAY

SECOND

THIRD

FOURTH

FIFTH

SIXTH

EIGHTH

START

TEJAS

Instruments, Inc.

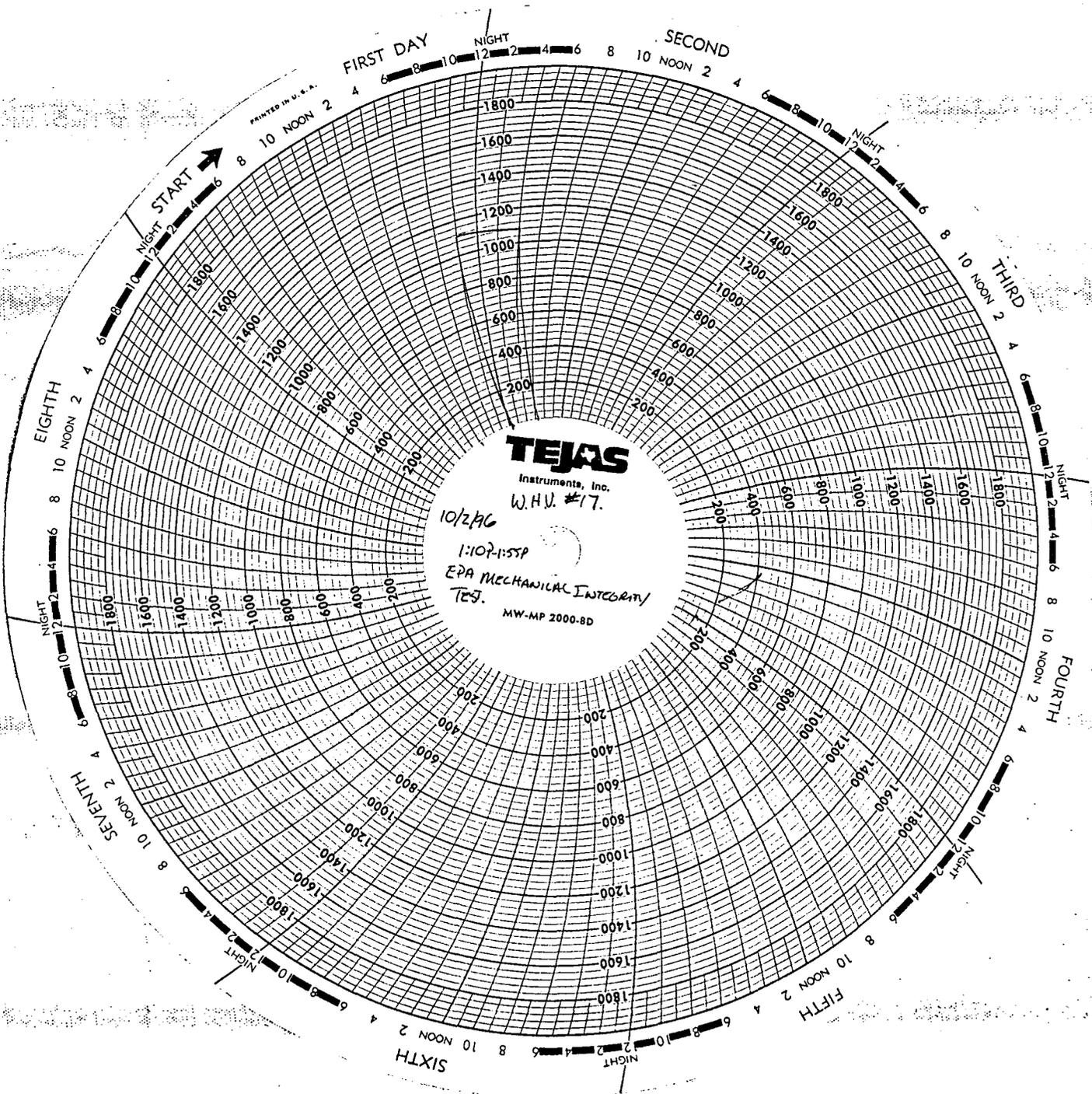
W.H.V. #17.

10/2/96

1:10P-1:55P

EPA MECHANICAL INTEGRITY
TEST.

MW-MP 2000-8D





State of Utah
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

Michael O. Leavitt
Governor
Ted Stewart
Executive Director
James W. Carter
Division Director

1594 West North Temple, Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801
801-538-5340
801-359-3940 (Fax)
801-538-7223 (TDD)

August 19, 1997

Bob Christofferson
Citation Oil & Gas Corporation
1016 East Lincoln
Gillette, Wyoming 82716

Re: Pressure Test for Mechanical Integrity for the Listed
Injection Wells, Uintah County, Utah

Gentlemen:

The Underground Injection Control Program which the Division of Oil, Gas and Mining (DOGM) administers in Utah, requires that all Class II injection wells demonstrate mechanical integrity. Rule R649-5-5.3 of the Oil and Gas Conservation General Rules requires that the casing-tubing annulus above the packer be pressure tested at a pressure equal to the maximum authorized injection pressure or 1,000 psi, whichever is lesser, provided that no test pressure is less than 300 psi. This test shall be performed at least every five year period beginning October 1982. Our records indicate the above referenced wells are due for testing. Please make arrangements and ready the wells for testing on September 11, 1997 as outlined below:

1. Operator must furnish connections, and accurate pressure gauges, hot oil truck (or other means of pressuring annulus), as well as personnel to assist in opening valves etc.
2. The casing-tubing annulus shall be filled prior to the test date to expedite testing, as each well will be required to hold pressure for a minimum of 15 minutes.

Page 2

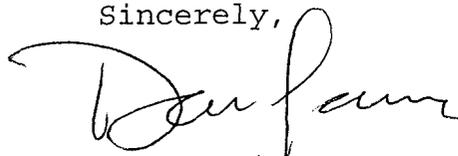
Citation Oil & Gas Corporation

August 19, 1997

3. If mechanical difficulties or workover operations make it impossible for the wells to be tested on this date the tests may be rescheduled.
4. Company personnel should meet DOGM representatives at the field office or other location as negotiated.
5. All bradenhead valves with exception of the tubing on the injection wells must be shut-in 24 hours prior to testing.

Please contact Chris Kierst at (801)538-5337 to arrange a meeting time and place or negotiate a different date if this one is unacceptable.

Sincerely,

A handwritten signature in cursive script, appearing to read "Dan Jarvis".

Dan Jarvis
UIC Geologist

lwp
Attachment

Walker Hollow #18
Walker Hollow #30
Walker Hollow #22
Walker Hollow #26
Walker Hollow #35
Walker Hollow #4
Walker Hollow #7
Walker Hollow #17
Walker Hollow #10
Walker Hollow Unit #31
Walker Hollow Unit #12
Walker Hollow Unit #34
Walker Hollow Unit #6
Walker Hollow Unit #8
Walker Hollow Unit #27

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

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NUMBER: SLC066357
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Injection</u>		7. UNIT or CA AGREEMENT NAME: Walker Hollow Unit UTU66837A
2. NAME OF OPERATOR: Citation Oil & Gas Corp.		8. WELL NAME and NUMBER: Walker Hollow Unit #17
3. ADDRESS OF OPERATOR: P.O. Box 690688 CITY Houston STATE TX ZIP 77269-0688		9. API NUMBER: 4304715567
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1980' FNL & 660' FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SWNW 12 7S 23E		10. FIELD AND POOL, OR WLD CAT: Walker Hollow Green River COUNTY: Uintah STATE: UTAH

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

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 11/13/2006	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <u>MIT</u>
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Successful MIT was performed on this well on 11/13/2006. A copy of the report is attached.

NAME (PLEASE PRINT) <u>Debra Harris</u>	TITLE <u>Regulatory Compliance Coordinator</u>
SIGNATURE <u><i>Debra Harris</i></u>	DATE <u>11/16/2006</u>

(This space for State use only)

RECEIVED
NOV 21 2006



United States Department of the Interior

BUREAU OF LAND MANAGEMENT

Vernal Field Office
170 South 500 East
Vernal, Utah 84078-2799

Phone: (435) 781-4400
Fax: (435) 781-4410

IN REPLY REFER TO:

MECHANICAL INTEGRITY PRESSURE TEST
CASING/TUBING ANNULUS

Unit UV 66837A

LEASE NO.: SLC 010635T

43-047-15567

COMPANY NAME: Citation Oil & Gas

DATE: 11-13-06

WELL NAME: Walker Hollow #17

PERMIT NO.: UT 2000-02536

FIELD NAME: Walker Hollow

COUNTY: Vintah

WELL LOCATION: 1/41/4 SWNW

SEC. 12

TWN. 7S

RNG. 23E

WELL TYPE: SWD ER 2H

OTHER: ACTIVE

TYPE OF PACKER: Baker Model A

TOTAL DEPTH _____

PACKER SET DEPTH (ft): 4422

SURFACE CASING SIZE: 8 5/8 FROM: _____ FT. to _____ FT.

CASING SIZE: 5 1/2 FROM: 0 FT. to 5520 FT.

TUBING SIZE: 2 7/8 TUBING PRESSURE DURING TEST: 1325 PSIG 1340

TIME OF DAY: 1:40 am/pm

date of last test 11-15-01

rate 795 BPL
casing ϕ 1325 # psig 1340

max allowable psig 1553

TIME (min)

TEST 1

TEST 2

TIME (min)	TEST 1	TEST 2
0	1600 psig	_____ psig
5	1580 psig	_____ psig
10	1580 psig	_____ psig
15	1580 psig	_____ psig
20	1580 psig	_____ psig
25	1580 psig	_____ psig
30	1580 psig	_____ psig
35	_____ psig	_____ psig
40	_____ psig	_____ psig
45	_____ psig	_____ psig
50	_____ psig	_____ psig
55	_____ psig	_____ psig
60	_____ psig	_____ psig

2:10

TEST CONDUCTED BY: Robert Eye - Citation

INSPECTED BY: Donna Kenney

OTHERS PRESENT: Leroy Carmickle - BIG RED

how much fluid volume added - 1 bbl

how much bleed back - 1 bbl

if test failed why ϕ

Mechanical Integrity Test

Casing or Annulus Pressure Mechanical Integrity Test

U.S. Environmental Protection Agency
Underground Injection Control Program
999 18th Street, Suite 500 Denver, CO 80202-2466

EPA Witness: N/A Date: 11/13/06
 Test conducted by: Robert Eye COG
 Others present: Leroy Carmickle - Big Red, Donna L. Kenny - BLM

Well Name: <u>Walker Hollow # 17</u>	Type: ER <u>(SWD)</u>	Status: <u>(AC)</u> TA UC <small>Active Inj</small>
Field: <u>Walker Hollow</u>		
Location: <u>SW/4NW</u> Sec: <u>12</u> T <u>2</u> N <u>(S)</u> R <u>23</u> E/W County: <u>Uintah</u> State: <u>UT</u>		
Operator: <u>Citation Oil & Gas</u>		
Last MIT: <u>11/15/01</u>	Maximum Allowable Pressure: <u>1653</u>	PSIG

Is this a regularly scheduled test? Yes No
 Initial test for permit? Yes No
 Test after well rework? Yes No
 Well injecting during test? Yes No If Yes, rate: 795 bpd

Pre-test casing/tubing annulus pressure: 0 / 1325 psig

1:40 - 2:10

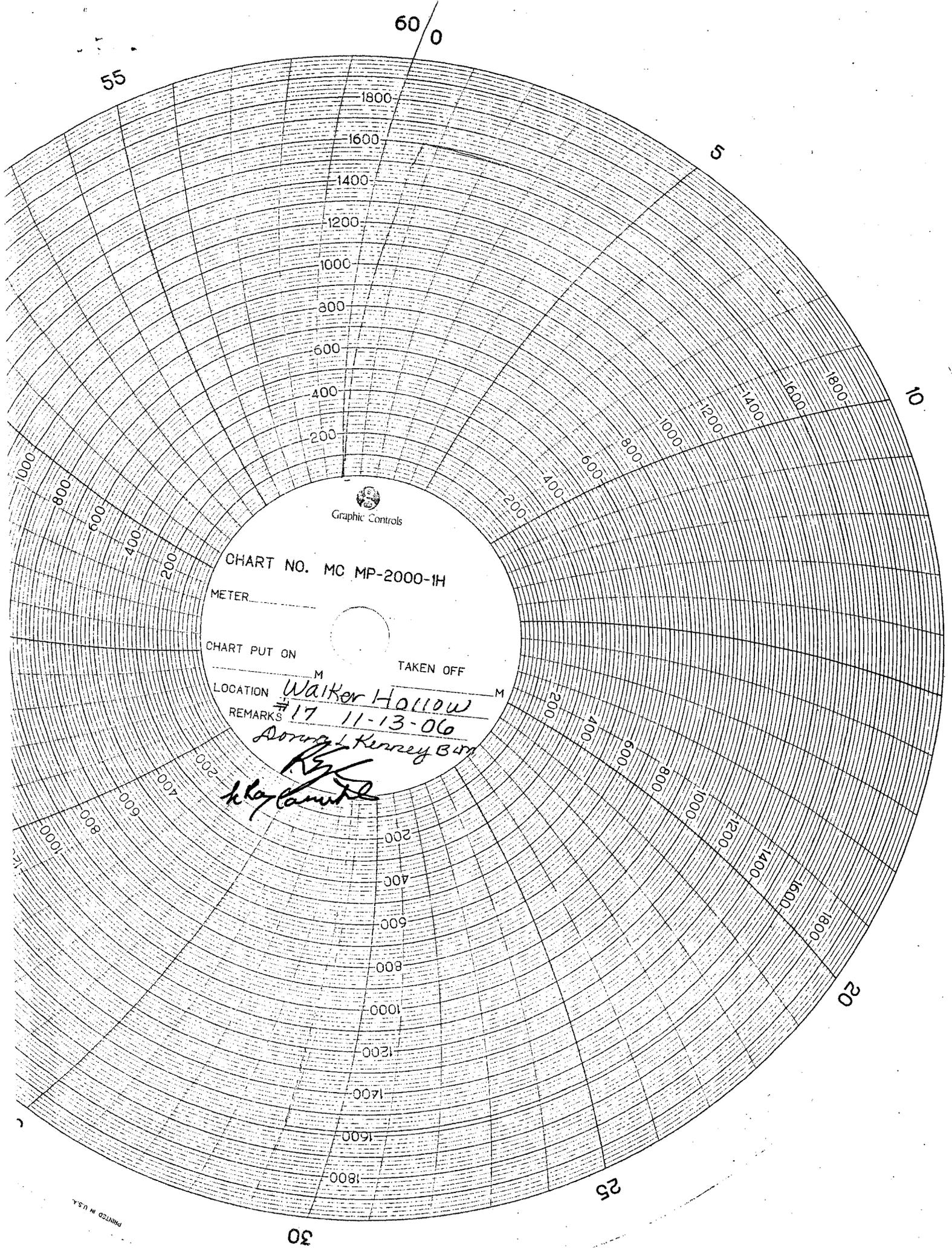
MIT DATA TABLE		Test #1	Test #2	Test #3
TUBING PRESSURE				
Initial Pressure	<u>1325</u> psig			
End of test pressure	<u>1340</u> psig			
CASING / TUBING ANNULUS PRESSURE				
0 minutes	<u>1600</u> psig			
5 minutes	<u>1580</u> psig			
10 minutes	<u>1580</u> psig			
15 minutes	<u>1580</u> psig			
20 minutes	<u>1580</u> psig			
25 minutes	<u>1580</u> psig			
30 minutes	<u>1580</u> psig			
_____ minutes	psig			
_____ minutes	psig			
RESULT	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Does the annulus pressure build back up after the test? Yes No

MECHANICAL INTEGRITY PRESSURE TEST

Additional comments for mechanical integrity pressure test, such as volume of fluid added to annulus and bled back at end of test, reason for failing test (casing head leak, tubing leak, other), etc.:

Donna L. Kenny BLM Robert Carmickle



60 0

55

5

10

1800
1600
1400
1200
1000
800
600
400
200

1800
1600
1400
1200
1000
800
600
400
200

Graphic Controls

CHART NO. MC MP-2000-1H

METER

CHART PUT ON

TAKEN OFF

LOCATION Walker Hollow

REMARKS #17 11-13-06

Dorothy L. Kerney BSM

K. J. Landis

25

20

30

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

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NUMBER: SLC066357
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Injection</u>		7. UNIT or CA AGREEMENT NAME: Walker Hollow Unit UTU66837A
2. NAME OF OPERATOR: Citation Oil & Gas Corp.		8. WELL NAME and NUMBER: Walker Hollow Unit #17
3. ADDRESS OF OPERATOR: P.O. Box 690688 CITY <u>Houston</u> STATE <u>TX</u> ZIP <u>77269-0688</u>		9. API NUMBER: 4304715567
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1980' FNL & 660' FWL		10. FIELD AND POOL, OR WILDCAT: Walker Hollow Green River
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SWNW 12 7S 23E		COUNTY: Uintah
		STATE: UTAH

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

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 10/19/2011	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <u>MIT</u>
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.
Successful MIT was performed on this well on 10/19/2011. A copy of the report is attached.

**Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY**

NAME (PLEASE PRINT) <u>Debra Harris</u>	TITLE <u>Regulatory Compliance Coordinator</u>
SIGNATURE <u><i>Debra Harris</i></u>	DATE <u>10/31/2011</u>

(This space for State use only)

RECEIVED
NOV 04 2011
DIV. OF OIL, GAS & MINING

Mechanical Integrity Test

Casing or Annulus Pressure Mechanical Integrity Test

U.S. Environmental Protection Agency
Underground Injection Control Program
999 18th Street, Suite 500 Denver, CO 80202-2466

EPA Witness: N/A Date: 10/19/11 ^{11/15}
 Test conducted by: Jeff Oaks - COGC Leroy Carmickle Big Red UTU 66837A
 Others present: API # 43-047-15567 80-05006.1

Well Name: <u>Walker Hollow # 17</u>	Type: ER <u>(SWD)</u>	Status: <u>(AC)</u> TA UC <small>Active Inj</small>
Field: <u>Walker Hollow</u>		
Location: <u>SW/NW</u> Sec: <u>12</u> T: <u>7</u> N: <u>(S)</u> R: <u>24</u> W: <u>(E)</u> County: <u>Uintah</u> State: <u>Ut</u>		
Operator: <u>Citation Oil & Gas</u>		
Last MIT: <u>11/13/06</u> Maximum Allowable Pressure: <u>1553</u> PSIG		

Is this a regularly scheduled test? Yes No
 Initial test for permit? Yes No
 Test after well rework? Yes No
 Well injecting during test? Yes No If Yes, rate: 510 bpd

Pre-test casing/tubing annulus pressure: 0 psig

MIT DATA TABLE	Test #1	Test #2	Test #3
TUBING PRESSURE			
Initial Pressure	<u>1280</u> psig	psig	psig
End of test pressure	<u>1280</u> psig	psig	psig
CASING / TUBING ANNULUS PRESSURE			
0 minutes	<u>1010</u> psig	psig	psig
5 minutes	<u>1010</u> psig	psig	psig
10 minutes	<u>1005</u> psig	psig	psig
15 minutes	<u>1005</u> psig	psig	psig
20 minutes	<u>1005</u> psig	psig	psig
25 minutes	<u>1000</u> psig	psig	psig
30 minutes	<u>1000</u> psig	psig	psig
<u>32</u> minutes	<u>1000</u> psig	psig	psig
_____ minutes	psig	psig	psig
RESULT	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

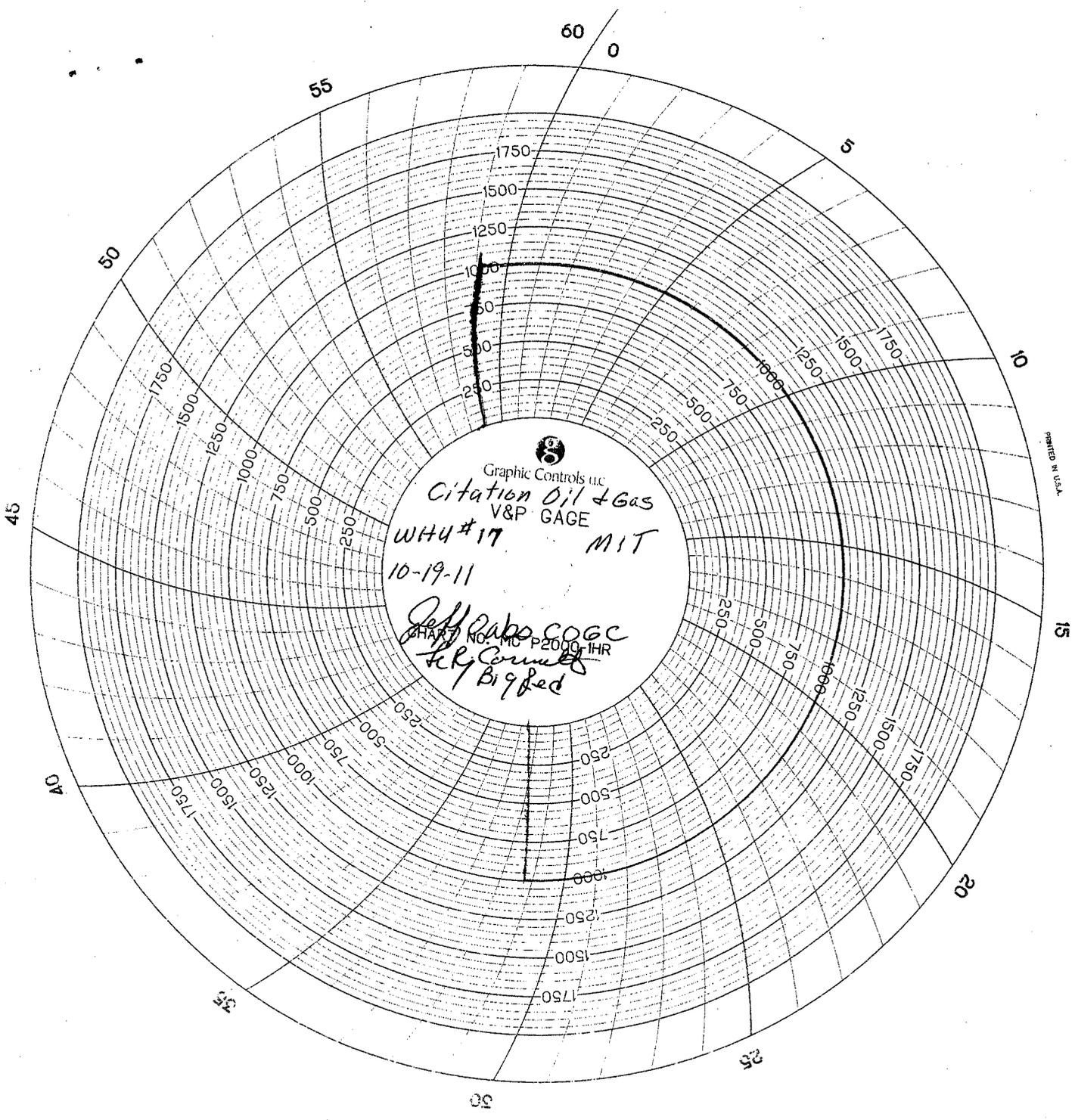
Does the annulus pressure build back up after the test? Yes No

MECHANICAL INTEGRITY PRESSURE TEST

Additional comments for mechanical integrity pressure test, such as volume of fluid added to annulus and bled back at end of test, reason for failing test (casing head leak, tubing leak, other), etc.:

Signature of Witness: Jeff Oaks COGC
Leroy Carmickle Big Red

3LM
DOSM
DIT



Graphic Controls Inc.

Citation Oil & Gas

V&P GAGE

WHU #17

MIT

10-19-11

Jeff Rube COGC
CHART NO. MC P2000-1HR
K.R. Cornwell
Big Red

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