

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

5. LEASE DESIGNATION AND SERIAL NO.

U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

Natural Buttes Unit

8. FARM OR LEASE NAME

Natural Buttes Unit

9. WELL NO.

CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT

Natural Buttes Field

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

Section 34-T9S-R21E

12. COUNTY OR PARISH 13. STATE

Uintah

Utah

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL

DEEPEN

PLUG BACK

b. TYPE OF WELL

OIL WELL

GAS WELL

OTHER

SINGLE ZONE

MULTIPLE ZONE

2. NAME OF OPERATOR

CIG Exploration, Inc.

3. ADDRESS OF OPERATOR

P. O. Box 749, Denver, Colorado 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)\*

At surface

1600' FNL / 1168' FEL

At proposed prod. zone

SE NE

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*

SAME

15. DISTANCE FROM PROPOSED\* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. line, if any)

1168'

16. NO. OF ACRES IN LEASE

652.19

17. NO. OF ACRES ASSIGNED TO THIS WELL

160

18. DISTANCE FROM PROPOSED LOCATION\* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.

N/A

19. PROPOSED DEPTH

6400'

Green River

20. ROTARY OR CABLE TOOLS

Rotary

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

5083' Ungr. Gr.

22. APPROX. DATE WORK WILL START\*

January 31, 1981

23. PROPOSED CASING AND CEMENTING PROGRAM

| SIZE OF HOLE   | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | QUANTITY OF CEMENT                |
|----------------|----------------|-----------------|---------------|-----------------------------------|
| 12-1/4"        | 9-5/8"         | 36#             | 200'          | 125 sacks                         |
| 8-3/4", 7-7/8" | 4-1/2"         | 11.6#           | 6400'         | Circulate cement back to surface. |

Fresh Water Aquifers will be protected when the long string is run and cement is circulated back to surface.

Please see attached supplemental information:

- (1) BOP Program
- (2) BOP Schematic
- (3) Survey Plat
- (4) Cut and Fill, Location Layout

Gas Well Production Hookup to follow on Sundry Notice.

RECEIVED

JAN 2 1981

DIVISION OF OIL, GAS & MINING

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

24. SIGNED R. W. Heiser TITLE Drilling Manager DATE January 7, 1981

(This space for Federal or State office use)

PERMIT NO. 43-047-30869

APPROVAL DATE

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

PI

APPROVED BY THE DIVISION OF OIL, GAS, AND MINING

DATE: 1-22-81

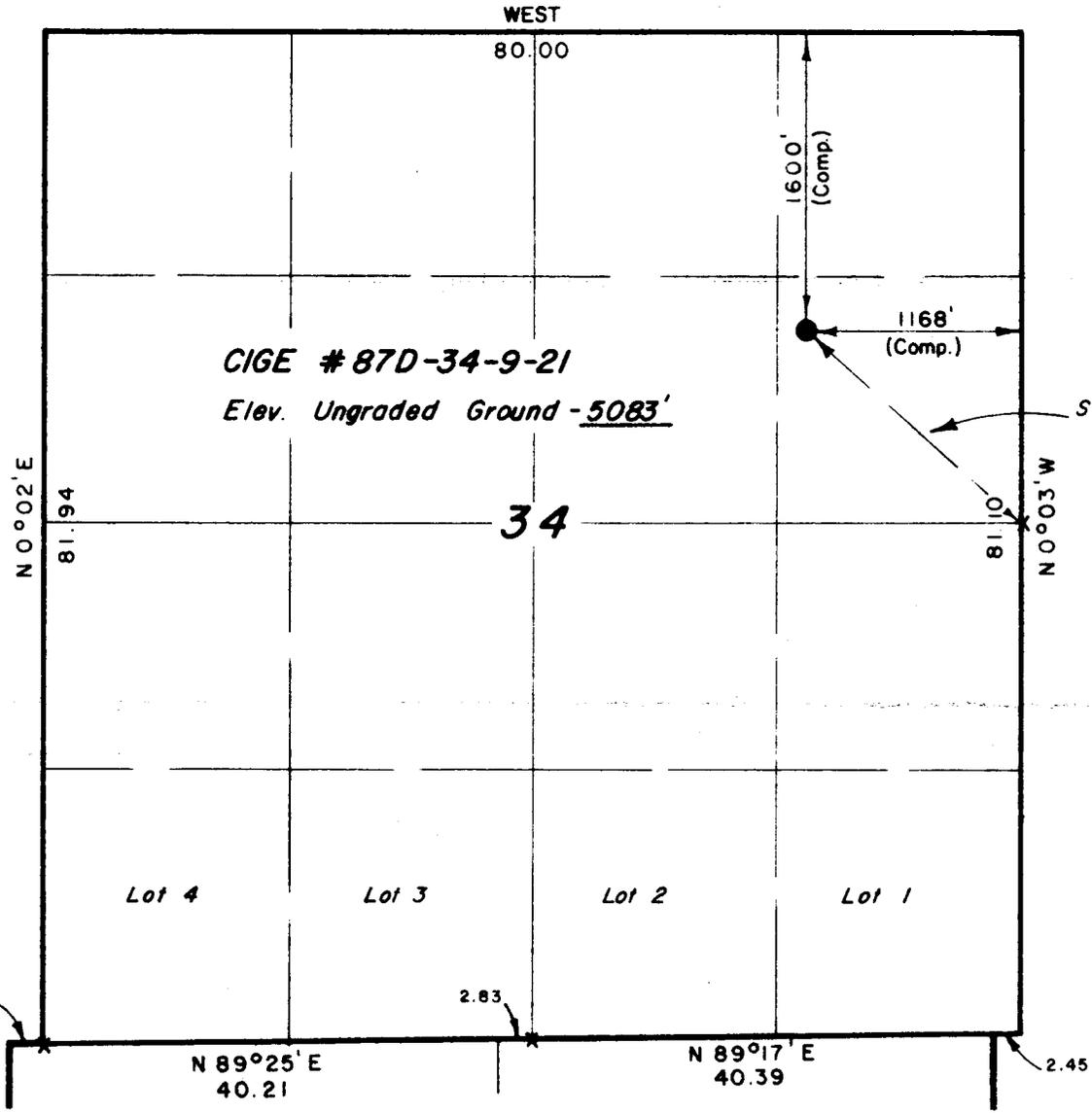
BY: M. J. Minder

T 9 S, R 21 E, S.L.B.&M.

PROJECT

C.I.G. EXPLORATION INC.

Well location, CIGE #87D-34-9-21,  
located as shown in the SE1/4 NE1/4  
Section 34, T9S, R21E, S.L.B.&M.  
Uintah County, Utah.



CERTIFICATE

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.

*Thomas P. Lee*  
REGISTERED LAND SURVEYOR  
REGISTRATION NO 3137  
STATE OF UTAH

UINTAH ENGINEERING & LAND SURVEYING  
P.O. BOX Q - 110 EAST - FIRST SOUTH  
VERNAL, UTAH - 84078

|                        |                              |
|------------------------|------------------------------|
| SCALE<br>1" = 1000'    | DATE<br>12 / 30 / 80         |
| PARTY<br>RK BK AC      | REFERENCES<br>GLO Plat       |
| WEATHER<br>Fair / Cool | FILE<br>CIG EXPLORATION INC. |

X = Section Corners Located

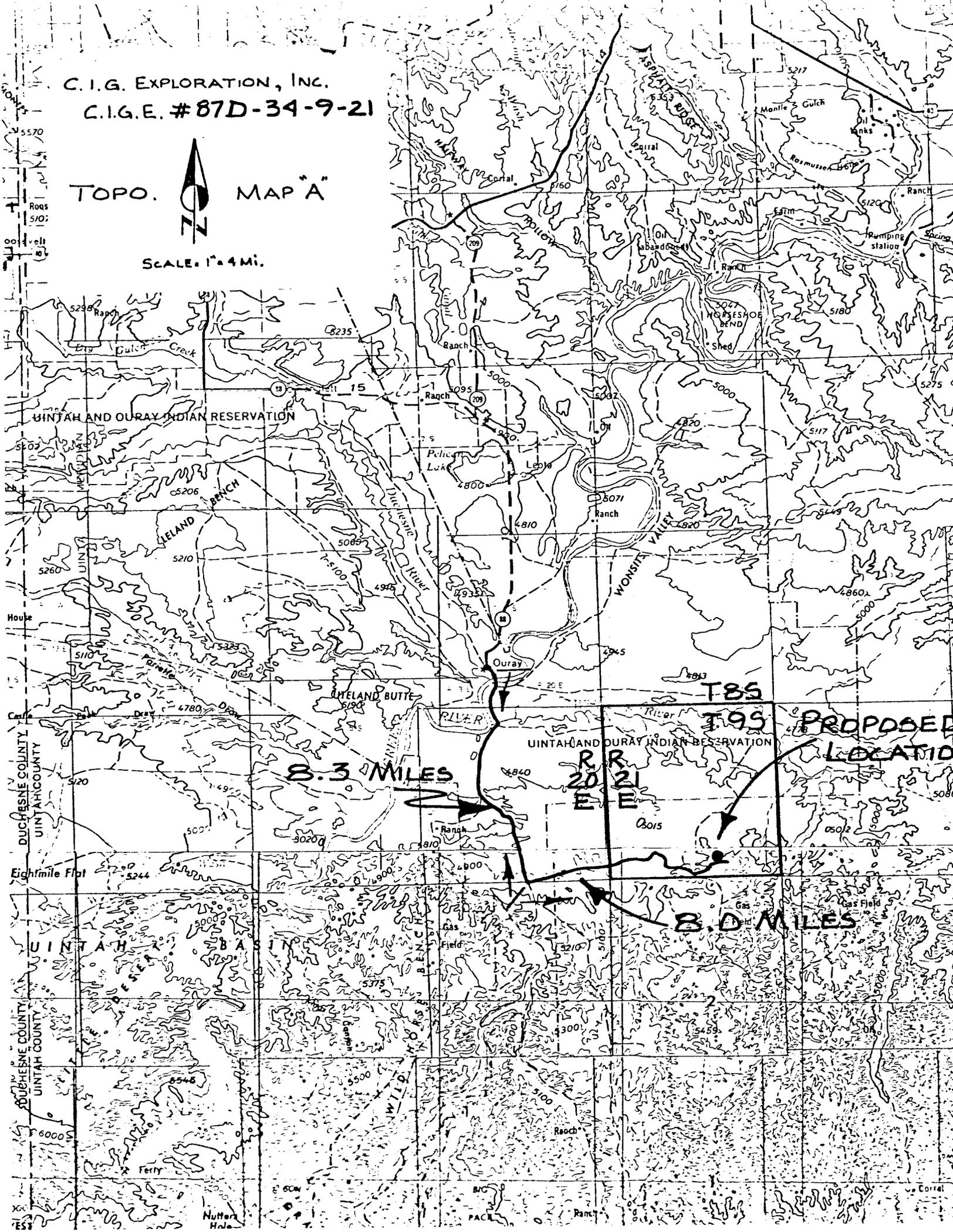
C. I. G. EXPLORATION, INC.  
C. I. G. E. #87D-34-9-21

TOPO.



MAP "A"

SCALE: 1" = 4 Mi.



UINTAH AND OURAY INDIAN RESERVATION

LELAND BUTTE

8.3 MILES

R.R.  
20  
21  
E E

T85

T95

PROPOSED  
LOCATION

8.0 MILES

DUCHESSNE COUNTY  
UINTAH COUNTY

DUCHESSNE COUNTY  
UINTAH COUNTY

DUCHESSNE COUNTY  
UINTAH COUNTY

**BLOWOUT PREVENTER PROGRAM:**

Operator's minimum specifications for pressure control equipment which is to be used, a schematic diagram thereof showing sizes, pressure ratings, and testing procedures and testing frequency.

|         |  |
|---------|--|
| Bottom: | 3000# BOP W/4-1/2" pipe rams<br>3000# BOP W/blind rams<br>3000# Hydril |
| Top:    | Grant rotating head  |

Manifold includes appropriate valves, positive and adjustable chokes and kill line, to control abnormal pressures.

BOP's will be tested at installation and will be cycled on each trip.

The type and characteristics of the proposed circulating medium to be employed for rotary drilling and the quantities and types of mud and weighting material to be maintained:

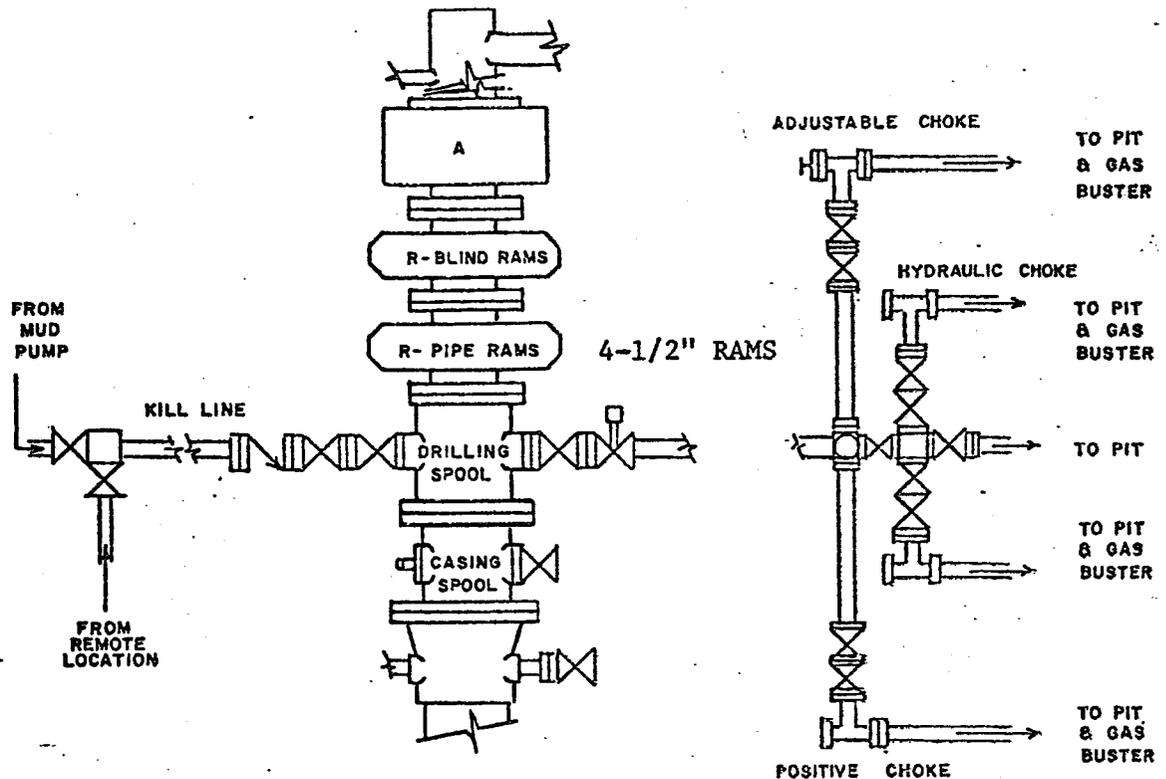
The well will be drilled with fresh water mud from surface to 4500' with a weight of 8.3 to 8.7 ppg. From 4500' to TD the well will be drilled with fresh water mud with a weight from 8.7 to 10.4 ppg.

**Auxiliary equipment to be used:**

- a. kelly cock
- b. monitoring equipment on the mud system
- c. a sub with a full opening valve will be available on the floor to stab into the drill pipe when the kelly is not in the string.

3000 psi

psi Working Pressure BOP's



### Test Procedure

- 1) Flush BOP's and all lines to be tested with water.
- 2) Run test plug on test joint and seat in casing head (leave valve below test plug open to check for leak).
- 3) Test the following to rated pressure:
  - a) inside blowout preventer
  - b) lower kelly cock
  - c) upper kelly cock
  - d) stand pipe valve
  - e) lines to mud pump
  - f) kill line to BOP's
- 4) Close and test pipe rams to rated pressure.
- 5) Close and test Hydril to rated pressure.
- 6) Back off and leave test plug in place. Close and test blind rams to rated pressure.
- 7) Test all choke manifold valves to rated pressure.
- 8) Test kill line valves to rated pressure.

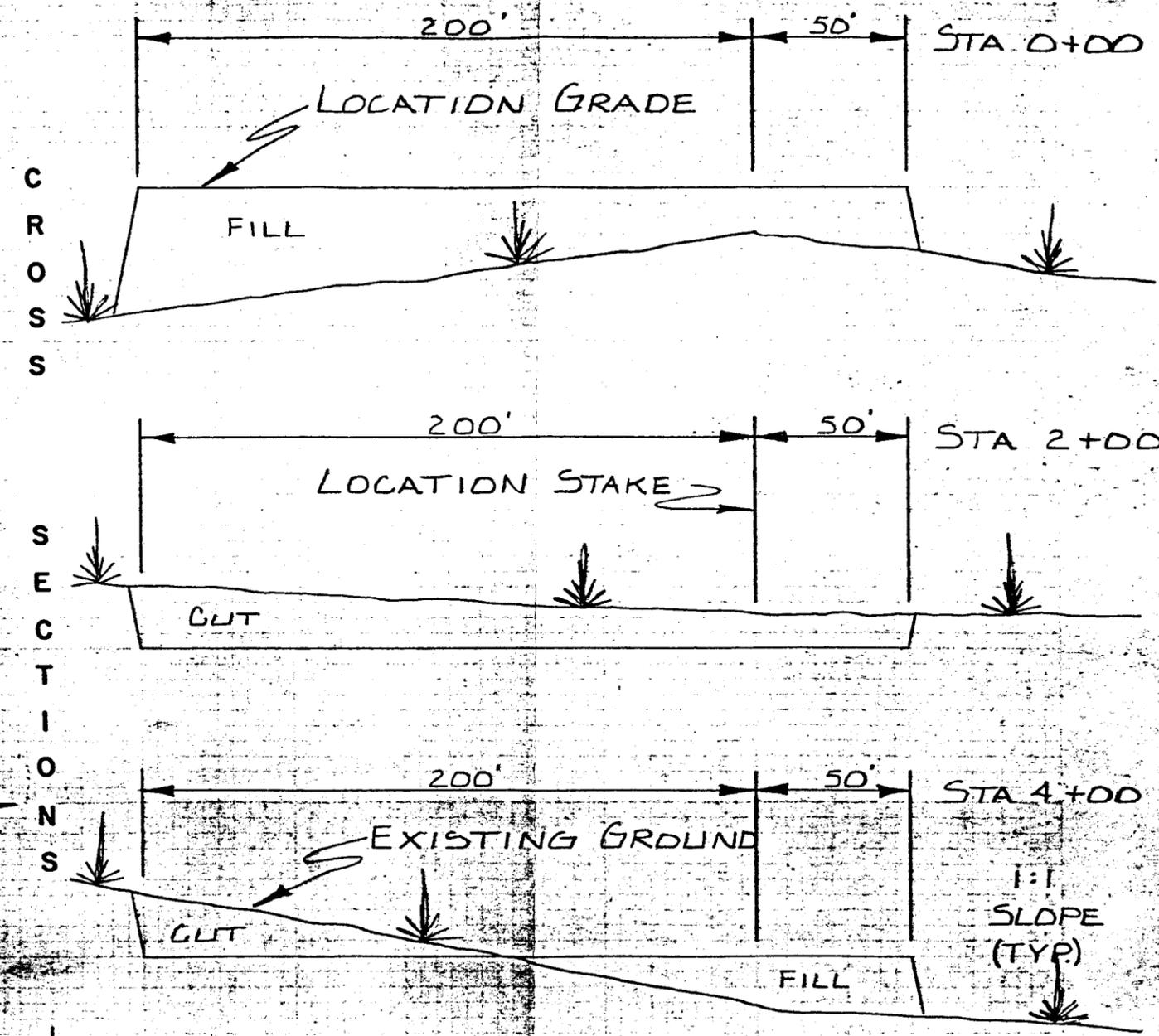
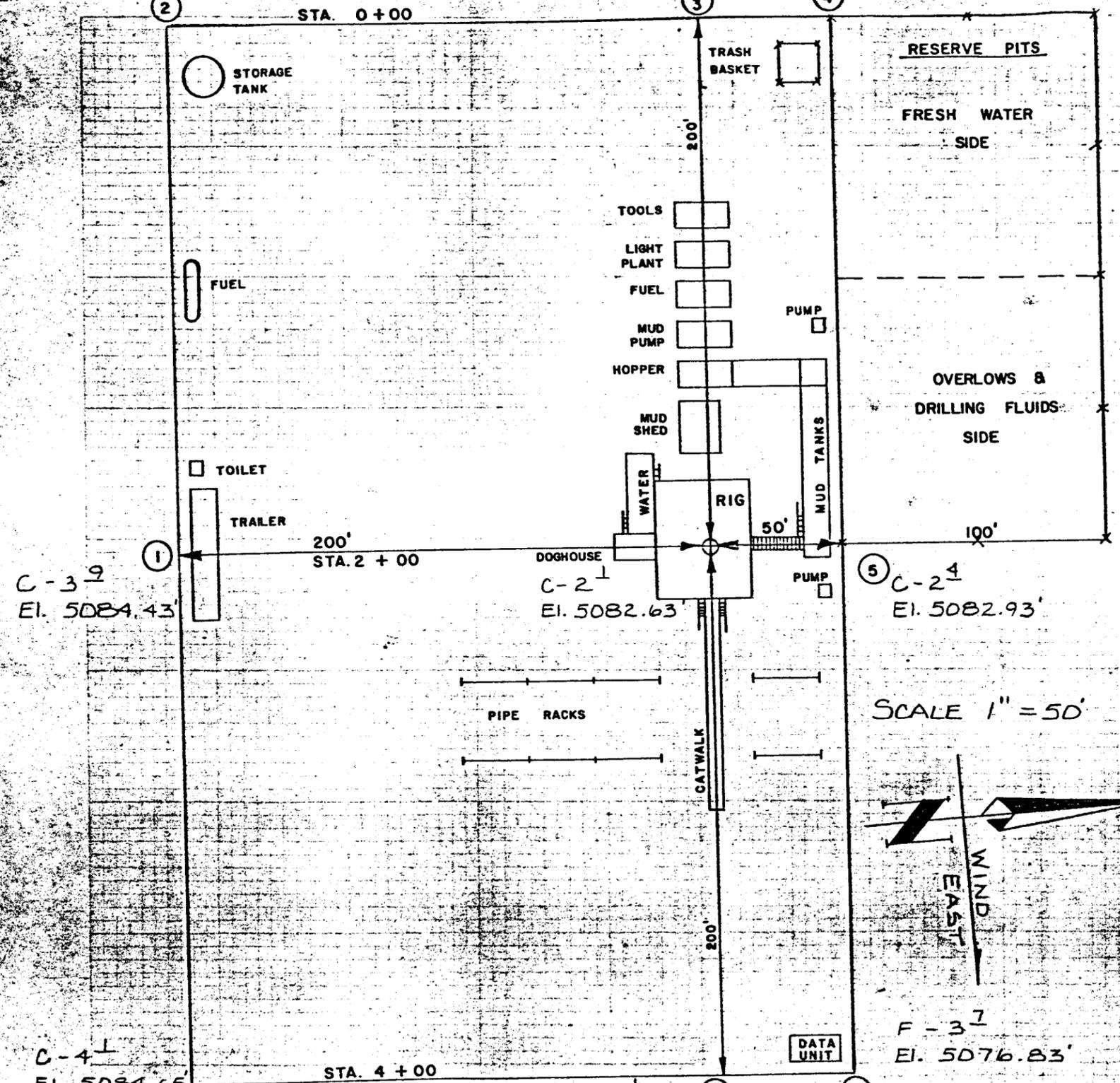
F-8<sup>1</sup>  
El. 5072.13'

F-3<sup>0</sup>  
El. 5077.5'

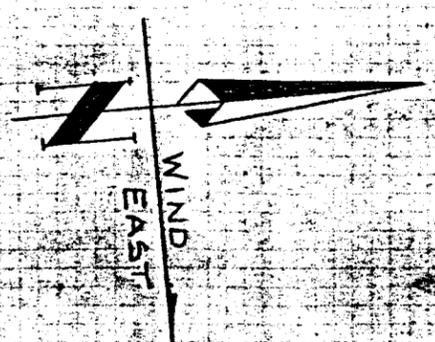
F-4<sup>1</sup>  
El. 5076.13'

# C.I.G. EXPLORATION INC.

## CIGE #87D-34-9-21



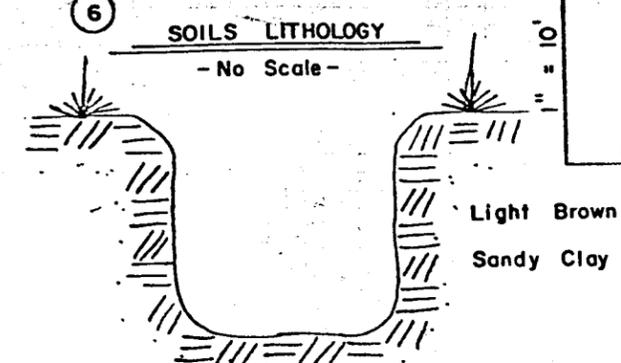
SCALE 1" = 50'



F-3<sup>1</sup>  
El. 5076.83'

C-4<sup>1</sup>  
El. 5084.65'

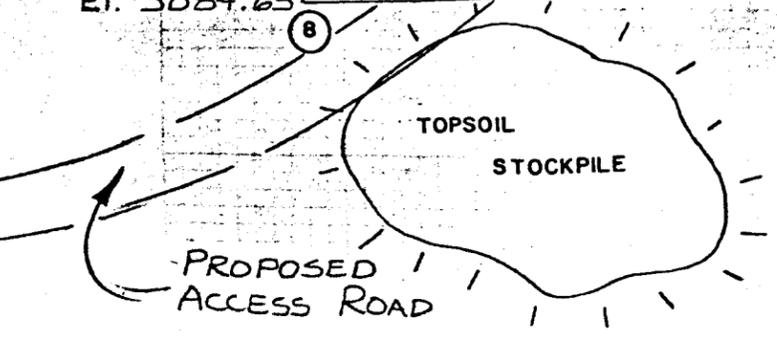
F-3<sup>1</sup>  
El. 5077.43'



Scale  
1" = 50'

### APPROXIMATE YARDAGES

Cubic Yards of Cut - 6330  
Cubic Yards of Fill - 6181



18

17

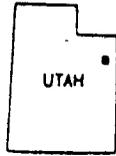
C.I.G. EXPLORATION, INC.  
C.I.G.E #87D-34-9-21

TOPO. MAP "B"

SCALE 1" = 2000'

ROAD CLASSIFICATION

Medium-duty ——— Light-duty ———  
Unimproved dirt - - - - -  
○ State Route



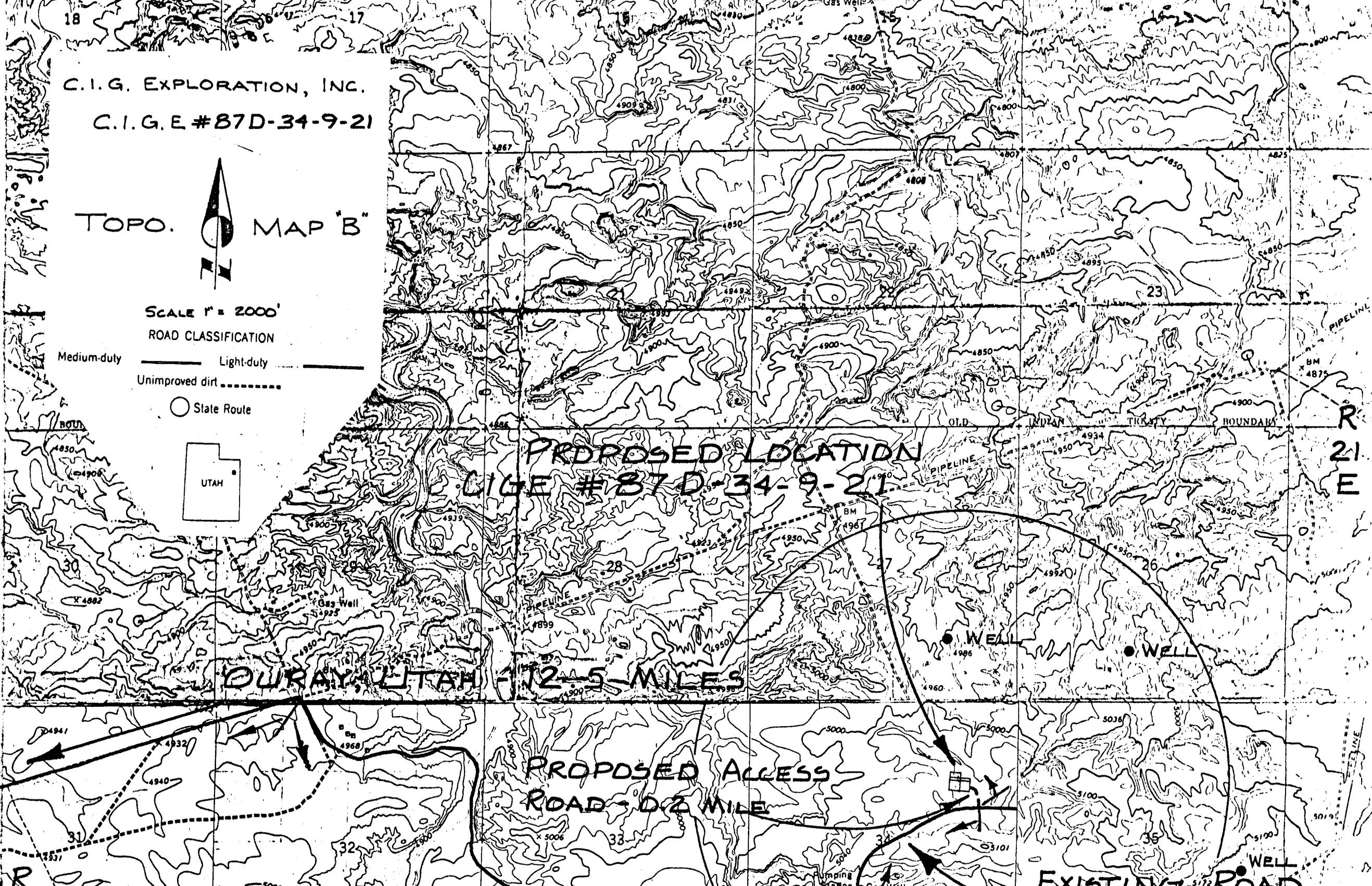
PROPOSED LOCATION  
C.I.G.E #87D-34-9-21

DURAY, UTAH - 12-5 MILES

PROPOSED ACCESS  
ROAD - 0.2 MILE

EXISTING ROAD

R  
21  
E



21  
E

2.9 MILES

0.7 MILES

T 9 S

T 10 S

WELL

WELL

WELL

WELL

Drill Hole  
5198

Gas Well

GAS

BITTER CREEK

BITTER CREEK

ABOVEGROUND PIPELINE

Gas Well

16

15

14



\*\* FILE NOTATIONS \*\*

DATE: Jan. 20, 1981  
OPERATOR: CIG Exploration, Inc.  
WELL NO: CIG E 87D-34-9-21  
Location: Sec. 34 T. 9S R. 21E County: Wintah

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

API Number 43-047-30869

CHECKED BY:

Petroleum Engineer: M.S. Munder 1-22-81

Director: \_\_\_\_\_

Administrative Aide: Approved in NBU

APPROVAL LETTER:

Bond Required:  Survey Plat Required:

Order No. \_\_\_\_\_ O.K. Rule C-3

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

Lease Designation Prod. Plotted on Map

Approval Letter Written

Hot Line  P.I.

January 22, 1981

CIG Exploration, Inc.  
P. O. Box 749  
Denver, Colorado 80201

Re: Well No. CIGE #87D-34-9-21  
Sec. 34, T. 9S, R. 21E, SE NE  
Uintah County, Utah

Insofar as this office is concerned, approval to drill the above referred to gas well is hereby granted in accordance with Section 40-6-11, Utah Code Annotated 1953; and predicated on Rule A-3, General Rules and Regulations and Rules of Practice and Procedure.

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

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

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

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

The API number assigned to this well is 43-047-30869.

Sincerely,

DIVISION OF OIL, GAS, AND MINING



Michael T. Minder  
Petroleum Engineer

/ko  
cc: USGS

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Coastal Oil & Gas Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 749, Denver, Colorado 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface  
1600' FNL / 1168' FEL (SE NE)

14. PERMIT NO.  
43-047-30869

15. ELEVATIONS (Show whether DF, RT, OR, etc.)  
5083' Ungr. Gr.

5. LEASE DESIGNATION AND SERIAL NO.  
U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
N/A

7. UNIT AGREEMENT NAME  
Natural Buttes Unit

8. FARM OR LEASE NAME  
Natural Buttes Unit

9. WELL NO.  
CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT  
Natural Buttes Field

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA  
Section 34-T9S-R21E

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) Proposed Gas Well Prod. Hookup X  
(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.)\*

SUPPLEMENTAL TO APPLICATION FOR PERMIT TO DRILL

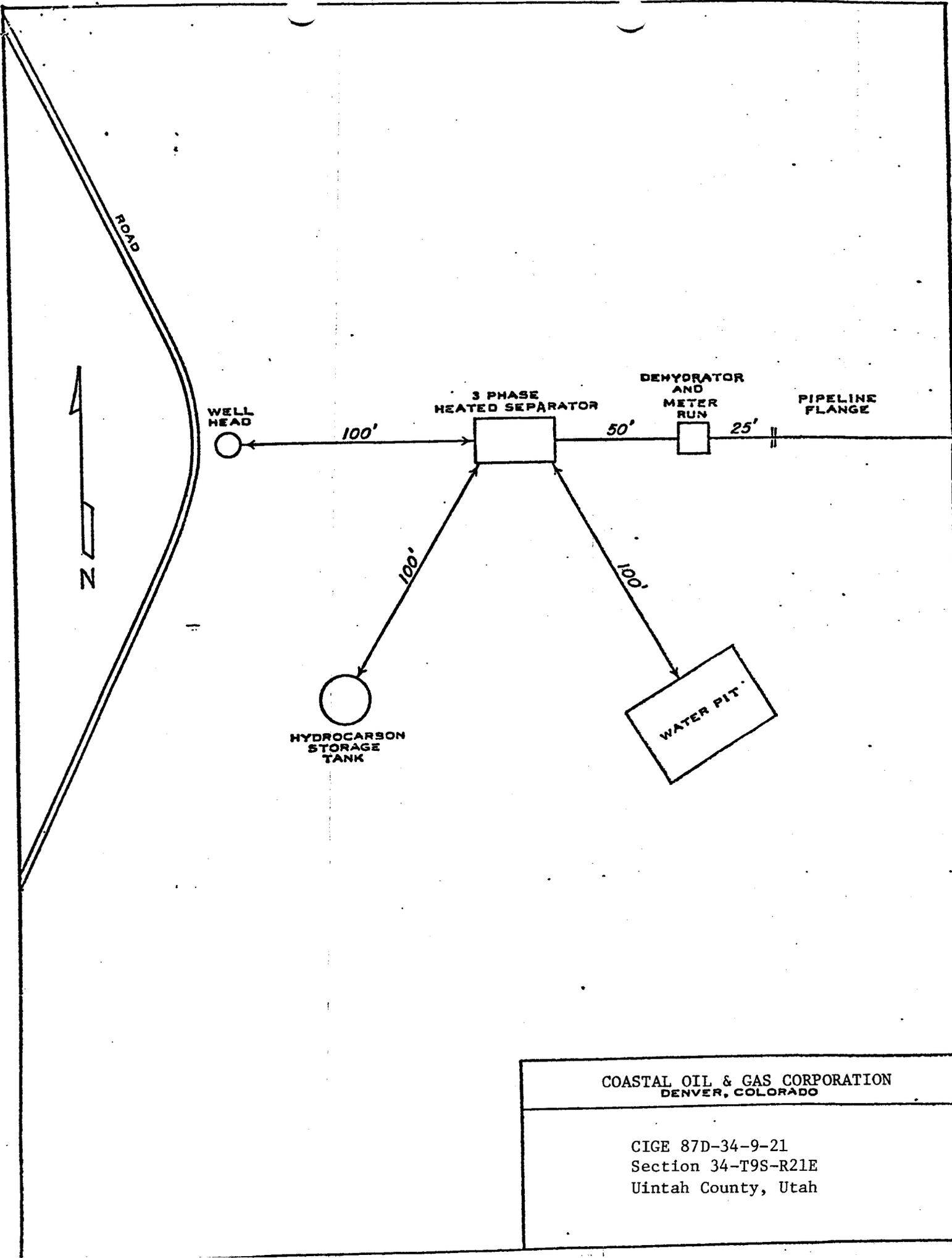
- (1) Proposed Gas Well Production Hookup
    - A Typical Well Head Installation
    - B Typical Main Lines and Pipe Anchor Detail
  - (2) Proposed Pipeline Map
  - (3) Proposed Road and Flow Line and Pipeline Right of Way
- For On-Site Contact: Ira K. McClanahan at (303) 473-2300

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

SIGNED *E. R. Midkiff* TITLE District Production Manager DATE March 16, 1981  
E. R. Midkiff

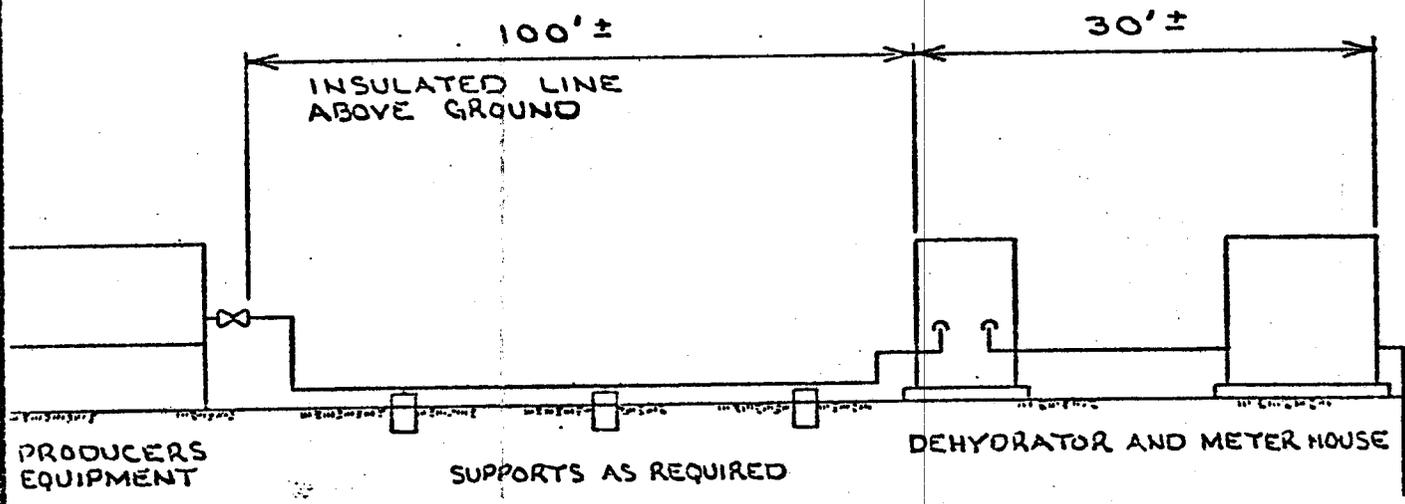
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:



COASTAL OIL & GAS CORPORATION  
DENVER, COLORADO

CIGE 87D-34-9-21  
Section 34-T9S-R21E  
Uintah County, Utah



FLOW LINE BURIED SUFFICIENT LENGTH FOR ADEQUATE ANCHOR

|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Colorado Interstate Gas Co.  
COLORADO SPRINGS, COLORADO

TYPICAL WELL HEAD INSTALLATION  
NATURAL BUTTES FIELD

UINTAH COUNTY, UTAH

|           |           |             |      |    |      |       |               |            |            |             |
|-----------|-----------|-------------|------|----|------|-------|---------------|------------|------------|-------------|
| NO.       | C. O. NO. | DESCRIPTION | DATE | BY | CHK. | APPR. | SCALE: NONE   | DRAWN: RWP | APP.       | 115FP-2 1/8 |
| REVISIONS |           |             |      |    |      |       | DATE: 7-18-77 | CHECK:     | c o. 23858 |             |

PIPELINE TO BE ADEQUATELY ANCHORED TO PREVENT UNDUE MOVEMENT OR STRAIN TO EXISTING FACILITY. NUMBER AND SPACING OF ANCHORS TO BE DETERMINED IN FIELD

FOR PIPE ANCHOR DETAIL SEE DWG. 80FM3-4A

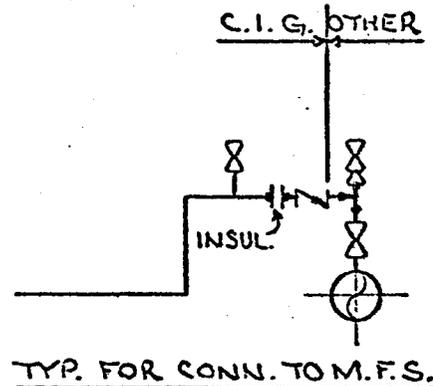
20'±

O. B. U. S.

EXIST. PIPELINE

ALTERNATE ANCHOR - BURY PIPELINE MIN. OF 18"

(TYP. FOR G.P.E. OR C.I.G.)



| NO.       | C.O. NO. | DESCRIPTION           | DATE    | BY  | CHK. | APPR. |
|-----------|----------|-----------------------|---------|-----|------|-------|
| 1         | 2385B    | REVISE STARTING POINT | 8-22-77 | RWP |      |       |
| REVISIONS |          |                       |         |     |      |       |

Colorado Interstate Gas Co.  
COLORADO SPRINGS, COLORADO

TYPICAL CONNECTION TO MAIN LINES AND PIPE ANCHOR DETAIL - NATURAL BUTTES FIELD  
JUNTA COUNTY, UTAH

SCALE: NONE DRAWN: RWP APP: MM  
DATE: 7-7-77 CHECK: [Signature] C.O. 2385B

115FP-1 1/8

ESTIMATE SKETCH

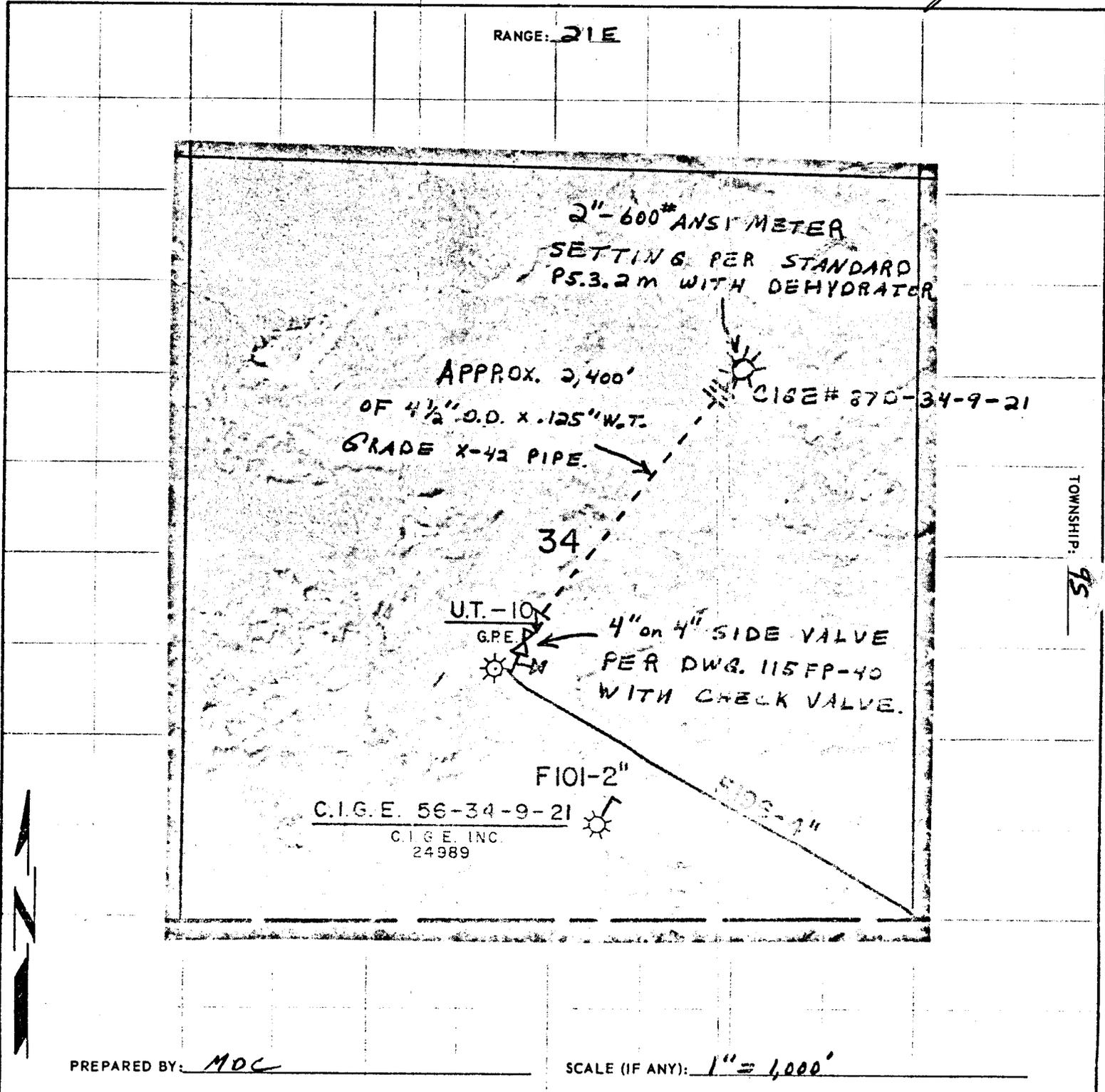
DATE: 3-5-81  
STARTING DATE: \_\_\_\_\_  
EST. COMP. DATE: \_\_\_\_\_  
 COMPANY  CONTRACT

COLORADO INTERSTATE GAS COMPANY  
 NORTHWEST PIPELINE CORPORATION

W. O. NO.: 27224  
REVISION NO.: \_\_\_\_\_  
BUDGET NO.: \_\_\_\_\_  
RELATED DWG.: 115 FU-1B

LOCATION: C NE Section 34-9S-21E COUNTY: Utah STATE: Utah  
DESCRIPTION OF WORK: Connect CIGE # 870-34-9-21  
Natural Buttes

REQUESTED BY: \_\_\_\_\_ APPROXIMATE MILEAGE: \_\_\_\_\_ PROJECT ENGINEER: JFK



TOWNSHIP: 9S

PREPARED BY: MDC

SCALE (IF ANY): 1" = 1,000'

Freehand sketch of location of proposed installation to be constructed or retired showing relative location of existing facilities in area.

Statement for permit to lay flow line, to be included with application for Drilling Permit:

Upon approval of all concerned regulatory agencies, CIG proposes to install a surface flow line from CIGE #87D-34-9-21 in a southwesterly direction through the NE/4 of Section 34 connecting to Line F196-4" in the SW/4 of Section 34, all in 9S-21E. The line will be approximately 2,400' long, as shown on the attached sketches.

Pipe will be 4-1/2" O.D. x .125" W.T., Grade X-42 EW. It will be butt-welded in place, using portable electric welding machines, and will be laid aboveground except where burial is necessary for road crossing, ditches, or other obstructions. Magnesium anodes will be installed at the dehydrator, meter setting, road crossings, underground piping at stream crossings, and at producer's separator for corrosion protection.

CIG will connect to producer's separator and install dehydration and metering facilities within 100' of the connection.

Some damage will be incurred by trucks transporting pipe and welding equipment over the pipeline route, but surface disturbance will be held to a minimum.

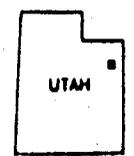
C.I.G. EXPLORATION, INC.  
C.I.G.E # 87D-34-9-21

TOPO.  MAP 'B'

SCALE 1" = 2000'

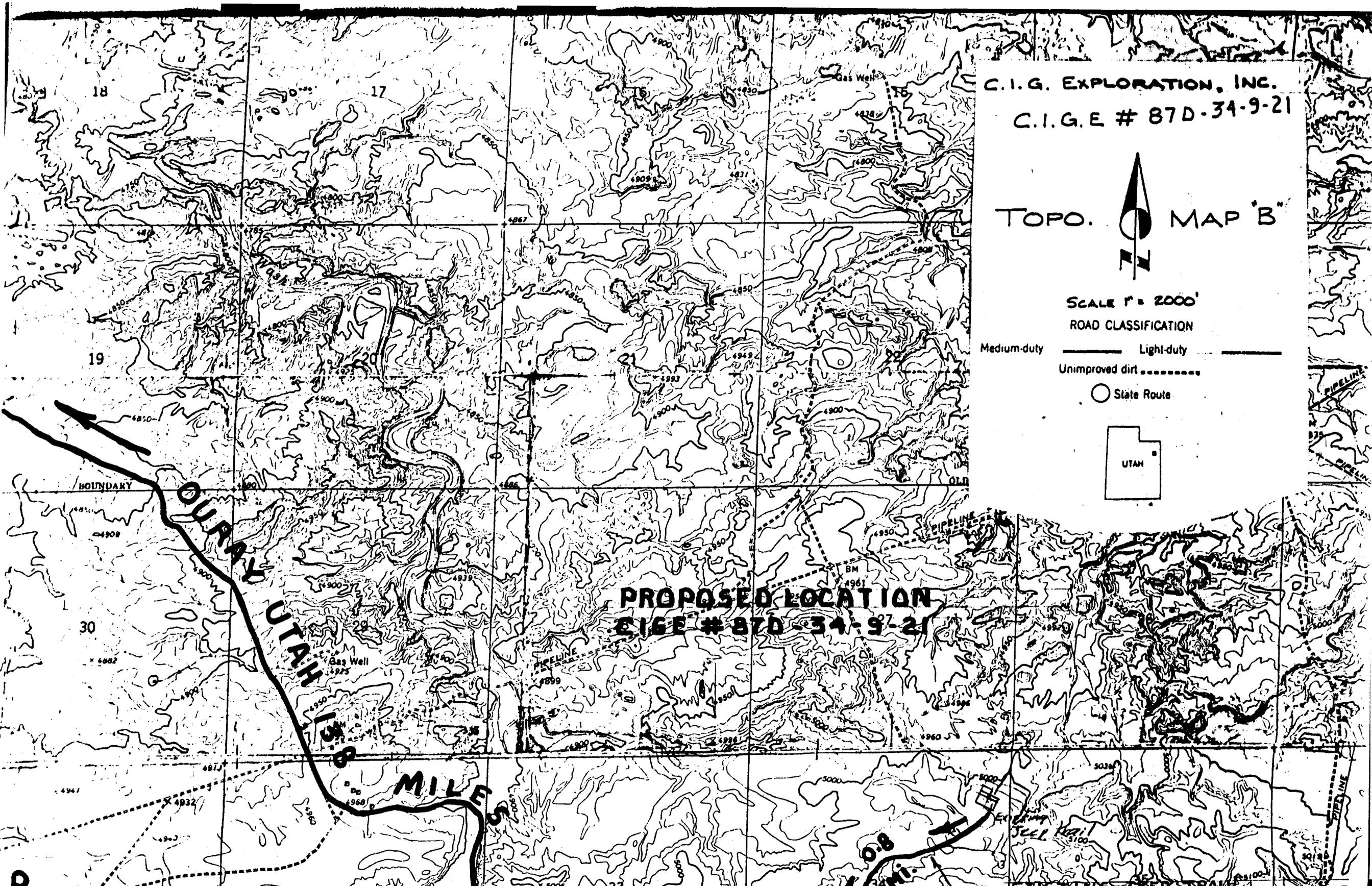
ROAD CLASSIFICATION

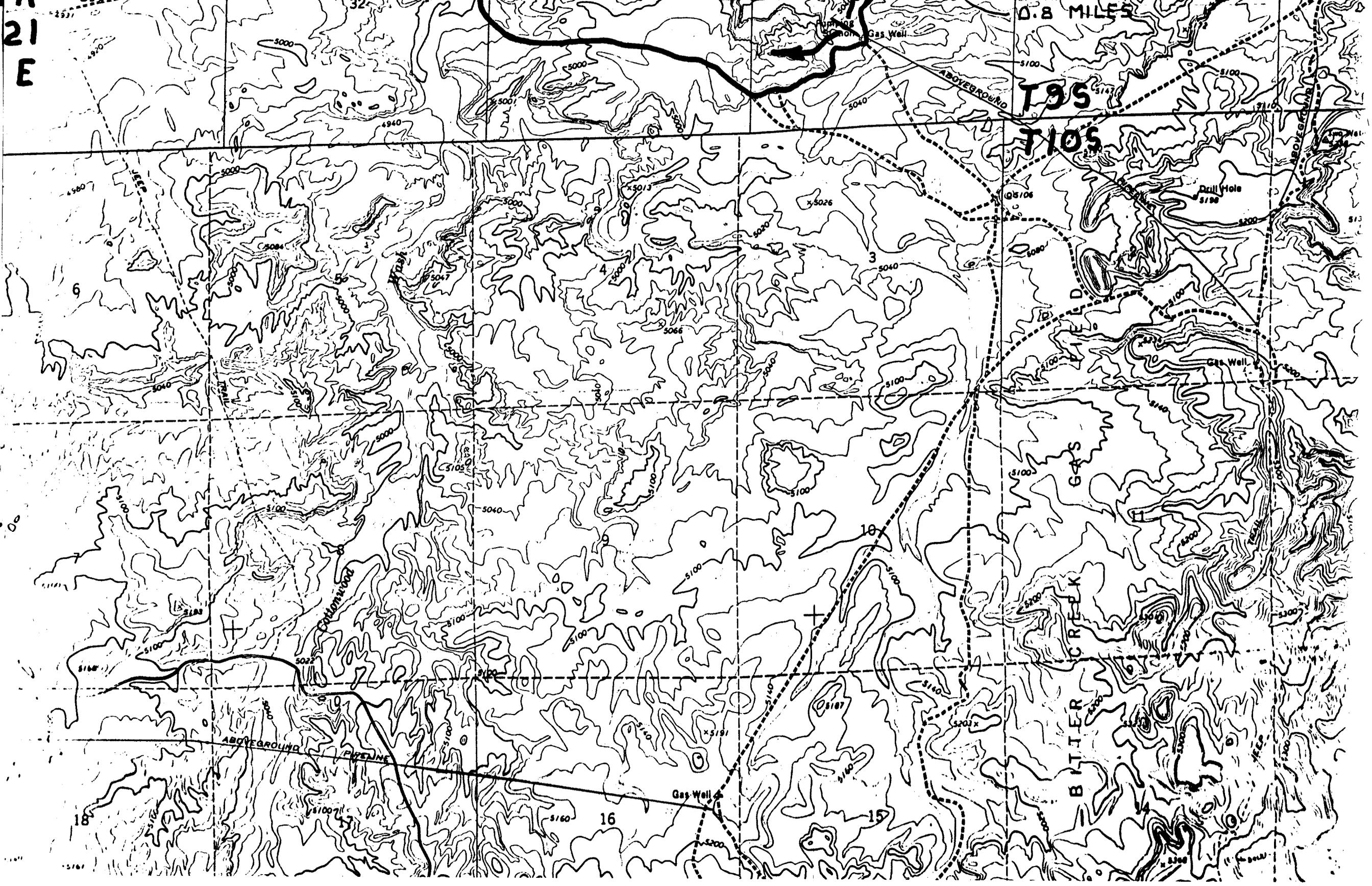
Medium-duty  Light-duty   
Unimproved dirt   
○ State Route



**PROPOSED LOCATION**  
**E.I.G.E # 87D-34-9-21**

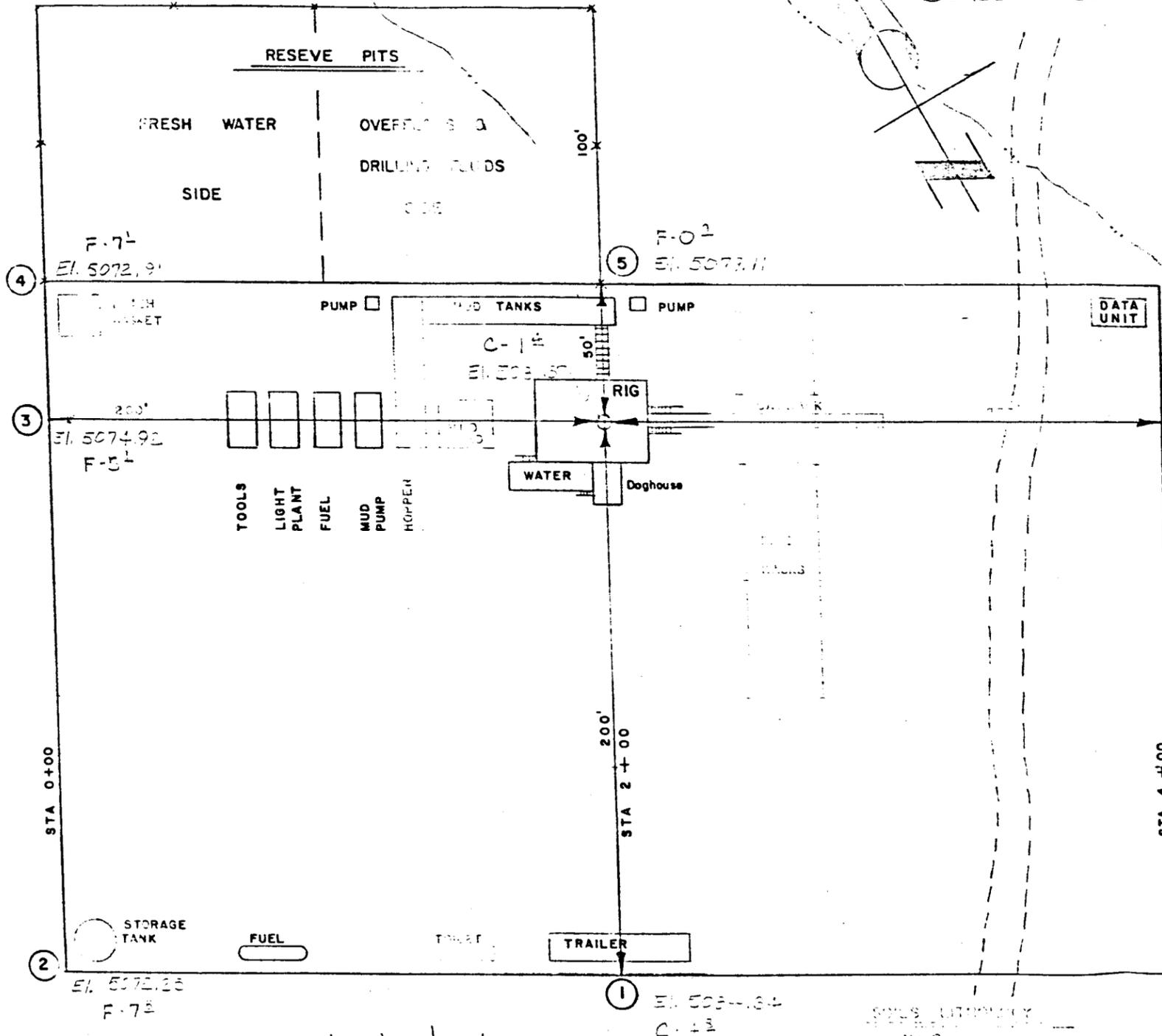
UTAH  
8 MILES





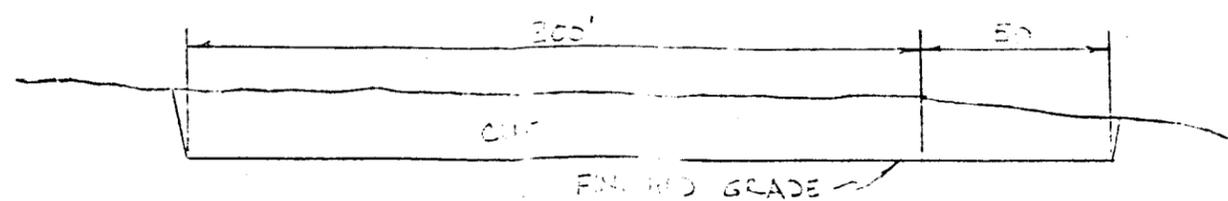
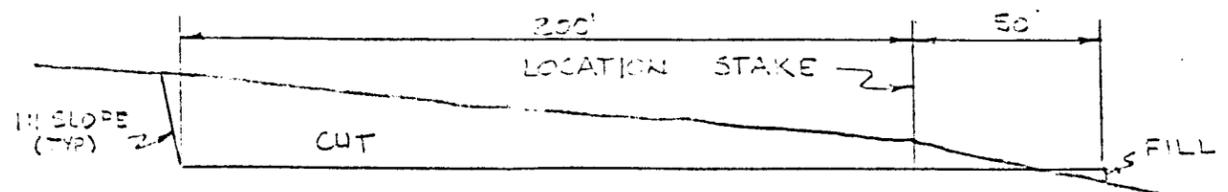
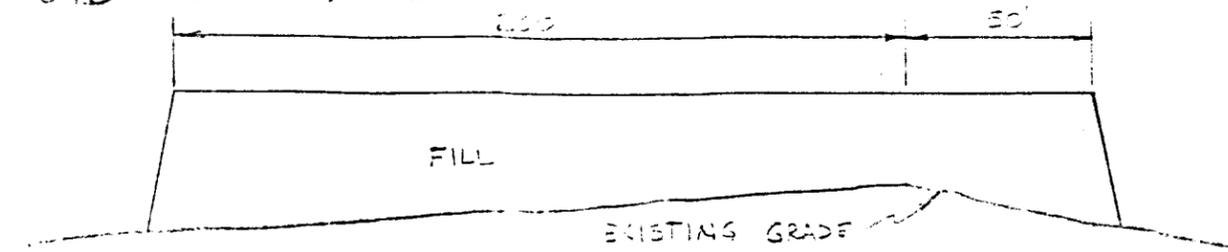
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# 37D-34-9-21

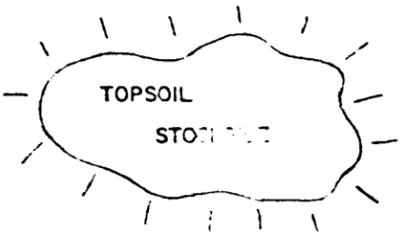


SCALE: 1" = 50'

C  
R  
O  
S  
S  
  
S  
E  
C  
T  
I  
O  
N  
S



1" = 10'  
1" = 50'



SOILS: LIGHTLY  
SANDY CLAY

Light Brown  
Sandy Clay

|                     | APPROXIMATE YARDAGES |
|---------------------|----------------------|
| Cubic Yards of Cut  | 17,640               |
| Cubic Yards of Fill | 1,200                |

**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.)

**RECEIVED**  
JUL 11 1981

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Coastal Oil & Gas Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 749, Denver, Colorado 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface  
967' FNL/422' FEL (NE NE)

14. PERMIT NO. 43-047-30869

15. ELEVATIONS (Show whether DF, ST, OR, etc.)  
5083' Ungr. Gr.

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U-01194-A-ST

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8. FARM OR LEASE NAME  
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10. FIELD AND POOL, OR WILDCAT  
Natural Buttes Field

11. SEC., T., R., M., OR B.L.E. AND SURVEY OR AREA  
Section 34-T9S-R21E

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"/>               |  |

(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.)\*

Location moved from 1600' FNL/1168' FEL (SE NE) to 967' FNL/422' FEL (NE NE) Section 34-T9S-R21E in order to be compatible with proposed oil shale development plans which will locate a plant pillar and haulage way under the original location.

A new survey plat, location layout and topo map indicating access are attached.

**APPROVED BY THE STATE OF UTAH DIVISION OF OIL, GAS, AND MINING**  
DATE: 7/21/81  
BY: [Signature]

18. I hereby certify that the foregoing is true and correct  
SIGNED [Signature] TITLE Dist. Drilling Manager DATE July 2, 1981  
H. E. Aab

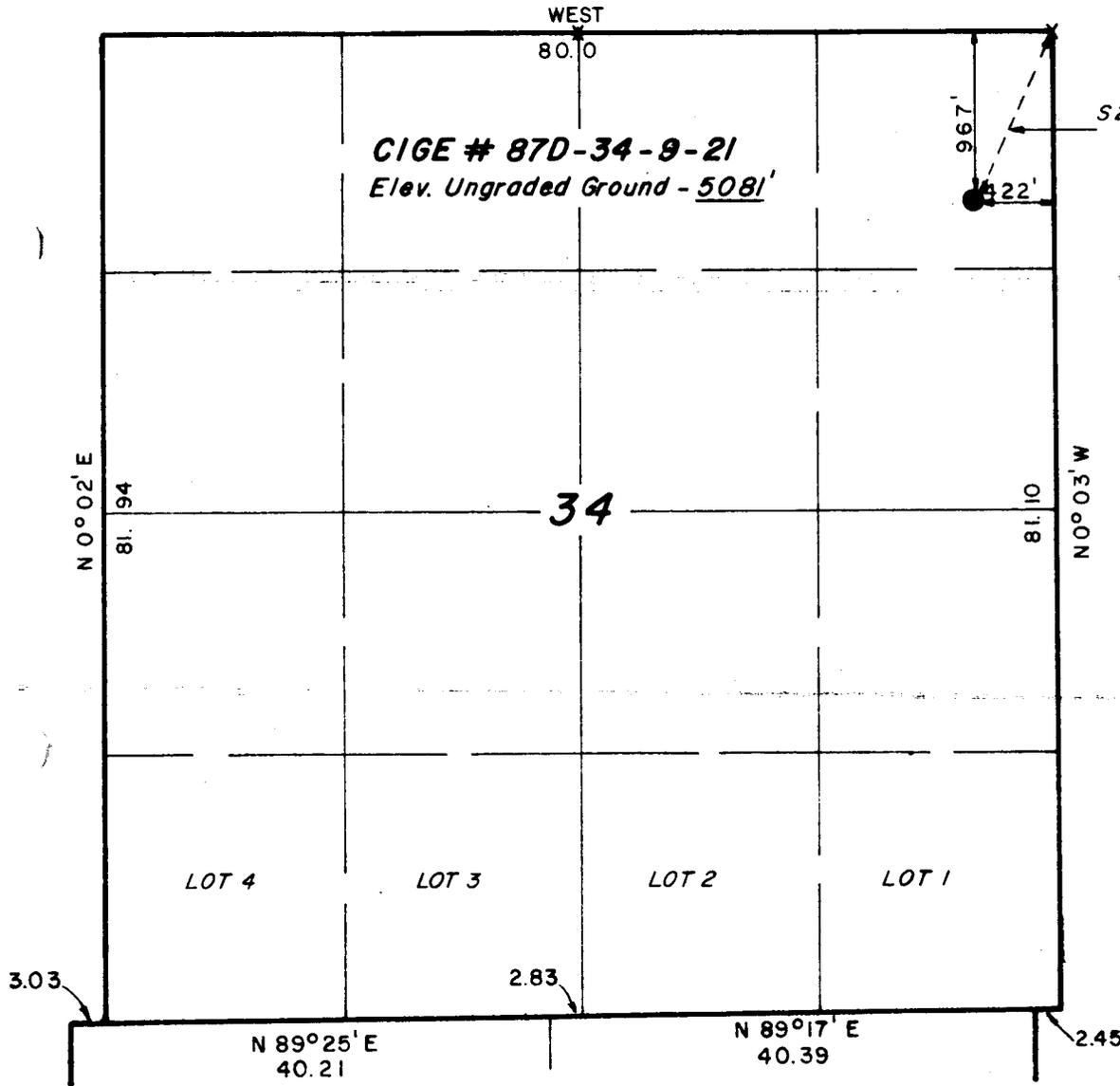
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

T 9 S, R 21 E, S.L.B. & M.

PROJECT

CIG EXPLORATION INC.

Well location, CIGE # 87D-34-9-21  
located as shown in the NE1/4 NE1/4  
Section 34, T9S, R21E, S.L.B. & M.  
Uintah County, Utah



CIGE # 87D-34-9-21  
Elev. Ungraded Ground - 5081'

S 23° 32' 25" W  
1054.86'

9.67'

522'



CERTIFICATE

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.

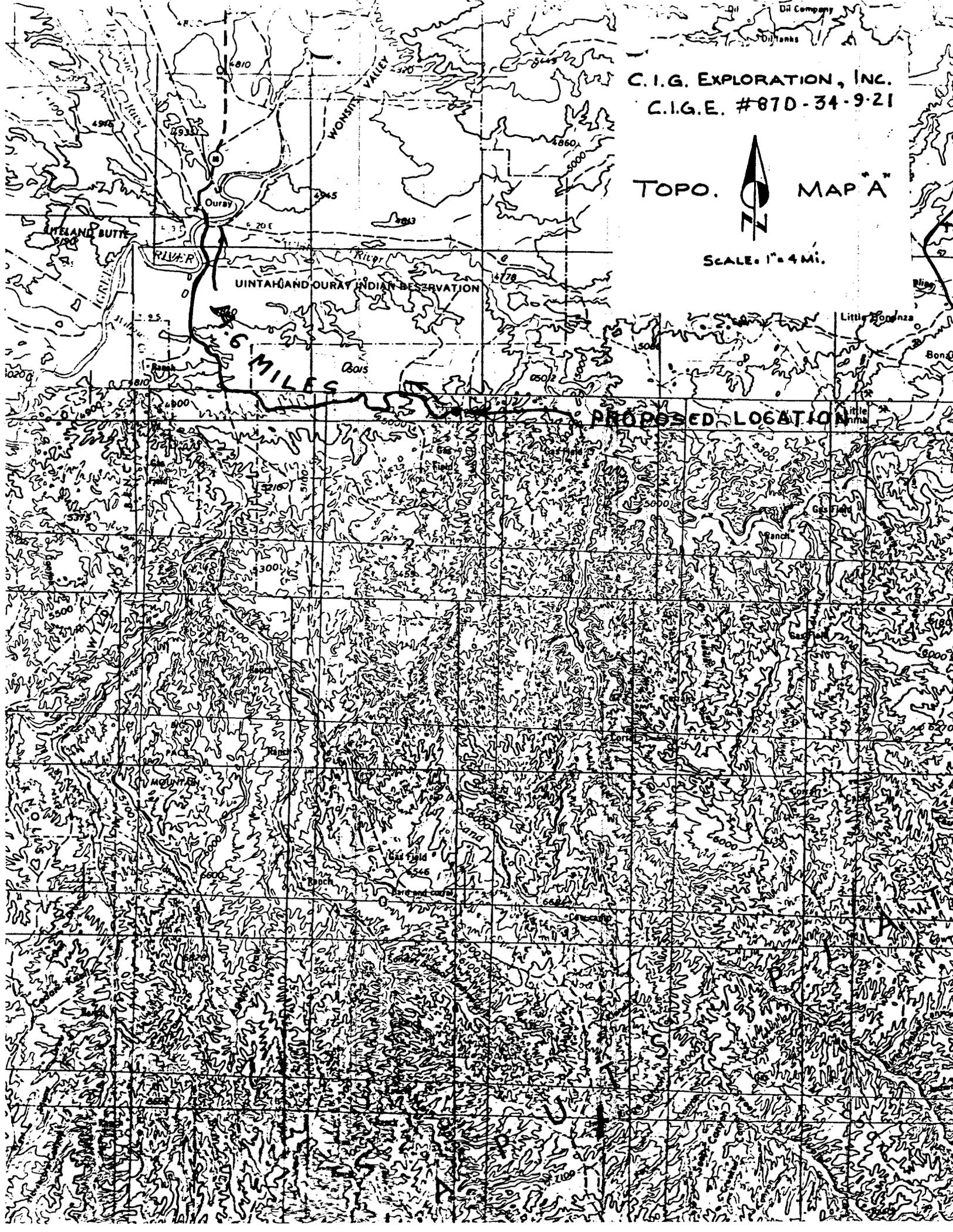
*Laurence C. Kay*

REGISTERED LAND SURVEYOR  
REGISTRATION NO 3137  
STATE OF UTAH

UINTAH ENGINEERING & LAND SURVEYING  
P.O. BOX Q1 - 85 SOUTH - 200 EAST  
VERNAL, UTAH - 84078

|         |                |            |                      |
|---------|----------------|------------|----------------------|
| SCALE   | 1" = 1000'     | DATE       | 5 / 21 / 81          |
| PARTY   | DA RT DC       | REFERENCES | GLO PLAT             |
| WEATHER | CLOUDY / RAINY | FILE       | CIG EXPLORATION INC. |

X = Section Corners Located



C.I.G. EXPLORATION, INC.  
C.I.G.E. #87D-34-9-21

TOPO.  MAP A  
SCALE: 1" = 4 Mi.

6 MILES

PROPOSED LOCATION

WONNIE VALLEY

UINTAH AND OURAY INDIAN RESERVATION

OURAY RIVER

LITELAND BUTTE

OURAY

Little Bonanza

Bonanza

Gas Field

Ranch

Gas Field

NOTICE OF SPUD

WELL NAME: CIGF 87D-34-9-21

LOCATION: NE 1/4 NE 1/4 SECTION 34 T-95 R-21E

COUNTY: Uintah STATE: Utah

LEASE NO.: U-0194-A-5t LEASE EXPIRATION DATE: HBP

UNIT NAME (If Applicable): Natural Buttes Unit

DATE & TIME SPURRED: 9/3/81 1 pm

DRY HOLE SPUDDER: Ram Air Drilling

DETAILS OF SPUD (Hole, Casing, Cement, etc.): Ø 270' 12 1/4" hole  
Run 5 jts 9 5/8" 36# K55-STC 215' Land @  
213' GL cmt by HOWCO w/125 st class 'H' 2% CaCl<sub>2</sub>

ROTARY RIG NAME & NUMBER: Allwestern #4

APPROXIMATE DATE ROTARY MOVES IN: November 29, 1981

FOLLOW WITH SUNDRY NOTICE

USGS CALLED: DATE: September 8, 1981

PERSON CALLED: Vicki McCallister

STATE CALLED: DATE: September 8, 1981

PERSON CALLED: Cindy Bates

REPORTED BY: Jessie C. Dault

NOTICE OF SPUD

*10/20/81*

Caller: Tracy

Phone: \_\_\_\_\_

Well Number: CTLE 87-D-39-9-21

Location: ~~NE~~ NE 34-95-21E

County: Utah State: Utah

Lease Number: U-01199A-51

Lease Expiration Date: \_\_\_\_\_

Unit Name (If Applicable): Natural Buttes

Date & Time Spudded: 9/3/81 1:00 P.M.

Dry Hole Spudded Rotary: \_\_\_\_\_

Details of Spud (Hole, Casing, Cement, etc.) \_\_\_\_\_

Rotary Rig Name & Number: \_\_\_\_\_

Approximate Date Rotary Moves In: 11/25/81

FOLLOW WITH SUNDRY NOTICE

Call Received By: Tracy

Date: 9/8/81

DIVISION OF OIL, GAS AND MINING

SPUDDING INFORMATION

NAME OF COMPANY: Coastal Oil & Gas

WELL NAME: CIGE 87D-34-9-21

SECTION <sup>SE NE</sup> 34 TOWNSHIP 9S RANGE 21E COUNTY Uintah

DRILLING CONTRACTOR All Western

RIG # 4

SPUDDED: DATE 9-3-81

TIME 1:00 p.m.

HOW Dry Hole

DRILLING WILL COMMENCE Nov. 29, 1981

REPORTED BY Tracy Dawe

TELEPHONE # (303) 572-1121

DATE 9-8-81 SIGNED Sandy Bates

DEPARTMENT OF NATURAL RESOURCES  
DIVISION OIL, GAS, AND MINING

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Coastal Oil & Gas Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 749, Denver, Colorado 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface  
967' ENL/422' FEL (NE NE)

14. PERMIT NO. 43-047-30869

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
5083' Ingr. Gr.

5. LEASE DESIGNATION AND SERIAL NO.  
U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
N/A

7. UNIT AGREEMENT NAME  
Natural Buttes Unit

8. FARM OR LEASE NAME  
Natural Buttes Unit

9. WELL NO.  
CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT  
Natural Buttes Field

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Section 34-T9S-R21E

12. COUNTY OR PARISH  
Uintah

13. STATE  
Utah

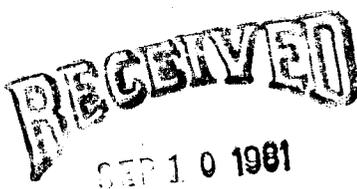
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| 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) _____                                  | Spud <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.)\*

Verbal report made to USGS (Vicki) and State (Cindy) on 9/8/81. Please see attached for additional details.



DIVISION OF OIL, GAS & MINING

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

SIGNED [Signature] TITLE District Drilling Manager DATE Sept. 8, 1981  
N. E. Aab

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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

(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

5. LEASE DESIGNATION AND SERIAL NO.

U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

Natural Buttes Unit

8. FARM OR LEASE NAME

Natural Buttes Unit

9. WELL NO.

CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT

Natural Buttes Field

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

Section 34-T9S-R21E

12. COUNTY OR PARISH 13. STATE

Uintah

Utah

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
 Coastal Oil & Gas Corporation

3. ADDRESS OF OPERATOR  
 P. O. Box 749, Denver, Colorado 80201

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

967' FNL/422' FEL (NE NE)

14. PERMIT NO.  
 43-047-30869

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
 5083' Ingr. Gr.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF   
 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)

REPAIRING WELL   
 ALTERING CASING   
 ABANDONMENT\*   
 Operations

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

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

Well spudded 9/3/81. WORT.

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

SIGNED H. E. Aab

TITLE District Drilling Manager

DATE Sept. 17, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

|  |                      |
|--|----------------------|
| 5. LEASE DESIGNATION AND SERIAL NO.              | U-01194-A-ST         |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME             | N/A                  |
| 7. UNIT AGREEMENT NAME                           | Natural Buttes Unit  |
| 8. FARM OR LEASE NAME                            | Natural Buttes Unit  |
| 9. WELL NO.                                      | CIGE 87D-34-9-21     |
| 10. FIELD AND POOL, OR WILDCAT                   | Natural Buttes Field |
| 11. SEC., T., R., M., OR BLM. AND SURVEY OR ARRA | Section 34-T9S-R21E  |
| 12. COUNTY OR PARISH                             | Uintah               |
| 13. STATE  | Utah                 |

|   |   |
|---|---|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER   |   |
| 2. NAME OF OPERATOR<br>Coastal Oil & Gas Corporation  |   |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 749, Denver, Colorado 80201   |   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br>At surface<br>967' FNL/422' FEL (NE NE) |   |
| 14. PERMIT NO.<br>43-047-30869  | 15. ELEVATIONS (Show whether DP, RT, OR, etc.)<br>5083' Ingr. Gr. |

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

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

(Other) Proposed Gas Well Prod. Hookup

(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.)\*

SUPPLEMENT TO APPLICATION FOR PERMIT TO DRILL

- (1) PROPOSED GAS WELL PRODUCTION HOOKUP
    - (A) TYPICAL WELL HEAD INSTALLATION
    - (B) TYPICAL MAIN LINES AND PIPE ANCHOR DETAIL
  - (2) PROPOSED PIPELINE MAP
  - (3) PROPOSED ROAD AND FLOW LINE AND PIPELINE RIGHT OF WAY
- FOR ON-SITE CONTACT: IRA K. McCLANAHAN AT (303) 473-2300

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

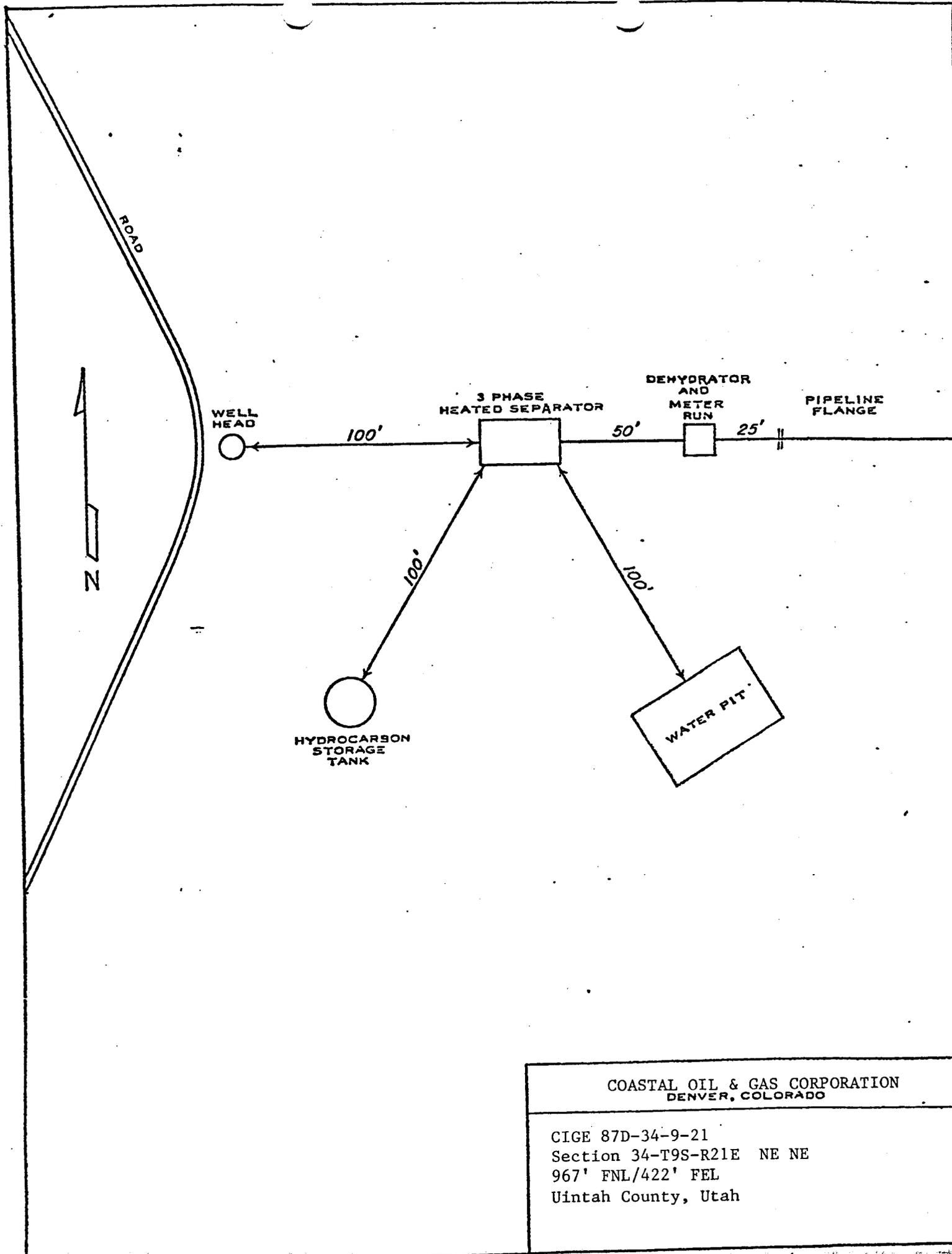
SIGNED F. R. Midkiff TITLE Production Manager DATE Sept. 28, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side



COASTAL OIL & GAS CORPORATION  
DENVER, COLORADO

CIGE 87D-34-9-21  
Section 34-T9S-R21E NE NE  
967' FNL/422' FEL  
Uintah County, Utah

Statement for permit to lay flow line, to be included with application for Drilling Permit:

Upon approval of all concerned regulatory agencies, CIG proposes to install a surface flow line from CIGE 87D-34-9-21<sup>A</sup> in a northeasterly direction through the NE/4 of Section 34 and the SE/4 of Section 27, connecting to Line F16-3" in the SW/4 of Section 26, all in 9S-21E. The line will be approximately 2,600' long, as shown on the attached sketches.

Pipe will be 4-1/2" O.D. x .125" W.T., Grade X-42 EW. It will be butt-welded in place, using portable electric welding machines, and will be laid aboveground except where burial is necessary for road crossing, ditches, or other obstructions. Magnesium anodes will be installed at the dehydrator, meter setting, road crossings, underground piping at stream crossings, and at producer's separator for corrosion protection.

CIG will connect to producer's separator and install dehydration and metering facilities within 100' of the connection.

Some damage will be incurred by trucks transporting pipe and welding equipment over the pipeline route, but surface disturbance will be held to a minimum.

ESTIMATE SKETCH

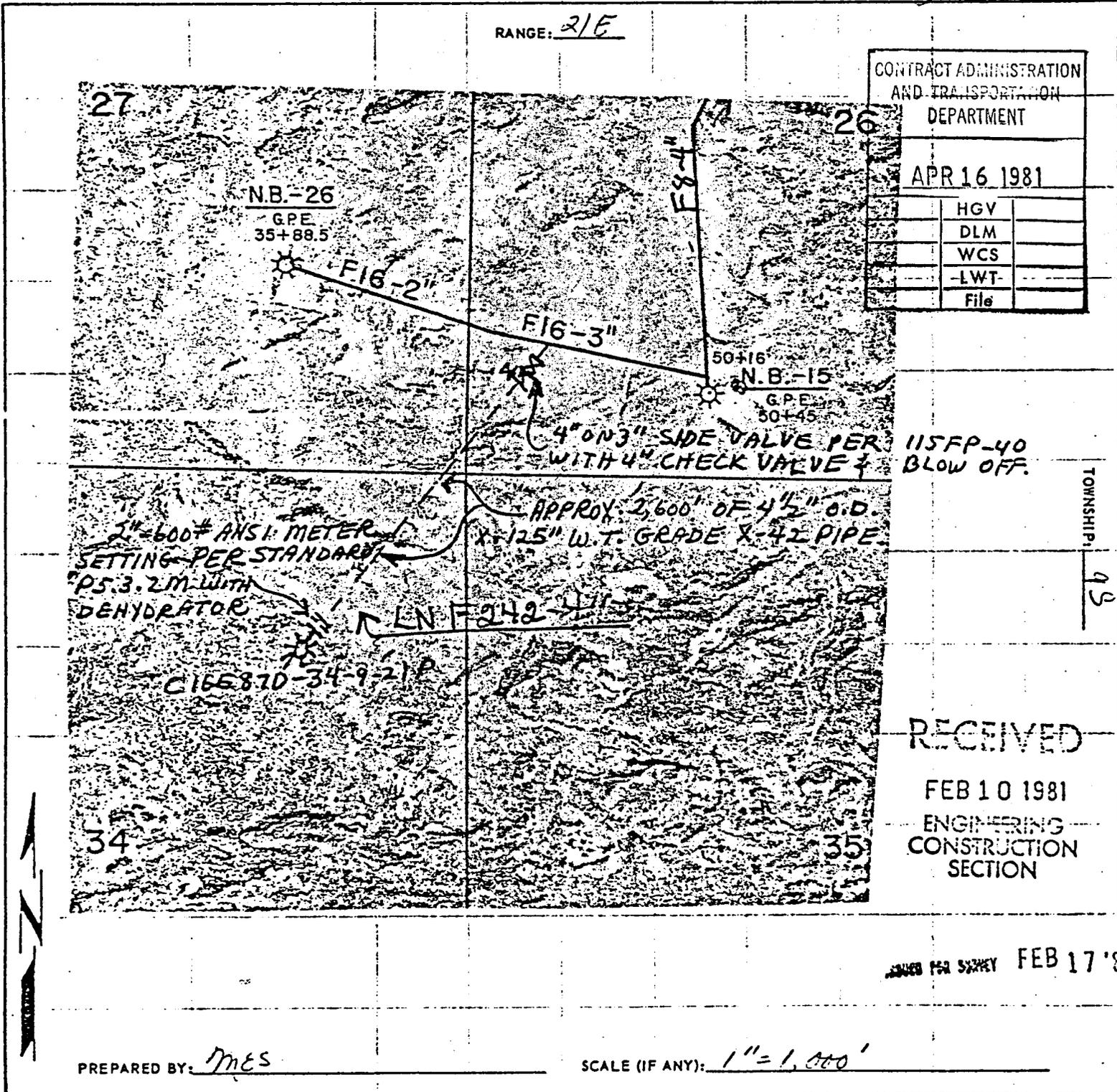
DATE: 2-6-81  
STARTING DATE: \_\_\_\_\_  
EST. COMP. DATE: \_\_\_\_\_  
 COMPANY  CONTRACT

COLORADO INTERSTATE GAS COMPANY  
 NORTHWEST PIPELINE CORPORATION

W. O. NO.: 27224\*  
REVISION NO.: 3-5-81  
BUDGET NO.: 4-15-81  
RELATED DWG.: \_\_\_\_\_

LOCATION: C. ME Section 34-95-21E COUNTY: Montezuma STATE: Utah  
DESCRIPTION OF WORK: CONTRACT #87K-34-9-21P  
Change route Natural Buttes  
Go back to original route

REQUESTED BY: \_\_\_\_\_ APPROXIMATE MILEAGE: \_\_\_\_\_ PROJECT ENGINEER: JJK



|   |  |
|---|--|
| CONTRACT ADMINISTRATION AND TRANSPORTATION DEPARTMENT |  |
| APR 16 1981   |  |
| HGV   |  |
| DLM   |  |
| WCS   |  |
| LWT   |  |
| File  |  |

115FP-40 BLOW OFF.

RECEIVED  
FEB 10 1981  
ENGINEERING  
CONSTRUCTION  
SECTION

SCALE FOR SKETCH FEB 17 '81

PREPARED BY: MES

SCALE (IF ANY): 1" = 1,000'

Freehand sketch of location of proposed installation to be constructed or retired showing relative location of existing facilities in area.

PIPELINE TO BE ADEQUATELY ANCHORED TO PREVENT UNDUE MOVEMENT OR STRAIN TO EXISTING FACILITY. NUMBER AND SPACING OF ANCHORS TO BE DETERMINED IN FIELD

FOR PIPE ANCHOR DETAIL SEE DWG. 80FM3-4A

20'±

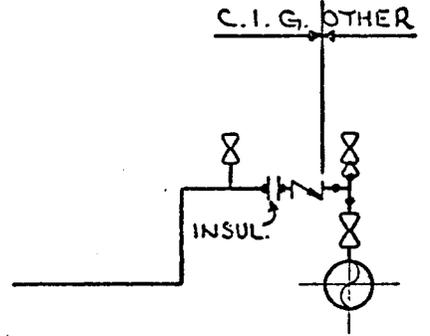
O. B. V. C. Y. S. V.

EXIST. PIPELINE

ALTERNATE ANCHOR - BURY PIPELINE MIN. OF 18"

(TYP. FOR G.P.E. OR C.I.G.)

C.I.G. OTHER



TYP. FOR CONN. TO M.F.S.

|           |         |                       |         |     |      |      |
|-----------|---------|-----------------------|---------|-----|------|------|
|           |         |                       |         |     |      |      |
|           |         |                       |         |     |      |      |
|           |         |                       |         |     |      |      |
|           |         |                       |         |     |      |      |
| 1         | 2385B   | REVISE STARTING POINT | 8-22-77 | RWP |      |      |
| NO        | C O. NO | DESCRIPTION           | DATE    | BY  | CHK. | APP. |
| REVISIONS |         |                       |         |     |      |      |

Colorado Interstate Gas Co.  
COLORADO SPRINGS, COLORADO

TYPICAL CONNECTION TO MAIN LINES AND PIPE ANCHOR DETAIL - NATURAL BUTTES FIELD  
UINTA COUNTY, UTAH

SCALE: NONE DRAWN: RWP APP: MM  
DATE: 7-7-77 CHECK: [Signature] C O 2385B 115FP-1 1/8



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

(Other instructions on reverse side)

|   |  |   |
|---|--|---|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.<br>U-01194-A-ST                     |
|   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br>N/A                             |
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER   |  | 7. UNIT AGREEMENT NAME<br>Natural Buttes Unit                           |
| 2. NAME OF OPERATOR<br>Coastal Oil & Gas Corporation  |  | 8. FARM OR LEASE NAME<br>Natural Buttes Unit                            |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 749, Denver, Colorado 80201   |  | 9. WELL NO.<br>CIGE 87D-34-9-21   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br>At surface<br>967' FNL/422' FEL (NE NE)                                 |  | 10. FIELD AND POOL, OR WILDCAT<br>Natural Buttes Field                  |
| 14. PERMIT NO.<br>43-047-30869  |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Section 34-T9S-R21E |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.)<br>5083' Ungr. Gr.   |  | 12. COUNTY OR PARISH<br>Uintah  |
|   |  | 18. STATE<br>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) _____   | Operations <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.)\*

Well spudded 9/3/81. WORT.

OCT 30 1981  
 DIVISION OF OIL & MINING

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

SIGNED H. E. Aab TITLE District Drilling Manager DATE Oct. 16, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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

(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

1.  OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Coastal Oil & Gas Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 749, Denver, Colorado 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
 At surface  
967' FNL/422' FEL (NE NE)

14. PERMIT NO. 43-047-30869

15. ELEVATIONS (Show whether DF, RT, OR, etc.)  
5083' Ingr. Gr.

5. LEASE DESIGNATION AND SERIAL NO.  
U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
N/A

7. UNIT AGREEMENT NAME  
Natural Buttes Unit

8. FARM OR LEASE NAME  
Natural Buttes Unit

9. WELL NO.  
CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT  
Natural Buttes Field

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Section 34-T9S-R21E

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) <u>Operations</u>                      | <input checked="" type="checkbox"/>      |

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

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

Oct. 16 - Nov. 15, 1981  
Well spudded 9/3/81. WORT.

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

SIGNED [Signature] TITLE District Drilling Manger DATE Nov 18, 1981  
H. E. Aab

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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

(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

|  |   |   |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
|--|---|---|--|-----------------------|--|--|---|---|---|---|--|---|--|---|-----------------------------------|--|---------------------------------------|--------------------------------------|---------------------------------------|---|--|--|
| 1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER   |   | 5. LEASE DESIGNATION AND SERIAL NO.<br>U-01194-A-ST           |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
| 2. NAME OF OPERATOR<br>Coastal Oil & Gas Corporation   |   | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br>N/A                   |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 749, Denver, Colorado 80201  |   | 7. UNIT AGREEMENT NAME<br>Natural Buttes Unit                 |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br>At surface<br>967' FNL/422' FEL (NE NE)  |   | 8. FARM OR LEASE NAME<br>Natural Buttes Unit                  |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
| 14. PERMIT NO.<br>43-047-30869   | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>5083' Ungr. Gr. | 9. WELL NO.<br>CIGE 87D-34-9-21                               |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  |   | 10. FIELD AND POOL, OR WILDCAT<br>Natural Buttes Field        |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
| <table border="0"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>TEST WATER SHUT-OFF <input type="checkbox"/></td> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>WATER SHUT-OFF <input type="checkbox"/></td> <td>REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT* <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td>(Other) <u>Operations</u> <input checked="" type="checkbox"/></td> <td></td> </tr> </table> |   | 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>Operations</u> <input checked="" type="checkbox"/> |  | 11. SEC., T., R., M., OR BLEK. AND SURVEY OR ABBA<br>Section 34-T9S-R21E |
| 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>Operations</u> <input checked="" type="checkbox"/> |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
|  |   | 12. COUNTY OR PARISH<br>Uintah                                |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |
|  |   | 13. STATE<br>Utah   |  |                       |  |  |   |   |   |   |  |   |  |   |                                   |  |                                       |                                      |                                       |   |  |  |

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.)\*

Nov. 16 - Dec. 15, 1981  
Well spudded 9/3/81. WORT.

**RECEIVED**  
DEC 23 1981

DIVISION OF  
OIL, GAS & MINING

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

SIGNED H. E. Aab TITLE District Drilling Manager DATE Dec. 15, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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

(Consult instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

|  |  |
|--|--|
| <p>1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR<br/><u>Coastal Oil &amp; Gas Corporation</u></p> <p>3. ADDRESS OF OPERATOR<br/><u>P. O. Box 749, Denver, Colorado 80201</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br/>At surface<br/><u>967' FNL/422' FEL (NE NE)</u></p> <p>14. PERMIT NO. <u>43-047-30869</u></p> <p>15. ELEVATIONS (Show whether DF, NT, GR, etc.)<br/><u>5083' Ingr. Gr.</u></p> | <p>5. LEASE DESIGNATION AND SERIAL NO.<br/><u>U-01194-A-ST</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br/><u>N/A</u></p> <p>7. UNIT AGREEMENT NAME<br/><u>Natural Buttes Unit</u></p> <p>8. FARM OR LEASE NAME<br/><u>Natural Buttes Unit</u></p> <p>9. WELL NO.<br/><u>CIGE 87D-34-9-21</u></p> <p>10. FIELD AND POOL, OR WILDCAT<br/><u>Natural Buttes Field</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br/><u>Section 34-T9S-R21E</u></p> <p>12. COUNTY OR PARISH <u>Uintah</u> 13. STATE <u>Utah</u></p> |
|--|--|

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

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

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

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

Dec. 16, 1981-January 15, 1982  
Well Spudded 9/3/81. WORT.

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

SIGNED H. E. Kabb TITLE District Drilling Manager DATE Jan. 19, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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

(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Coastal Oil & Gas Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 749, Denver, Colorado 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
 At surface  
967' FNL/422' FEL (NE NE)

14. PERMIT NO.  
43-047-30869

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
5083' Ungr. Gr.

5. LEASE DESIGNATION AND SERIAL NO.  
U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
N/A

7. UNIT AGREEMENT NAME  
Natural Buttes Unit

8. FARM OR LEASE NAME  
Natural Buttes Unit

9. WELL NO.  
CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT  
Natural Buttes Field

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Section 34-T9S-R21E

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) <u>Operations</u>                      | <input checked="" type="checkbox"/>      |

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

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

Please see attached chronological for report of operations January 16 through February 15, 1982.

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

SIGNED H. E. Aab TITLE District Drilling Manager DATE Feb. 16, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

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

(Other instructions on reverse side)

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

5. LEASE DESIGNATION AND SERIAL NO.

U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

Natural Buttes Unit

8. FARM OR LEASE NAME

Natural Buttes Unit

9. WELL NO.

CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT

Natural Buttes Field

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

Section 34-T9S-R21E

12. COUNTY OR PARISH

Uintah

13. STATE

Utah

1.

OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR

Coastal Oil & Gas Corporation

3. ADDRESS OF OPERATOR

P. O. Box 749, Denver, Colorado 80201

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

At surface

967' FNL/422' FEL (NE NE)

14. PERMIT NO.

43-047-30869

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

5083' Ungr. Gr.

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

Operations

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

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Please see attached chronological for report of operations February 16 through March 15, 1982.

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

SIGNED

*L. W. Thying*  
 L. W. Thying

TITLE District Drilling Engineer

DATE March 22, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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

|  |  |   |
|--|--|---|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><small>(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</small> |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>U-01194-A-ST<br>6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br>NA<br>7. UNIT AGREEMENT NAME<br>Natural Buttes Unit<br>8. FARM OR LEASE NAME<br>Natural Buttes Unit<br>9. WELL NO.<br>CIGE 87D-34-9-21<br>10. FIELD AND POOL, OR WILDCAT<br>Natural Buttes Field<br>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Section 34-T9S-R21E<br>12. COUNTY OR PARISH<br>Uintah<br>13. STATE<br>Utah |
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER  | 2. NAME OF OPERATOR<br>Coastal Oil & Gas Corporation<br>3. ADDRESS OF OPERATOR<br>P. O. Box 749, Denver, Colorado 80201<br>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br>At surface<br>967' FNL/422' FEL (NE NE) |   |
| 14. PERMIT NO.<br>43-047-30869   | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>5083' Ungr. Gr.  |   |

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

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

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

Please see attached chronological for report of operations March 16, 1982 through April 15, 1982.

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

SIGNED H. E. Aab TITLE District Drlg. Mgr. DATE April 19, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side



Coastal Oil & Gas Corporation

1050 Seventeenth Street - Suite 2100  
Post Office Box 749  
Denver, Colorado 80201-0749  
Phone (303) 572-1121

*Copy to  
Ron Furth  
and Jack  
Ft.*

April 26, 1982

Tom Tetting  
State of Utah  
Division of Oil, Gas and Mining  
4241 State Office Building  
Capitol Complex  
Salt Lake City, Utah 84114

RE: CIGE 87D-34-9-21  
NE NE Section 34-T9S-R21E  
Uintah County, Utah  
State Lease U-01194-ST

Dear Tom:

Proposed locations for CIGE 87D-34-9-21 were staked and moved twice as an accommodation to Tosco's oil shale development plans for the area. A mutually agreeable location was staked at 967' ENL/422' FEL (NE NE) Section 34-T9S-R21E. The location was constructed, the well was spudded, and surface casing set in September, 1981. The well is currently waiting on rotary tools. Our plan of development for the Natural Buttes Unit calls for the well to be drilled in 1982.

Dirt work was begun erroneously on a location in the NE NE Section 34, which had been staked, but rejected by Tosco. I believe this is what you were concerned about; apparently, you saw the location before it was rehabilitated. On approximately April 15, this location was cleaned up and rehabilitated. Reseeding will be done in the fall prior to the first frost.

If you require any additional information, please let me know.

Sincerely,

Patricia A. Bohner  
Operations Analyst

RECEIVED  
APR 27 1982

PAB/snc

cc: File  
Betty Nelson

DIVISION OF  
OIL, GAS & MINING



Coastal Oil & Gas Corporation

1050 Seventeenth Street - Suite 2100  
Post Office Box 749  
Denver, Colorado 80201-0749  
Phone (303) 572-1121

April 26, 1982

Tom Tetting  
State of Utah  
Division of Oil, Gas and Mining  
4241 State Office Building  
Capitol Complex  
Salt Lake City, Utah 84114

RE: ✓ CIGE 87D-34-9-21  
NE NE Section 34-T9S-R21E  
Uintah County, Utah  
State Lease U-01194-ST

Dear Tom:

Proposed locations for CIGE 87D-34-9-21 were staked and moved twice as an accommodation to Tosco's oil shale development plans for the area. A mutually agreeable location was staked at 967' FNL/422' FEL (NE NE) Section 34-T9S-R21E. The location was constructed, the well was spudded, and surface casing set in September, 1981. The well is currently waiting on rotary tools. Our plan of development for the Natural Buttes Unit calls for the well to be drilled in 1982.

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If you require any additional information, please let me know.

Sincerely,

Patricia A. Bohner  
Operations Analyst

**RECEIVED**

APR 27 1982

PAB/snc

cc: File  
Betty Nelson

DIVISION OF  
OIL, GAS & MINING

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

|  |   |   |
|--|---|---|
| <p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR<br/>Coastal Oil &amp; Gas Corporation</p> <p>3. ADDRESS OF OPERATOR<br/>P. O. Box 749, Denver, Colorado 80201</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br/>At surface<br/><br/>967' FNL/422' FEL (NE NE)</p> |   | <p>5. LEASE DESIGNATION AND SERIAL NO.<br/>U-01194-A-ST</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br/>NA</p> <p>7. UNIT AGREEMENT NAME<br/>Natural Buttes Unit</p> <p>8. FARM OR LEASE NAME<br/>Natural Buttes Unit</p> <p>9. WELL NO.<br/>CIGE 87D-34-9-21</p> <p>10. FIELD AND POOL, OR WILDCAT<br/>Natural Buttes Field</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br/>Section 34-T9S-R21E</p> <p>12. COUNTY OR PARISH<br/>Uintah</p> <p>13. STATE<br/>Utah</p> |
| <p>14. PERMIT NO.<br/>43-047-30869</p>   | <p>15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br/>5083' Ungr. Gr.</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) <input type="checkbox"/>  |  |
| (Other) <u>Operations</u> <input checked="" type="checkbox"/> |   | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |  |

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

Please see attached chronological for report of operations through May 14, 1982.

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

SIGNED H. E. Aab TITLE Dist. Drlg. Mgr. DATE May 14, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

|   |   |   |
|---|---|---|
| <p>1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR<br/>Coastal Oil &amp; Gas Corporation</p> <p>3. ADDRESS OF OPERATOR<br/>P. O. Box 749, Denver, Colorado 80201</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br/>At surface<br/><br/>967' FNL/422' FEL (NE NE)</p> |   | <p>5. LEASE DESIGNATION AND SERIAL NO.<br/>U-01194-A-ST</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br/>NA</p> <p>7. UNIT AGREEMENT NAME<br/>Natural Buttes Unit</p> <p>8. FARM OR LEASE NAME<br/>Natural Buttes Unit</p> <p>9. WELL NO.<br/>CIGE 87D-34-9-21</p> <p>10. FIELD AND POOL, OR WILDCAT<br/>Natural Buttes Field</p> <p>11. SEC., T., R., M., OR BLM. AND SURVBY OR ABBA<br/>Section 34-T9S-R21E</p> <p>12. COUNTY OR PARISH<br/>Uintah</p> <p>13. STATE<br/>Utah</p> |
| <p>14. PERMIT NO.<br/>43-047-30869</p>  | <p>15. ELEVATIONS (Show whether DF, RT, OR, etc.)<br/>5083' Ungr. Gr.</p> |   |

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

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

Well spudded 9/3/81.  
Please see attached chronological for report of operations through June 15, 1982.

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

SIGNED *D. E. Aab* TITLE District Drlg. Manager DATE June 15, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. LEASE DESIGNATION AND SERIAL NO. U-01194-A-ST
6. IF INDIAN, ALLOTTEE OR TRIBE NAME NA
7. UNIT AGREEMENT NAME Natural Buttes Unit
8. FARM OR LEASE NAME Natural Buttes Unit
9. WELL NO. CIGE 87D-34-9-21
10. FIELD AND POOL, OR WILDCAT Natural Buttes Field
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 34-T9S-R21E
12. COUNTY OR PARISH Uintah
13. STATE Utah

1. OIL WELL [ ] GAS WELL [X] OTHER [ ]
2. NAME OF OPERATOR Coastal Oil & Gas Corporation
3. ADDRESS OF OPERATOR P. O. Box 749, Denver, Colorado 80204
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 967' FNL/422' FEL (NE NE)
14. PERMIT NO. 43-047-30869
15. ELEVATIONS (Show whether DF, KT, OR, etc.) 5083' Ungr. Gr.

RECEIVED JUL 02 1982 DIVISION OF OIL, GAS & MINING

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF [ ] FILL OR ALTER CASING [ ] FRACTURE TREAT [ ] MULTIPLE COMPLETE [ ] SHOOT OR ACIDIZE [ ] ABANDON\* [ ] REPAIR WELL [ ] CHANGE PLANS [ ] (Other) Change Casing Program [X]
SUBSEQUENT REPORT OF: WATER SHUT-OFF [ ] RETAINING WELL [ ] FRACTURE TREATMENT [ ] ALTERING CASING [ ] SHOOTING OR ACIDIZING [ ] ABANDONMENT\* [ ] (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.) It is proposed to change casing program FROM:

PROPOSED CASING AND CEMENTING PROGRAM
Table with columns: SIZE OF HOLE, SIZE OF CASING, WEIGHT PER FOOT, SETTING DEPTH, QUANTITY OF CEMENT. Includes handwritten notes: 'Circulate cmt to surface to properly isolate the hydrocarbon bearing zones, the oil shale & shallow ground water.'

PROPOSED CASING AND CEMENTING PROGRAM
Table with columns: SIZE OF HOLE, SIZE OF CASING, WEIGHT PER FOOT, SETTING DEPTH, QUANTITY OF CEMENT. Includes handwritten notes: 'Circulate cmt to surface to properly isolate the hydrocarbon bearing zones, the oil shale & shallow ground water.'

APPROVED BY THE STATE OF UTAH DIVISION OF OIL, GAS, AND MINING
DATE: 7/8/82
BY: [Signature]

18. I hereby certify that the foregoing is true and correct
SIGNED: H. E. Aab TITLE: District Drilling Manager DATE: 6/29/82

(This space for Federal or State office use)

APPROVED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_
CONDITIONS OF APPROVAL, IF ANY:

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

|  |   |  |
|--|---|--|
| <p>1. <input type="checkbox"/> OIL WELL    <input type="checkbox"/> GAS WELL    <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR<br/>Coastal Oil &amp; Gas Corporation</p> <p>3. ADDRESS OF OPERATOR<br/>P. O. Box 749, Denver, Colorado 80201</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br/>At surface<br/><br/>967' FNL/422' FEL (NE NE)</p> |   | <p>5. LEASE DESIGNATION AND SERIAL NO.<br/>U-01194-A-ST</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br/>NA</p> <p>7. UNIT AGREEMENT NAME<br/>Natural Buttes Unit</p> <p>8. FARM OR LEASE NAME<br/>Natural Buttes Unit</p> <p>9. WELL NO.<br/>CIGE 87D-34-9-21</p> <p>10. FIELD AND POOL, OR WILDCAT<br/>Natural Buttes Field</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br/>Section 34-T9S-R21E</p> <p>12. COUNTY OR PARISH    13. STATE<br/>Uintah                      Utah</p> |
| <p>14. PERMIT NO.<br/>43-047-30869</p>   | <p>15. ELEVATIONS (Show whether DF, RT, OR, etc.)<br/>5083' Ungr. Gr.</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) <input type="checkbox"/>  |  |
| (Other) <b>OPERATIONS</b>                    | <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.)\*

Please see attached chronological for report of operations through July 15, 1982.

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

SIGNED L. W. Thyng TITLE District Drilling Engineer DATE July 15, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

CIGE #87D-34-9-21-J (CIGE)  
 Natural Buttes Unit  
 Uintah County, Utah  
 AFE: 19800 WI: 100%  
 ATD: 6200' SD: 9-3-81/  
 CIGE, Oper.  
 AllWestern #4, Contr.  
 9-5/8" @ 213' GL;

LOCATION: 967' FNL & 422' FEL  
 NE NE, Sec 34-T9S-R21E.

- 9-4-81 MI RU Ram Air Drl. Spud @ 1:00 PM 9-3-81; drl 220' 12 $\frac{1}{4}$ " hole.
- 9-5-81 220'; WO RT.  
 Run 5 jnts 9-5/8" 36# K-55 ST&C csg; (215'); landed @ 213' GL; cmt by Howco  
 w/125 sx Cl "G", 2% CaCl<sub>2</sub>; job compl 7:45 PM 9-4-81; circ 5 bbl cmt to surf. Cum Csts:  
 \$32,927.
- 7-6-82 218'; RU RT.  
 MI RU AllWestern #4.
- 7-7-82 295'; (74' - 4 $\frac{1}{2}$  hrs.); Drlg.  
 RU RT, Gas Buster; Test BOP's & Manifold to 3000 psi, Hydril 1500 psi; PU BHA;  
 Drlg. Cmt. 194'-221'; Drlg. Spud Formation 1:30 a.m. 7/7/82. MW 8.4, VIS 27.  
 (3/4° @ 243'). Cum Csts: \$59,324.
- 7-8-82 1445'; (1150' - 23 hrs); Drlg.  
 Drlg.; RS, Chk BOP's; Drlg.; Svy; Drlg.; Svy; Drlg. MW 8.5, VIS 28.  
 (3/4° @ 1254'). Cum Csts: \$66,622.
- 7-9-82 1912'; (467' - 9 hrs); WOC Plug #1.  
 Drlg.; RS, Chk BOP; Drlg.; Lost Returns @ 1726', Spot Sawdust Pill, Regain  
 Circ for 5 Minutes Then Lost Total Returns; Dry Drlg. to 1912'; POOH; TIH to 1683' Open  
 Ended DP; Cmt w/200 sx 'G' Dowell, 10% Gipseal, 2% CaCl; WOC-Fill Hole w/Wtr - Stays  
 Full; WOC. MW 8.4, VIS 27. (1° @ 741'). Cum Csts: \$91,762.
- 7-10-82 2690'; (778' - 16 hrs); Drlg.  
 WOC Plug #1; TIH w/Bit, TOC 1693'; Drlg. 216' of Cmt w/Full Returns; RS; Drlg.;  
 Svy; Drlg.; Svy; Drlg. MW 8.4, VIS 27. (1° @ 1966'); (1-3/4° @ 2434'). Cum  
 Csts: \$99,235.
- 7-11-82 3576'; (886' - 22 $\frac{1}{2}$  hrs); Drlg.  
 Drlg.; RS, Chk BOP; Drlg.; Svy; Drlg.; Svy; Drlg. BGG 175, CG 600.  
 Drlg. Brks: 3105'-13', rate 1.5-.5-1-3/4 mpf, gas 25-160-50; 3311'-18', rate 2-.5-2 mpf,  
 gas 60-100-60. MW 8.4, VIS 28. (1 $\frac{1}{2}$ ° @ 2945'); (1 $\frac{1}{2}$ ° @ 3404'). Cum Csts: \$122,820.
- 7-12-82 4215'; (639' - 19 $\frac{1}{2}$  hrs); Drlg. w/Full Returns.  
 Drlg.; RS & Chk BOP; Drlg.; Rig Repair; Drlg.; Rig Repair; Drlg.; Svy; Drlg.  
 Drlg. Brks: 3920'-36', rate 2.5-1.5-2.5 mpf, gas 50-280-100; 4014'-30, rate 2-1-2 mpf,  
 gas 50-160-50; 4102'-15', rate 2.5-1.5-2.5 mpf, gas 50-110-70. MW 8.4, VIS 28.  
 (1-3/4° @ 4028'). Cum Csts: \$131,559.
- 7-13-82 4717'; (502' - 20 $\frac{1}{2}$  hrs); Drlg.; RS, Chk BOP; Drlg.; Circ Gas Kick @ 4491', Mud  
 Up System; Drlg.; Svy; Drlg. Drlg. Brks: 4203'-17', rate 1.5-.5-1.5 mpf, gas 80-130-75;  
 4220'-56', rate 1.5-.5-1 mpf, gas 110-130-90; 4306'-24', rate 1.5-.5-2.5 mpf, gas  
 80-950-100; 4463'-74', rate 1.5-.5-2 mpf, gas 120-1800-120; 4584'-98', rate  
 2.5-1.5-2.5 mpf, gas 100-140-110. BGG 100, CG 130. MW 8.9, VIS 34. (1 $\frac{1}{2}$ ° @ 4610').  
 Cum Csts: \$142,574.
- 7-14-82 5002'; (285' - 17 hrs); Drlg.  
 Drlg.; RS, Chk BOP's; Drlg. Svy; POOH w/1 Motor; Dress Bit #2; TIH, SLM-31',  
 Correction Shallow; Drlg. Drlg. Brks: 4640'-56', rate 4.5-1.5-3.5 mpf, gas 100-175-100;  
 4824'-32', rate 5-1.5-4.5 mpf, gas 50-250-50; 4850-56', rate 3.5-1.5-5 mpf, gas  
 50-175-50. BGG 100, CG 275. MW 9.3, VIS 35, WL 13.8, PV 8, YP 6, Sand Tr, Solids 4,  
 pH 10, ALK.:Pf .8, Mf 1.6, CL 2800, CA 40, GELS 3/8, Cake 3, MBT 16. (1-3/4° @ 4901').  
 Cum Csts: \$155,180.
- 7-15-82 5248'; (246' - 15 hrs); Drlg. 16.4 FPH.  
 Drlg.; RS; Rig Repair - Replace Clutch; TIH; Drlg. BGG 65, CG 150. MW 9.1,  
 VIS 34, WL 13.8, PV 8, YP 6, Sand Tr, Solids 4, pH 10, ALK.:Pf .9, Mf 1.6, CL 2800,  
 CA 40, GELS 3/8, Cake 2, MBT 17. Cum Csts: \$168,345.

STATE OF UTAH  
OIL & GAS CONSERVATION COMMISSION

(See other instructions on reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

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

2. NAME OF OPERATOR  
CIG EXPLORATION, INC.

3. ADDRESS OF OPERATOR  
P. O. BOX 749, DNEVER, CO 8201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 967' FNL 422' FEL (NE NE)

At top prod. interval reported below SAME

At total depth SAME



DIVISION OF OIL, GAS & MINING

14. PERMIT NO. 43-047-30869 DATE ISSUED 1-22-82

5. LEASE DESIGNATION AND SERIAL NO.

U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

NATURAL BUTTES UNIT

8. FARM OR LEASE NAME

NATURAL BUTTES UNIT

9. WELL NO.

CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT

NATURAL BUTTES FIELD

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

SECTION 34-T9S-R21E

12. COUNTY OR PARISH

UINTAH

13. STATE

UTAH

15. DATE SPUNDED 9-3-82 16. DATE T.D. REACHED 7-17-82 17. DATE COMPL. (Ready to prod.) 8-6-82 18. ELEVATIONS (\*F, RKB, RT, GR, ETC.)\* 5083' Ungr. GR 19. ELEV. CASINGHEAD -

20. TOTAL DEPTH, MD & TVD 6225' 21. PLUG, BACK T.D., MD & TVD 6183' 22. IF MULTIPLE COMPL., HOW MANY\* N/S 23. INTERVALS DRILLED BY 0-TD 24. ROTARY TOOLS - 25. CABLE TOOLS -

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 4844' - 6018' WASATCH FORMATION 25. WAS DIRECTIONAL SURVEY MADE YES

26. TYPE ELECTRIC AND OTHER LOGS RUN DUC FDC-CNL 27. WAS WELL CORDED NO

CASING RECORD (Report all strings set in well)

| CASING SIZE | WEIGHT, LB./FT. | DEPTH SET (MD) | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|-------------|-----------------|----------------|-----------|------------------|---------------|
| 9-5/8"      | 36#             | 213'           | 12-1/4"   | 125 SK           |               |
| 5-1/2"      | 17#             | 6224'          | 7-7/8"    | 1585 SK          |               |

| 29. LINER RECORD |          |             |               |             | 30. TUBING RECORD |                |                 |
|------------------|----------|-------------|---------------|-------------|-------------------|----------------|-----------------|
| SIZE             | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE              | DEPTH SET (MD) | PACKER SET (MD) |
|                  |          |             |               |             | 2-3/8"            | 4702'          |                 |

| 31. PERFORATION RECORD (Interval, size and number) |       |       |                 | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. |                                  |
|--|-------|-------|-----------------|--|----------------------------------|
| gun as follows:                                    |       |       |                 | DEPTH INTERVAL (MD)                            | AMOUNT AND KIND OF MATERIAL USED |
| 4844'  | 5351' | 5746' | 6108'           | 4844' - 6108'                                  | BRKDN W/2600 GAL. 3% KCl WTR.    |
| 5291'  | 5354' | 5749' |                 |  | FRAC W/50,000 GAL GEL &          |
| 5294'  | 5626' | 5753' |                 |  | 100,000 LBS. 20/40 SAND.         |
| 5297'  | 5630' | 6102' | TOTAL: 13 HOLES |  |                                  |

| 33. PRODUCTION        |                 |  |                         |          |            |                                    |               |
|-----------------------|-----------------|--|-------------------------|----------|------------|------------------------------------|---------------|
| DATE FIRST PRODUCTION |                 | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) |                         |          |            | WELL STATUS (Producing or shut-in) |               |
| 8-6-82                |                 | FLOWING  |                         |          |            | S1 WOPLC                           |               |
| DATE OF TEST          | HOURS TESTED    | CHOKE SIZE   | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF.   | WATER—BBL.                         | GAS-OIL RATIO |
| 8-6-82                | 24              | 16/64"   | →                       | 0        | 2150       | TSTM                               | -             |
| FLOW. TUBING PRESS.   | CASING PRESSURE | CALCULATED 24-HOUR RATE  | OIL—BBL.                | GAS—MCF. | WATER—BBL. | OIL GRAVITY-API (CORR.)            |               |
| 1450                  | 1450            | →  | 0                       | 2150     | TSTM       | -                                  |               |

34. DISPOSITION OF GAS (Solid, used for fuel, vented, etc.) VENTED TEST WITNESSED BY KARL ODEN

35. LIST OF ATTACHMENTS NONE

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED W. J. Gooden TITLE PRODUCTION ENGINEER DATE AUGUST 6, 1982

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

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29: "Sacks Cement":** Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

| 37. SUMMARY OF POROUS ZONES:<br>SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES | TOP                         | BOTTOM      |                  |
|--|-----------------------------|-------------|------------------|
| FORMATION  | DESCRIPTION, CONTENTS, ETC. | MEAS. DEPTH | TRUE VERT. DEPTH |
|  | WASATCH FORM.               | 4772'       | (+324')          |

38. GEOLOGIC MARKERS

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

|   |   |   |
|---|---|---|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER   |   | 5. LEASE DESIGNATION AND SERIAL NO.<br>U-01194-A-ST                     |
| 2. NAME OF OPERATOR<br>Coastal Oil & Gas Corporation  |   | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br>NA                              |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 749, Denver, Colorado 80201   |   | 7. UNIT AGREEMENT NAME<br>Natural Buttes Unit                           |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br><br>967' FNL/422' FEL (NE NE) |   | 8. FARM OR LEASE NAME<br>Natural Buttes Unit                            |
| 14. PERMIT NO.<br>43-047-30869  | 15. ELEVATIONS (Show whether DF, RT, OR, etc.)<br>5083' Ungr. Gr. | 9. WELL NO.<br>CIGE 87D-34-9-21   |
|   |   | 10. FIELD AND POOL, OR WILDCAT<br>Natural Buttes Field                  |
|   |   | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Section 34-T9S-R21E |
|   |   | 12. COUNTY OR PARISH<br>Uintah  |
|   |   | 13. STATE<br>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) _____   |  |
| (Other) <u>Operations</u>                    | <input checked="" type="checkbox"/>           | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |  |

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

Please see attached chronological for report of operations through August 16, 1982.

18. I hereby certify that the foregoing is true and correct  
SIGNED H. E. Aab TITLE District Drilling Manager DATE August 16, 1982

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

CIGE #87D-34-9-21J (CIGE)

Natural Buttes Unit

Uintah County, Utah

AFE: 19800 WI: 100%

ATD: 6200' SD: 9-3-81/7-6-82

CIGE, Oper.

AllWestern #4, Contr.

9-5/8" @ 213' GL; 5½" @ 6224';

LOCATION: 967' FNL & 422' FEL  
NE NE, Sec 34-T9S-R21E

TD: 6225'

PBSD: 6138'

Perf: 4844-6018' (13 holes)

8-3-82 Prep to flw to pit to clean up after frac.

SITP 2100 psi, SICP 2100 psi; MI Dowell & frac Wasatch perfs 4844-6108' (13 holes) dwn tbg & tbg-csg annulus w/50,000 gal low-residue X-linked gel & 100,000# 20/40 sd as follows: held safety meeting & tst lines to 5200 psi; start pad @ 33 BPM w/3800 spi; start 1 ppg @ 33 BPM w/4500 psi; start 2 ppg @ 35 BPM w/3600 spi; start 3 ppg @ 35 BPM w/3200 psi; start 4 ppg @ 35 BPM w/3000 psi; flush w/3% KCl wtr @ 35 BPM w/3300 psi; press incr to 4800 psi @ end; ISIP 1700 psi, 15 min 1600 psi; AR 35 BPM, AP 3600 psi; SION. Cum Csts: \$398,621.

8-4-82 Flwg to pit to clean up after frac.

SITP 600 psi, SICP 600 psi; opn to pit @ 9 AM on 16/64" CK.

8-5-82 Flwg to pit to clean up after frac.

9:30 AM TP 500 psi, CP 500 psi; 2 PM FTP 450 psi, SICP 500 psi, 16/64" CK, est 400 MCFD gas w/15-20 BW. Cum Csts: \$398,621.

8-6-82 PBSD 6138' WL; SI WO PLC.

FTP 1450 psi, SICP 1450 psi, 16/64" CK, 2150 MCFD w/wtr TSTM; SI @ 8:30 AM. Completed as single SI GW f/Wasatch perfs 4844-6108' (13 holes) 8-6-82; WO PLC. Cum Csts: \$405,821. Drop f/report.

8-7-82 SI; WO PLC.

NR.

8-8-82 SI; WO PLC.

SITP 2000 psi, SICP 2050 psi.

8-9-82 SI; WO PLC.

SITP 2000 psi, SICP 2050 psi. Drop f/report.

CIGE 87D-34-9-21J (CIGE)

Natural Buttes Unit

Uintah County, Utah

AFE: 19800

WI: 100%

LOCATION: 967' FNL &amp; 422' FEL

ATD: 6200'

SD: 9-3-81/7-6-82

NE NE, Sec. 34-T9S-R21E

CIGE, Oper.

AllWestern #4, Contr.

TD: 6225'

9-5/8" @ 213' GL; 5 1/2" @ 6224';

PBSD: 6138'

Perf: 4844-6108' (13 holes)

7-16-82 5622'; (374' - 23 1/2 hrs); Drlg.  
Drlg.; RS; Drlg. Drlg. Brks: 5303'-20', rate 3-1-3 mpf, gas 75-875-75;  
5362'-80', rate 4-1-4.5 mpf, gas 75-700-75; 5550'-59', rate 3-1.5-3 mpf, gas 50-150-50.  
BGG 50, CG 100. MW 9.4, VIS 37, WL 9.8, PV 8, YP 7, Sand Tr, Solids 4, pH 10.6,  
ALK.:Pf .9, MF 1.4, CL 2400, CA 16-, GELS 3/11, Cake 3, MBT 17.5. Cum Csts: \$177,131.

7-17-82 5980'; (358' - 23 1/2 hrs); Drlg. @ 15 FPH.  
Drlg.; RS; Drlg. BGG 25, CG 40. Drlg. Brks: 5630'-37', rate 4-1.5-4 mpf,  
gas 30-50-30; 5642'-48', rate 4-.5-3 mpf, gas 30-325-50; 5657'-61', rate 3-2-3.5 mpf,  
gas 50-875-75; 5760'-5771', rate 4-.5-4.5 mpf, gas 50-1050-50. MW 9.3, VIS 37, WL 9.4,  
PV 9, YP 7, Sand Tr, Solids 4, pH 10.8, ALK.:Pf .60, Mf .90, CL 1900, CA 160,  
GELS 3/8, Cake 2, MBT 17.5. Cum Csts: \$186,248.

7-18-82 6225'; (245' - 18 1/2 hrs.); POOH To Log.  
Drlg.; RS; Drlg. CBU @ 6200'; Drlg.; Circ For Logs; TOOH to Run Logs w/Go.  
Drlg. Brks: 6113'-27', rate 4.5-1-5.5 mpf, gas 10-440-10; 6207'-216', rate 5-2-5 mpf,  
gas 10-100-10. BGG 10, CG 40. MW 9.6, VIS 46, WL 8.4, PV 9, YP 7, Sand Tr, pH 10.8,  
ALK.:Pf .60, Mf .90, CL 1900, CA 160, GELS 3/8, Cake 2, MBT 17.50. Cum Csts: \$195,716.

7-19-82 6225'; Set Slips.  
Log w/'Go', Log TD 6212' DIL FDC/CNL w/Caliper; TIH to 6225'; Circ; LD  
DP, DC's Cha. Rams; Run 149 jts 5 1/2 17# LTC K-55 Land 6224' FC 6181'; Circ; Howco Cmtd  
580 sx 50/50 Poz 8% Gel, 10% Salt, .6% Halid - 24, 5#/sx Gilsonite, 1/2#/sx Flocele, 1005  
50/50 Poz, 2% Gel, 10% Salt, .6% Halid - 24, 1/2#/sx Flocele Disp. w/143 BBL, 5% KCL,  
Circ 40 BBLs to Surface. PD 5:56 a.m. 7/19/82. Cum Csts: \$220,347.

7-20-82 6225'; RD RT.  
ND BOP's; Cut Csg, Set Slips. Clean Tanks; LD Kelly & Rental Tools; RD Rig.  
Released 4:00 p.m., 7/19/82. Stacked on Old 87D Location. Final Report.  
Cum Csts: \$316,869.

7-21-82 thru 7-24-82 WO CU.

7-25-82 SDFS.  
MI RU SU; NU BOP; PU & tally & std back 2-3/8" prod tbg.

7-26-82 Prep to log & perf.  
SDFS. Cum Csts: \$322,287.

7-27-82 Flw after brkdwn.  
Road to loc; RU GO & run GR-CCL f/PBSD of 6138' to 3200'; press tst csg to 4800  
psi; perf Wasatch form w/3-1/8" csg gun w/l JSPF as follows: 4844', 5291', 5294', 5297',  
5351', 5354', 5626', 5630', 5746', 5749', 5753', 6102', 6108', Neutron-Density depths  
(13 holes); TIH w/149 jnts 2-3/8" tbg; land @ 4702' w/NC on btm & SN @ 4671', 10' blast  
jnt at surf; ND BOP, NU tree; RU Newsco & brk dwn form w/74 bbl 3% KCl wtr & 30 BS as  
follows: held safety meeting & press tst lines to 6100 psi; SITP 540 psi, SICP 670 psi;  
est rate @ 6.5 BPM, 2600 psi, 4 bbl tot fl; 2 balls/bbl @ 6.5 BPM, 3500 psi, 19 bbl tot  
fl; flush @ 6.4 BPM, 4000 psi, 69 bbl tot fl; AR 6.4 BPM; AP 4000 psi; opn to pit on  
18/64" CK. Cum Csts: 375,183.

7-28-82 SI; WO frac.  
FTP 600 psi, SICP 200 psi, 18/64" CK, 1150 MCFD w/O BW; SI @ 9:00 AM; WO frac.  
Cum Csts: \$375,183.

7-29-82 SI; WO frac.  
SITP 2000 psi, SICP 2000 psi.

7-30-82 SI; WO frac.  
SITP 2100 psi, SICP 2100 psi. Cum Csts: \$375,183. Drop f/report until frac.

7-31-82 thru 8-2-82 SI; WO frac.

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

5. LEASE DESIGNATION AND SERIAL NO.  
U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
NA

7. UNIT AGREEMENT NAME  
Natural Buttes Unit

8. FARM OR LEASE NAME  
Natural Buttes Unit

9. WELL NO.  
CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT  
Natural Buttes Field

11. SEC., T., R., M., OR B.L.E. AND SURVEY OR AREA  
Section 34-T9S-R21E

12. COUNTY OR PARISH  
Uintah

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  
Coastal Oil & Gas Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 749, Denver, Colorado 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface  
967' FNL/422' FEL (NE NE)

14. PERMIT NO.  
43-047-30869

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
5083' Ungr. Gr.

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

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

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.)\*

Well completed as single SI GW on 8/6/82. Completion report to follow.

RECEIVED  
SEP 21 1982

DIVISION OF  
OIL, GAS & MINING

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

SIGNED H. E. Aab TITLE District Drilling Manager DATE 9/15/82

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29: "Sacks Cement":** Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

**37. SUMMARY OF POROUS ZONES:**  
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

| FORMATION | TOP | BOTTOM | DESCRIPTION, CONTENTS, ETC. |
|-----------|-----|--------|-----------------------------|
|           |     |        |                             |

38.

**GEOLOGIC MARKERS**

| NAME          | MEAS. DEPTH | TOP<br>TRUE VERT. DEPTH |
|---------------|-------------|-------------------------|
| WASATCH FORM. | 4772'       | (+324')                 |

**CORRECTED**

**SUBMIT IN DUPLICATE\***

STATE OF UTAH

(See other instructions on reverse side)

OIL & GAS CONSERVATION COMMISSION

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG \***

5. LEASE DESIGNATION AND SERIAL NO.  
U-01194-A-ST

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
N/A

7. UNIT AGREEMENT NAME  
NATURAL BUTTES UNIT

8. FARM OR LEASE NAME  
NATURAL BUTTES UNIT

9. WELL NO.  
CIGE 87D-34-9-21

10. FIELD AND POOL, OR WILDCAT  
NATURAL BUTTES FIELD

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA  
SECTION 34-T9S-R21E

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

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

2. NAME OF OPERATOR  
CIG EXPLORATION, INC.

3. ADDRESS OF OPERATOR  
P. O. BOX 749, DNEVER, CO 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 967' FNL 422' FEL (NE NE)  
At top prod. interval reported below SAME  
At total depth SAME

14. PERMIT NO. 43-047-30869 DATE ISSUED 1-22-82

12. COUNTY OR PARISH UINTAH 13. STATE UTAH

15. DATE SPURRED 9-3-81 16. DATE T.D. REACHED 7-17-82 17. DATE COMPL. (Ready to prod.) 8-6-82 18. ELEVATIONS (DF, RES, RT, GR, ETC.)\* 5083' Ungr. GR 19. ELEV. CASINGHEAD -

20. TOTAL DEPTH, MD & TVD 6225' 21. PLUG, BACK T.D., MD & TVD 6183' 22. IF MULTIPLE COMPL. HOW MANY\* N/S 23. INTERVALS DRILLED BY -> 24. ROTARY TOOLS 0-TD 25. CABLE TOOLS -

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*  
4844' - 6018' WASATCH FORMATION

25. WAS DIRECTIONAL SURVEY MADE YES

26. TYPE ELECTRIC AND OTHER LOGS RUN DIL FDC-CNL 27. WAS WELL CORED NO

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

| CASING SIZE | WEIGHT, LB./FT. | DEPTH SET (MD) | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|-------------|-----------------|----------------|-----------|------------------|---------------|
| 9-5/8"      | 36#             | 213'           | 12-1/4"   | 125 SX           |               |
| 5-1/2"      | 17#             | 6224'          | 7-7/8"    | 1585 SX          |               |

29. LINER RECORD

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

30. TUBING RECORD

| SIZE   | DEPTH SET (MD) | PACKER SET (MD) |
|--------|----------------|-----------------|
| 2-/38" | 4702'          |                 |

31. PERFORATION RECORD (Interval, size and number) 3-1/8" csg. gun as follows:

|       |       |       |                 |
|-------|-------|-------|-----------------|
| 4844' | 5351' | 5746' | 6108'           |
| 5291' | 5354' | 5749' |                 |
| 5294' | 5626' | 5753' |                 |
| 5297' | 5630' | 6102' | TOTAL: 13 HOLES |

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

| DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED |
|---------------------|----------------------------------|
| 4844' - 6108'       | BRKDN W/2600 GAL. 3% KCl WTR.    |
|                     | FRAC W/50,000 GAL GEL &          |
|                     | 100,000 LBS. 20/40 SAND.         |

33. PRODUCTION

| DATE FIRST PRODUCTION | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) | WELL STATUS (Producing or shut-in) |
|-----------------------|--|------------------------------------|
| 8-6-82                | FLOWING  | S1 WOPLC                           |

| DATE OF TEST | HOURS TESTED | CHOKE SIZE | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF. | WATER—BBL. | GAS-OIL RATIO |
|--------------|--------------|------------|-------------------------|----------|----------|------------|---------------|
| 8-6-82       | 24           | 16/64"     | ->                      | 0        | 2150     | TSTM       | -             |

| FLOW. TUBING PRESS. | CASING PRESSURE | CALCULATED 24-HOUR RATE | OIL—BBL. | GAS—MCF. | WATER—BBL. | OIL GRAVITY-API (CORR.) |
|---------------------|-----------------|-------------------------|----------|----------|------------|-------------------------|
| 1450                | 1450            | ->                      | 0        | 2150     | TSTM       | -                       |

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY KARL ODEN

35. LIST OF ATTACHMENTS VENTED

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED W. J. Gooden TITLE PRODUCTION ENGINEER DATE NOVEMBER 8, 1982  
W. J. GOODEN DATE AUGUST 6, 1982

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

FILE IN TRIPLICATE  
FORM OGC-8-X

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING  
1588 West North Temple  
Salt Lake City, Utah 84116

\*REPORT OF WATER ENCOUNTERED DURING DRILLING\*

Well Name & Number CIGE 87D-34-9-21

Operator CIG EXPLORATION, INC. Address P. O. BOX 749, DENVER, CO 80201

Contractor ALLWESTERN DRILLING, INC. Address P. O. BOX 1518, VERNAL, UT 84078

Location NE 1/4 NE 1/4 Sec. 34 T. 9S R. 21E County UINTAH

Water Sands

| <u>Depth</u> |               | <u>Volume</u>     | <u>Quality</u> |
|--------------|---------------|-------------------|----------------|
| From         | To            | Flow Rate or Head | Fresh or Salty |
| 1.           | NONE REPORTED |                   |                |
| 2.           |               |                   |                |
| 3.           |               |                   |                |
| 4.           |               |                   |                |
| 5.           |               |                   |                |

(Continue of reverse side if necessary)

Formation Tops

WASATCH FORMATION 4772' (+324')

Remarks

- NOTE: (a) Report on this form as provided for in Rule C-20, General Rules and Regulations and Rules of Practice and Procedure.
- (b) If a water analysis has been made of the above reported zone, please forward a copy along with this form.

**COLORADO INTERSTATE GAS COMPANY  
WELL TEST DATA FORM**

**STATE COPY**

|                                |  |  |   |  |  |                              |          |   |  |  |  |  |  |
|--------------------------------|--|--|---|--|--|------------------------------|----------|---|--|--|--|--|--|
| FIELD CODE<br><b>560-01-11</b> |  |  | FIELD NAME<br><b>NATURAL BUTTES, UT</b> |  |  | OPERATOR CODE<br><b>2200</b> |          | OPERATOR NAME<br><b>CIG EXPLORATION INC</b> |  |  | WELL NAME<br><b>CIGE 870-34-9-21-J</b>                       |  |  |
| WELL CODE<br><b>3</b>          | LOCATION<br>SECT. TOWNSHIP/BLK<br><b>34 05 21E</b> |  | RGE/SUR.<br><b>21E</b>                  |  | PANHANDLE/REDCAVE<br>SEQ. NUMBER<br><b>01000</b> |                              | K-FACTOR |   | FORMATION<br><b>WASATCH SA FLOW TEST</b> |  | RECEIVED<br>UTAH STATE OFFICE<br><b>1983 NOV - 8 AM 9:16</b> |  |  |

| WELL ON (OPEN)  |     |     | DATE (COMP.)    |     |     | ORIFICE SIZE | METER RUN SIZE | COEFFICIENT  | GRAVITY (SEP.) | METER DIFF. RANGE | METER PRESSURE | DIFFERENTIAL ROOTS | METER TEMP. | WELL HEAD TEMP. | FLOWING TBG/CSG PRESSURE | STATIC TSG/CSG PRESSURE | FLOWING STRING |              |    |              |    |              |    |           |           |           |
|-----------------|-----|-----|-----------------|-----|-----|--------------|----------------|--------------|----------------|-------------------|----------------|--------------------|-------------|-----------------|--------------------------|-------------------------|----------------|--------------|----|--------------|----|--------------|----|-----------|-----------|-----------|
| MO.             | DAY | YR. | MO.             | DAY | YR. |              |                |              |                |                   |                |                    |             |                 |                          |                         | TUBING         | CASING       |    |              |    |              |    |           |           |           |
| 11              | 12  | 83  | 10              | 17  | 83  | 27           | 28             | 32           | 33             | 38                | 39             | 42                 | 43          | 45              | 46                       | 51                      | 52             | 58           | 59 | 61           | 62 | 67           | 68 | 73        | 74        | 75        |
| X               | X   | X   | X               | X   | X   | X            | X              | X            | X              | X                 | X              | X                  | X           | X               | X                        | X                       | X              | X            | X  | X            | X  | X            | X  | X         | X         | X         |
| <b>10 12 83</b> |     |     | <b>10 17 83</b> |     |     | <b>27 28</b> |                | <b>32 33</b> |                | <b>38 39</b>      |                | <b>42 43</b>       |             | <b>45 46</b>    |                          | <b>51 52</b>            |                | <b>58 59</b> |    | <b>61 62</b> |    | <b>67 68</b> |    | <b>73</b> | <b>74</b> | <b>75</b> |

|                    |     |     |                 |     |     |                |                    |                  |                   |               |               |   |             |    |    |    |                        |                        |    |   |  |  |  |  |
|--------------------|-----|-----|-----------------|-----|-----|----------------|--------------------|------------------|-------------------|---------------|---------------|---|-------------|----|----|----|------------------------|------------------------|----|---|--|--|--|--|
| WELL-OFF (SHUT-IN) |     |     | SHUT-IN TEST    |     |     | SLOPE          | EFFECTIVE DIAMETER | EFFECTIVE LENGTH | GRAVITY (RAW GAS) | EST CSG PRESS | EST TBG PRESS | TO THE BEST OF MY KNOWLEDGE THE ABOVE DATA IS CORRECT |             |    |    |    |                        |                        |    |   |  |  |  |  |
| MO.                | DAY | YR. | MO.             | DAY | YR. |                |                    |                  |                   |               |               |   |             |    |    |    | CASING PRESSURE (PSIG) | TUBING PRESSURE (PSIG) |    |   |  |  |  |  |
| 11                 | 12  | 83  | 10              | 22  | 83  | 23             | 28                 | 29               | 34                | 35            | 38            | 39  | 44          | 45 | 49 | 50 | 53                     | 54                     | 55 | CIG: <i>[Signature]</i><br>OPERATOR: <i>Phil Thack</i><br>COMMISSION: _____ |  |  |  |  |
| X                  | X   | X   | X               | X   | X   | X              | X                  | X                | X                 | X             | X             | X   | X           | X  | X  | X  | X                      | X                      | E  |   |  |  |  |  |
| <b>10 22 83</b>    |     |     | <b>10 25 83</b> |     |     | <b>01789 0</b> |                    | <b>01786 0</b>   |                   | <b>659</b>    | <b>1</b>      | <b>9950</b>   | <b>4702</b> |    |    |    |                        |                        |    |   |  |  |  |  |

METER STAMP: **25337 01000**

REMARKS:

IG 4896-7/73

COLORADO INTERSTATE GAS COMPANY

STATE COPY

WELL TEST DATA FORM

|                        |             |       |                                    |       |                |                |                        |   |                        |                   |                                      |                         |                  |           |                    |       |                                |       |                 |           |  |           |                         |   |                              |   |   |
|------------------------|-------------|-------|------------------------------------|-------|----------------|----------------|------------------------|---|------------------------|-------------------|--------------------------------------|-------------------------|------------------|-----------|--------------------|-------|--------------------------------|-------|-----------------|-----------|--|-----------|-------------------------|---|------------------------------|---|---|
| FIELD CODE<br>60-01-11 |             |       | FIELD NAME<br>NATURAL LUTTES, UT   |       |                |                |                        |   | OPERATOR CODE<br>2293  |                   | OPERATOR NAME<br>CIG EXPLORATION INC |                         |                  |           |                    |       | WELL NAME<br>CIG 570-34-9-21-U |       |                 |           |  |           |                         |   |                              |   |   |
| WELL CODE<br>3         | SECT.<br>34 |       | LOCATION<br>TOWNSHIP/BLK<br>9S 21E |       |                | RGE/SUR<br>21E |                        | PANHANDLE/REDCAVE<br>SEQ. NUMBER<br>01000 |                        | K-FACTOR<br>01000 |                                      | FORMATION<br>WABATCH SA |                  |           |                    | TEST  |                                |       |                 |           |  |           |                         |   |                              |   |   |
| WELL ON (OPEN)         |             |       | FLOW TEST                          |       |                |                |                        |   |                        |                   |                                      |                         |                  |           |                    |       |                                |       |                 |           |  |           |                         |   |                              |   |   |
| DATE (COMP.)           |             |       | ORIFICE SIZE                       |       | METER RUN SIZE |                | COEFFICIENT            |   | GRAVITY (SEP.)         |                   | METER DIFF. RANGE                    |                         | METER PRESSURE   |           | DIFFERENTIAL ROOTS |       | METER TEMP.                    |       | WELL HEAD TEMP. |           | FLOWING TBG/CSG PRESSURE                               |           | STATIC TBG/CSG PRESSURE |   | FLOWING STRING TUBING CASING |   |   |
| MO.                    | DAY         | YR.   | MO.                                | DAY   | YR.            |                |                        |   |                        |                   |                                      |                         |                  |           |                    |       |                                |       |                 |           |  |           |                         |   |                              |   |   |
| 11-12                  | 13-14       | 15-16 | 17-18                              | 19-20 | 21-22          | 23             | 27-28                  | 32-33                                     | 38-39                  | 42-43             | 45-46                                | 51                      | 52               | 55-56     | 58-59              | 61-62 | 67-68                          | 73    | 74              | 75        |  |           |                         |   |                              |   |   |
| X X                    | X X         | X X   | X X                                | X X   | X X            | X X            | X X X                  | X X                                       | X X X                  | X X X X X         | X                                    | X X X X X               | X X X            | X X X X X | X                  | X X   | X X                            | X X X | X X X           | X X X X X | X  | X X X X X | X                       | X | X                            | X | X |
| 12                     | 21          | 82    | 12                                 | 28    | 82             | 01             | 000                    | 2   | 067                    | 0.5773            | 0.601                                | 100                     | 007070           | 23        | 65                 | 086   | 01590                          | 01660 | X               |           |  |           |                         |   |                              |   |   |
| WELL-OFF (SHUT-IN)     |             |       | SHUT-IN TEST                       |       |                |                |                        |   | SLOPE                  |                   | EFFECTIVE DIAMETER                   |                         | EFFECTIVE LENGTH |           | GRAVITY (RAW GAS)  |       | EST CSG PRESS                  |       | EST TBG PRESS   |           | TO THE BEST OF MY KNOWLEDGE THE ABOVE DATA IS CORRECT. |           |                         |   |                              |   |   |
| DATE                   |             |       | PRESSURE TAKEN                     |       | DATE           |                | CASING PRESSURE (PSIG) |   | TUBING PRESSURE (PSIG) |                   |                                      |                         |                  |           |                    |       |                                |       |                 |           |  |           |                         |   |                              |   |   |
| MO.                    | DAY         | YR.   | MO.                                | DAY   | YR.            |                |                        |   |                        |                   |                                      |                         |                  |           |                    |       |                                |       |                 |           |  |           |                         |   |                              |   |   |
| 11-12                  | 13-14       | 15-16 | 17-18                              | 19-20 | 21-22          | 23             | 28                     | 29  | 34                     | 35                | 38-39                                | 44                      | 45               | 48        | 50                 | 53    | 54                             | 55    |                 |           |  |           |                         |   |                              |   |   |
| X X                    | X X         | X X   | X X                                | X X   | X X            | X X            | X X X X X              | X   | X X X X X              | X                 | X X X X X                            | X X X X X               | X X X X X        | X X X X X | X X X X X          | E     | E                              |       |                 |           |  |           |                         |   |                              |   |   |
|                        |             |       | 103                                |       | 82             |                | 13                     |   | 06                     |                   | 82                                   |                         | 01929            |           | 0                  |       | 01924                          |       |                 |           |  |           |                         |   |                              |   |   |
| METER STAMP            |             |       | 25337                              |       |                |                |                        |   | 01000                  |                   |                                      |                         |                  |           | REMARKS:           |       |                                |       |                 |           |  |           |                         |   |                              |   |   |

TO THE BEST OF MY KNOWLEDGE THE ABOVE DATA IS CORRECT.

CIG: \_\_\_\_\_

OPERATOR: *[Signature]*

COMMISSION: \_\_\_\_\_

NATURAL BUTTES UNIT  
COASTAL OIL & GAS CORPORATION - OPERATED (COGC)  
COLORADO INTERSTATE GAS EXPLORATION - OPERATED (CIGE)

Natural Duck

COGC 1-22-9-20  
COGC 2-22-9-20

Natural Buttes

COGC NBU (Ute Trail) #1W  
COGC NBU (Ute Trail) #1MV  
COGC NBU (Ute Trail) #7  
COGC NBU (Ute Trail) #52X  
COGC NBU (Ute Trail) #83X  
COGC NBU (Ute Trail) #88X

COGC NBU #1  
COGC NBU #3  
COGC NBU #4  
COGC NBU #6  
COGC NBU #7  
COGC NBU #8  
COGC NBU #9  
COGC NBU #10  
COGC NBU #11  
COGC NBU #12  
COGC NBU #13  
COGC NBU #14  
COGC NBU #15  
COGC NBU #16  
COGC NBU #17  
COGC NBU #18  
COGC NBU #19  
COGC NBU #20  
COGC NBU #22  
COGC NBU #23 N  
COGC NBU #24 N2  
COGC NBU #26

Highland (Coastal Operated)

NBU #27  
NBU #27A  
NBU #28  
NBU #29  
NBU #31

COGC NBU #32Y  
COGC NBU #33Y  
COGC NBU #35Y  
COGC NBU #36Y

COGC NBU #37XP  
COGC NBU #38 N2  
COGC NBU #39 N  
COGC NBU #41J  
COGC NBU #43 N  
COGC NBU #45 N  
COGC NBU #46 N

RECEIVED  
FEB 14 1961

DIVISION OF  
OIL, GAS & MINING

COGC NBU #47 N2  
COGC NBU #48 N3  
COGC NBU #49 V  
COGC NBU #50 N2  
COGC NBU #51 J  
COGC NBU #52 J  
COGC NBU #53 N  
COGC NBU #54 N  
COGC NBU #56 N2  
COGC NBU #57 N  
COGC NBU #58 N2  
COGC NBU #62 N  
COGC NBU #63 N3  
COGC NBU #64 N3  
COGC NBU #65 N3  
COGC NBU #68 N2  
COGC NBU #69 N2  
COGC NBU #70 N3  
COGC NBU #72 N3  
COGC NBU #74 N3  
COGC NBU #75 N3  
COGC NBU #80 V  
COGC NBU #81 V  
COGC NBU #83 J  
COGC NBU #84 V  
COGC NBU #85 J  
COGC NBU #86 J  
COGC NBU #87 J  
COGC NBU #98 V

CIGE NBU #2-29-20-21  
CIGE NBU #3-32-9-22  
CIGE NBU #4-9-10-21  
CIGE NBU #5-31-9-22  
CIGE NBU #6-19-9-21  
CIGE NBU #7-8-10-21  
CIGE NBU #8-35-9-22  
CIGE NBU #9-36-9-22  
CIGE NBU #10-2-10-22  
CIGE NBU #11-14-9-20 (W)  
CIGE NBU #13-7-10-21  
CIGE NBU #14-9-10-22  
CIGE NBU #15-8-10-22  
CIGE NBU #16-20-10-22  
CIGE NBU #18-2-10-21  
CIGE NBU #19-16-9-21  
CIGE NBU #20-20-10-22  
CIGE NBU #21-15-10-22  
CIGE NBU #22-15-9-10  
CIGE NBU #23-7-10-22  
CIGE NBU #24-29-9-22  
CIGE NBU #25-34-9-22  
CIGE NBU #27-33-9-22  
CIGE NBU #28-35-9-21  
CIGE NBU #30-6-10-21  
CIGE NBU #31-1-10-22  
CIGE NBU #32A-20-9-20

CIGE NBU #33-27-10-21  
CIGE NBU #34-13-10-20  
CIGE NBU #35-1-10-20  
CIGE NBU #36D-32-9-22  
CIGE NBU #37D-21-9-21P  
CIGE NBU #38-4-10-21  
CIGE NBU #40-3-10-21  
CIGE NBU #41-12-10-21  
CIGE NBU #42-25-9-21  
CIGE NBU #43-14-10-22  
CIGE NBU #44-9-9-21  
CIGE NBU #45-15-9-21  
CIGE NBU #46-21-9-21  
CIGE NBU #47-14-10-21  
CIGE NBU #48-15-10-21  
CIGE NBU #49-22-10-21  
CIGE NBU #51D-31-9-22P  
CIGE NBU #52-5-10-22  
CIGE NBU #53-6-10-22  
CIGE NBU #54D-35-9-21  
CIGE NBU #55-1-10-21  
CIGE NBU #56-34-9-21  
CIGE NBU #57-10-10-21  
CIGE NBU #58-16-10-21  
CIGE NBU #59-21-10-21  
CIGE NBU #60-14-9-21  
CIGE NBU #61-13-9-21  
CIGE NBU #62D-36-9-22P  
CIGE NBU #63D-29-9-22P  
CIGE NBU #64D-33-9-22P  
CIGE NBU #65-19-10-22  
CIGE NBU #66-23-10-21  
CIGE NBU #67A-2-10-22P  
CIGE NBU #68D-35-9-22P  
CIGE NBU #69-19-10-21  
CIGE NBU #70-20-9-21  
CIGE NBU #71-7-9-21  
CIGE NBU #72-18-9-21  
CIGE NBU #73D-5-10-22P  
CIGE NBU #74D-6-10-22P  
CIGE NBU #75D-8-10-21P  
CIGE NBU #76D-9-10-21P  
CIGE NBU #77D-10-10-21P  
CIGE NBU #78C-16-9-21P  
CIGE NBU #79D-1-10-21P  
CIGE NBU #80D-2-10-21  
CIGE NBU #81D-4-10-21  
CIGE NBU #83D-7-10-22P  
CIGE NBU #84D-12-10-21P  
CIGE NBU #85D-29-10-21  
CIGE NBU #86D-16-9-21P  
CIGE NBU #87D-34-9-21P  
CIGE NBU #88D-15-10-21P  
CIGE NBU #89D-34-9-22J

95, 01E, 34 30849

CIGE NBU #90D-9-9-21J  
CIGE NBU #91D-15-9-21J  
CIGE NBU #92D-13-10-20J  
CIGE NBU #93D-2-10-21J  
CIGE NBU #94D-14-10-21J  
CIGE NBU #95D-14-10-21J  
CIGE NBU #99D-25-9-21J

COGC NBU #11-14-9-20

Bluebell (Coastal Operated)

Asay

Powell Fee #3

Powell Fee #4

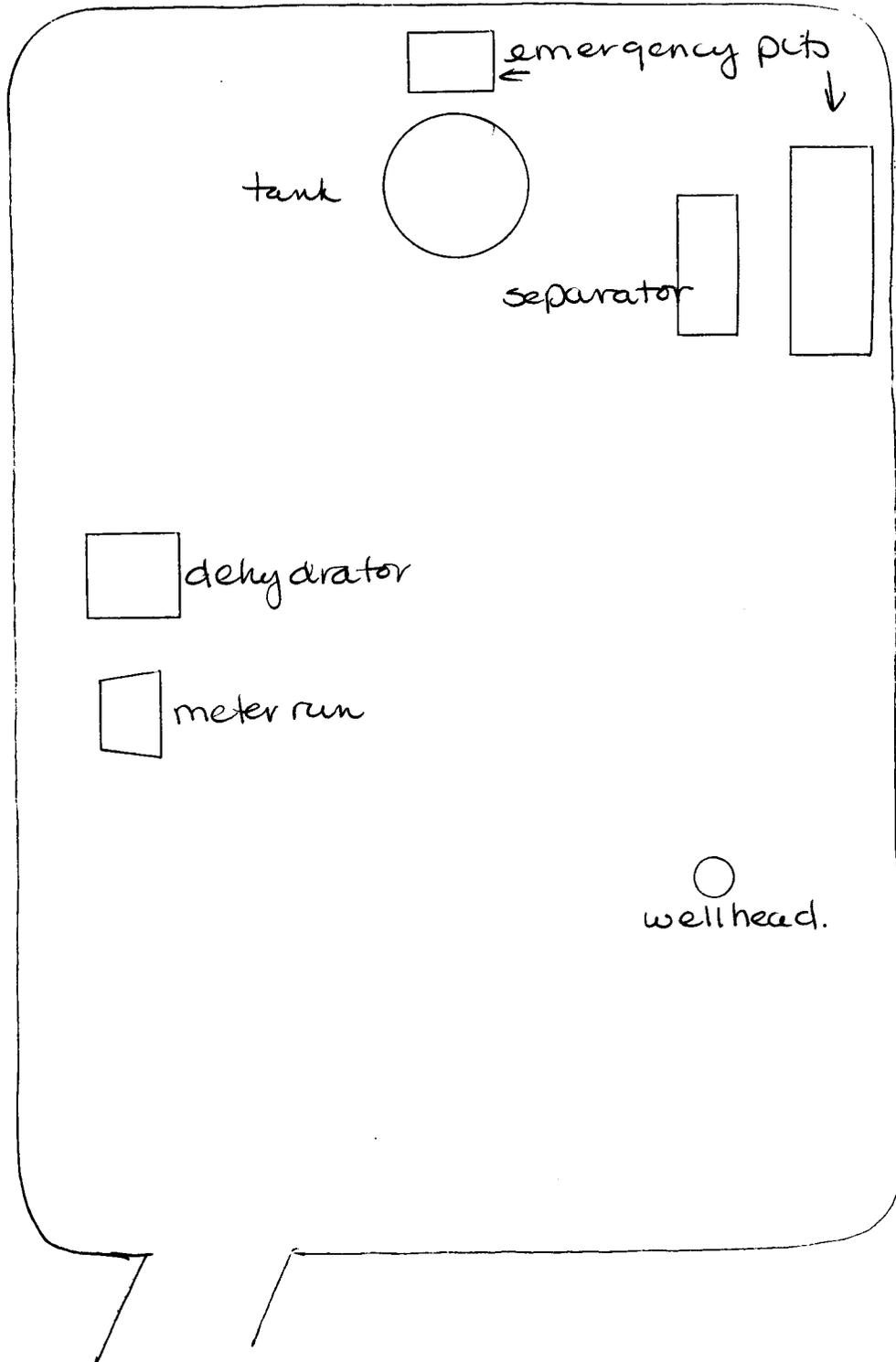
Ute Tribal #1-31

Powell Fee #3 SWD

(16E87A)

Sec 34, T9S, R21E

Butly 1/34/89



**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.

|   |  |  |
|---|--|--|
| 1. Type of Well:<br>OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER:           |  | 5. Lease Designation and Serial Number:<br>See attached list |
| 2. Name of Operator:<br>Coastal Oil and Gas Corporation   |  | 6. If Indian, Allottee or Tribe Name:<br>See attached list   |
| 3. Address and Telephone Number:<br>P.O. Box 749, Denver, CO 80201-0749 (303) 573-4476                    |  | 7. Unit Agreement Name:<br>Natural Buttes Unit               |
| 4. Location of Well<br>Footages: See attached list.<br>County: Uintah<br>QQ, Sec. T., R., M.: State: Utah |  | 8. Well Name and Number:<br>See attached list                |
|   |  | 9. API Well Number:<br>See attached list                     |
|   |  | 10. Field and Pool, or Wildcat:<br>Natural Buttes            |

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

| NOTICE OF INTENT<br>(Submit In Duplicate)   | SUBSEQUENT REPORT<br>(Submit Original Form Only)  |
|---|---|
| <input type="checkbox"/> Abandonment<br><input type="checkbox"/> Casing Repair<br><input type="checkbox"/> Change of Plans<br><input type="checkbox"/> Conversion to Injection<br><input type="checkbox"/> Fracture Treat<br><input type="checkbox"/> Multiple Completion<br><input checked="" type="checkbox"/> Other <u>Install telemetry equipment</u> | <input type="checkbox"/> Abandonment *<br><input type="checkbox"/> Casing Repair<br><input type="checkbox"/> Change of Plans<br><input type="checkbox"/> Conversion to Injection<br><input type="checkbox"/> Fracture Treat<br><input type="checkbox"/> Other _____ |
| <input type="checkbox"/> New Construction<br><input type="checkbox"/> Pull or Alter Casing<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Shoot or Acidize<br><input type="checkbox"/> Vent or Flare<br><input type="checkbox"/> Water Shut-Off   | <input type="checkbox"/> New Construction<br><input type="checkbox"/> Pull or Alter Casing<br><input type="checkbox"/> Shoot or Acidize<br><input type="checkbox"/> Vent or Flare<br><input type="checkbox"/> Water Shut-Off  |
| Approximate date work will start <u>9/27/94</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.  |

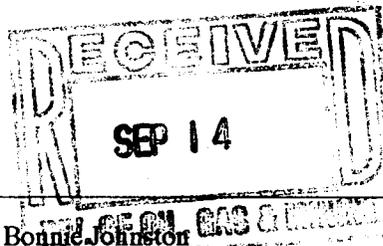
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

The operator requests permission to install automatic gauging and gas sales optimization equipment on the listed wells.

The installation will consist of GH Flow's "Automate," a remote gas flow computer which includes electronic gas measurement. Also, a tank level alarm, tubing and casing pressure, and an automatic choke will be installed on some of the listed wells for gas flow sales optimization and labor reduction. Some wells will have temperature alarms installed on the separator and dehydrator to prevent a high-cost major failure. Wells with intermitters will be controlled with the GH Flow Automate RTU instead of the existing mechanical timer.

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

**FOR RECORD ONLY**



13. Name & Signature: Bonnie Johnston Title: Environmental Coordinator Date: 09/09/94

(This space for State use only)

| Well              | Lease Designation<br>& Serial Number | If Indian, Allottee<br>or Tribe Name | API #        | Location of Well<br>At Surface | Section, Township,<br>Range |
|-------------------|--------------------------------------|--------------------------------------|--------------|--------------------------------|-----------------------------|
| CIGE #115-35-9-21 | State ML-22582                       | N/A                                  | 43-047-31918 | 509' FNL & 2338' FEL NW/NE     | Sect.35, T9S-R21E           |
| CIGE #143-34-9-21 | State U-01194A                       | Ute Tribal Surface                   | 43-047-31995 | 1811' FNL & 1624' FEL SW/NE    | Sect.34, T9S-R21E           |
| CIGE #87D-34-9-21 | U-01194-A-ST                         | N/A                                  | 43-047-30869 | 967' FNL & 422' FEL NE/NE      | Sect.34, T9S-R21E           |
| NBU #132          | State U-01194                        | N/A                                  | 43-047-31938 | 594' FNL & 850' FWL NW/NW      | Sect.26, T9S-R21E           |
| NBU #156          | U-01194-ST                           | N/A                                  | 43-047-32005 | 1992' FNL & 774' FWL SW/NW     | Sect.35, T9S-R21E           |

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

5. Lease Designation and Serial Number:  
See attached list

**SUNDRY NOTICES AND REPORTS ON WELLS**

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Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.

6. If Indian, Allottee or Tribe Name:  
See attached list

7. Unit Agreement Name:  
Natural Buttes Unit

1. Type of Well:  
OIL  GAS  OTHER:

8. Well Name and Number:  
See attached list

2. Name of Operator:  
Coastal Oil and Gas Corporation

9. API Well Number:  
See attached list

3. Address and Telephone Number:  
P.O. Box 749, Denver, CO 80201-0749 (303) 573-4476

10. Field and Pool, or Wildcat:  
Natural Buttes

4. Location of Well  
Footages: See attached list.  
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 Install telemetry equipment
- New Construction
- Pull or Alter Casing
- Recompletion
- Shoot or Acidize
- Vent or Flare
- Water Shut-Off

Approximate date work will start 9/27/94

**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 Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION AND LOG form.

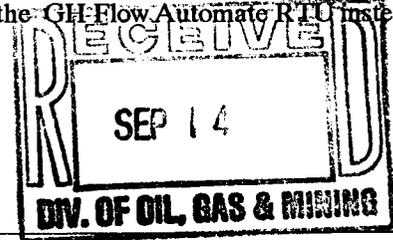
\* Must be accompanied by a cement verification report.

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.)

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



13. Name & Signature: Bonnie Johnston

Bonnie Johnston  
Title: Environmental Coordinator Date: 09/09/94

(This space for State use only)

| Well              | Lease Designation<br>& Serial Number | If Indian, Allottee<br>or Tribe Name | API #        | Location of Well<br>At Surface | Section, Township,<br>Range |
|-------------------|--------------------------------------|--------------------------------------|--------------|--------------------------------|-----------------------------|
| CIGE #115-35-9-21 | State ML-22582                       | N/A                                  | 43-047-31918 | 509' FNL & 2338' FEL NW/NE     | Sect.35, T9S-R21E           |
| CIGE #143-34-9-21 | State U-01194A                       | Ute Tribal Surface                   | 43-047-31995 | 1811' FNL & 1624' FEL SW/NE    | Sect.34, T9S-R21E           |
| CIGE #87D-34-9-21 | U-01194-A-ST                         | N/A                                  | 43-047-30869 | 967' FNL & 422' FEL NE/NE      | Sect.34, T9S-R21E           |
| NBU #132          | State U-01194                        | N/A                                  | 43-047-31938 | 594' FNL & 850' FWL NW/NW      | Sect.26, T9S-R21E           |
| NBU #156          | U-01194-ST                           | N/A                                  | 43-047-32005 | 1992' FNL & 774' FWL SW/NW     | Sect.35, T9S-R21E           |

STATE OF UTAH  
DIVISION OF OIL, GAS AND MINING

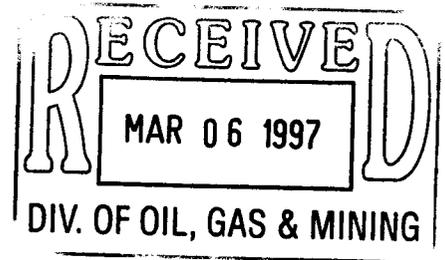
|  |  |   |
|--|--|---|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b>   |  | 5. Lease Designation and Serial Number:<br>U-01194-A-ST |
| Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells.<br>Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals. |  | 6. If Indian, Allottee or Tribe Name:<br>N/A            |
|  |  | 7. Unit Agreement Name:<br>Natural Buttes Unit          |
| 1. Type of Well:<br>OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER:  |  | 8. Well Name and Number:<br>CIGE #87D-34-9-21           |
| 2. Name of Operator:<br>Coastal Oil & Gas Corporation  |  | 9. API Well Number:<br>43-047-30869                     |
| 3. Address and Telephone Number:<br>P.O. Box 749, Denver, CO 80201-0749 (303) 573-4476   |  | 10. Field and Pool, or Wildcat:<br>Natural Buttes       |
| 4. Location of Well<br>Footages: 967' FNL & 422' FEL<br>County: Uintah<br>QQ, Sec., T., R., M.: NE/NE Section 34, T9S-R21E<br>State: Utah  |  |   |

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

| NOTICE OF INTENT<br>(Submit In Duplicate)   | SUBSEQUENT REPORT<br>(Submit Original Form Only)  |
|---|---|
| <input type="checkbox"/> Abandon<br><input type="checkbox"/> Repair Casing<br><input type="checkbox"/> Change of Plans<br><input type="checkbox"/> Convert to Injection<br><input checked="" type="checkbox"/> Fracture Treat or Acidize<br><input type="checkbox"/> Multiple Completion<br><input checked="" type="checkbox"/> Other CO, lower tubing, install PLE | <input type="checkbox"/> Abandon *<br><input type="checkbox"/> Repair Casing<br><input type="checkbox"/> Change of Plans<br><input type="checkbox"/> Convert to Injection<br><input type="checkbox"/> Fracture Treat or Acidize<br><input type="checkbox"/> Other _____ |
| <input type="checkbox"/> New Construction<br><input type="checkbox"/> Pull or Alter Casing<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Perforate<br><input type="checkbox"/> Vent or Flare<br><input type="checkbox"/> Water Shut-Off  | <input type="checkbox"/> New Construction<br><input type="checkbox"/> Pull or Alter Casing<br><input type="checkbox"/> Perforate<br><input type="checkbox"/> Vent or Flare<br><input type="checkbox"/> Water Shut-Off   |
| Approximate date work will start _____ Upon approval _____  | Date of work completion _____<br><small>Report results of bMultiple CompletionsÇ and bRecompletionsÇ to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT AND LOG form.<br/>* Must be accompanied by a cement verification report.</small>                 |

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.)

Please see the attached procedure for operations to be completed on the subject well.



13. Name & Signature: Bonnie Carson Title: Senior Environmental Analyst Date: 03/04/97

(This space for State use only)

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

**FOR RECORD ONLY**

**CIGE #87D-34-9-21**  
**NATURAL BUTTES FIELD**  
**SECTION 34 T9S R21E**  
**WORKOVER PROCEDURE** *HW21*

**WELL DATA**

LOCATION: 967' FNL 422' FEL SEC. 34 T9S R21E  
ELEVATION: 5037' GR., 5052' KB.  
TD: 6225', PBSD 6183' (8/92),  
CSG: 9-5/8", 36.0#, K-55 @ 213' w/ 125 SX.  
5-1/2", 17.0#, J-55 @ 6224' w/ 660 SX.  
CMT ANNULUS w/ 1585 SX.  
TBG: 2-3/8", 4.7#, J-55 @ 4702'  
FORMATION(S): WASATCH 4844' - 6108', 13 HOLES (1992)

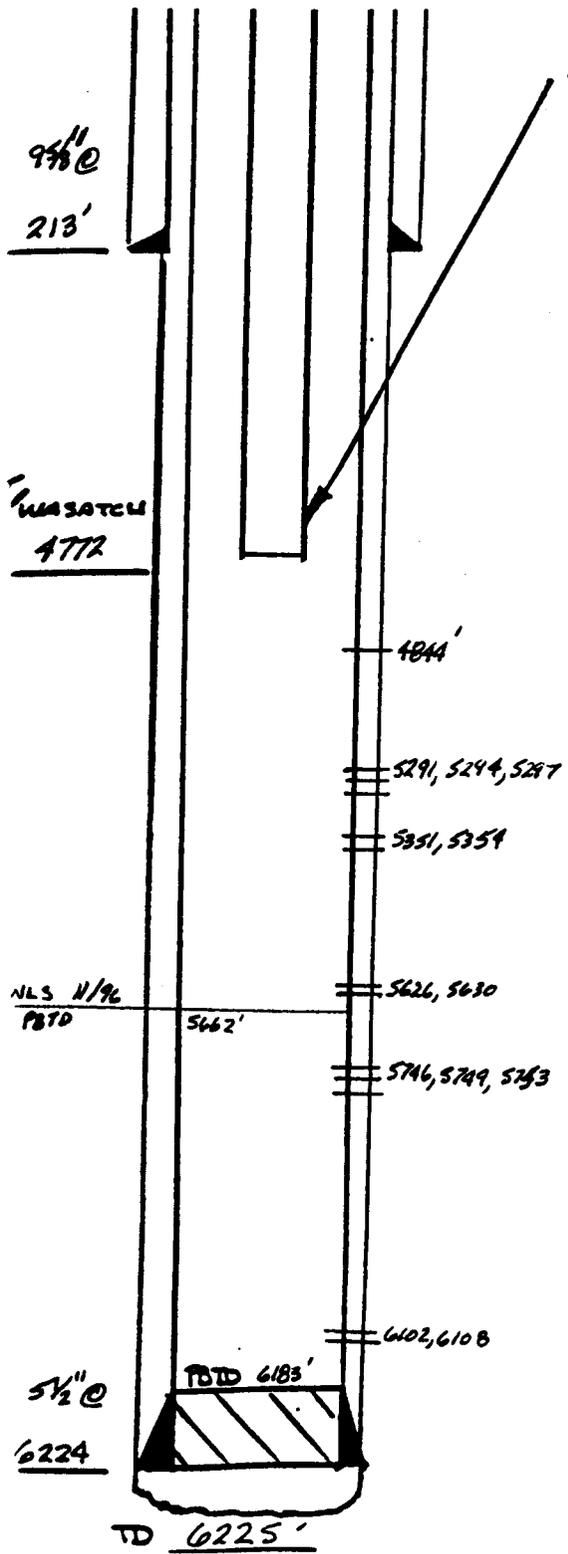
**PROCEDURE**

1. MI & RU pulling unit. Blow down & kill well w/ minimum amount of water w/ clay stabilizing additives (i.e., Dowell's L-64). ND WH. NU BOP.
2. MI & RU Air/Foam unit. Circ hole w/ kill fluid foamed w/ air. CO from 5662' (WLS-11/96) to 6183' (PBSD). PU & land tbg @ 5753' (BP @ 6108'). ND BOP. NU WH. RD & MO pulling unit and Air/Foam unit.
3. RU service company. Pump 714 gal. 7-1/2% HCL acid w/ inhibitors and clay stabilizers across perms 4844' - 6108'. RD service company. RU swab unit. Acid to be swabbed/ flowed back within 8- 12 hrs.
4. Install PLE. RD swab unit. Return the well to sales.

**CIGE #87D-34-9-21  
NATURAL BUTTES FIELD  
SECTION 34 T9S R21E**

**WELL DATA**

LOCATION: 967' FNL 422' FEL SEC. 34 T9S R21E  
 ELEVATION: 5037' GR., 5052' KB.  
 TD: 6225', PBSD 6183' (8/82),  
 CSG: 9-5/8", 36.0#, K-55 @ 213' w/ 125 SX.  
 5-1/2", 17.0#, J-55 @ 6224' w/ 660 SX.  
 CMT ANNULUS w/ 1585 SX.  
 TBG: 2-3/8", 4.7#, J-55 @ 4702'  
 FORMATION(S): WASATCH 4844' - 6108', 13 HOLES (1982)



2 3/8", 4.7" @ 4702'

WASATCH 4772

4844'

5291, 5294, 5297

5351, 5354

(11/96) WLS PBSD 5662'

5626, 5630

5746, 5749, 5753

6102'

6108'

5753'

6102, 6108

TD 6183'

TD 6225'

(8/82) WASATCH 4844'-6108' 6 SANDS 13 HOLES  
 PERF 1 JSPP w/ 3/8" CSG SUN  
 4844' 5291' 5351' 5626' 5746' 6102'  
 5294' 5354' 5630' 5749' 6108'  
 5297' 5753'

ED w/ 3108 gal 3% KCL water + 30 BS's 1PF 1150 MCF 18/64" OX  
 FTP 600 #

FRAC w/ 100,000 # SAND + 50,000 gal gel

1PF (8/82) 2150 MCF + TSTM BW 18/64" OX FTP 1450 # CP 1450 #

**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:

U-01194-A-ST

6. If Indian, Allottee or Tribe Name:

N/A

7. Unit Agreement Name:

Natural Buttes Unit

1. Type of Well:

OIL  GAS  OTHER:

8. Well Name and Number:

CIGE #87D-34-9-21

2. Name of Operator:

Coastal Oil & Gas Corporation

9. API Well Number:

43-047-30869

3. Address and Telephone Number:

P.O. Box 749, Denver, CO 80201-0749

(303) 573-4476

10. Field and Pool, or Wildcat:

Natural Buttes

4. Location of Well

Footages: 967' FNL & 422' FEL

County: Uintah

QQ, Sec., T., R., M.: NE/NE Section 34, T9S-R21E

State: Utah

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

**NOTICE OF INTENT**

(Submit in Duplicate)

- |  |   |
|--|---|
| <input type="checkbox"/> Abandon                   | <input type="checkbox"/> New Construction     |
| <input type="checkbox"/> Repair Casing             | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans           | <input type="checkbox"/> Recompletion         |
| <input type="checkbox"/> Convert to Injection      | <input type="checkbox"/> Perforate            |
| <input type="checkbox"/> Fracture Treat or Acidize | <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"/> Abandon *                                      | <input type="checkbox"/> New Construction     |
| <input type="checkbox"/> Repair Casing                                  | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans                                | <input type="checkbox"/> Perforate            |
| <input type="checkbox"/> Convert to Injection                           | <input type="checkbox"/> Vent or Flare        |
| <input type="checkbox"/> Fracture Treat or Acidize                      | <input type="checkbox"/> Water Shut-Off       |
| <input checked="" type="checkbox"/> Other CO, lower tubing, install PLE |   |

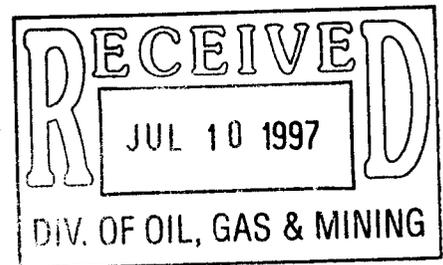
Date of work completion 06/19/97

Report results of bMultiple CompletionsÇ and bRecompletionsÇ to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT 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.)

Please see attached chronological history for operations performed on the subject well.



13.

Name & Signature:

*Sheila Bremer*

Sheila Bremer

Title: Environmental & Safety Analyst

Date

07/07/97

(This space for State use only)

Tax credit 3/98

**THE COASTAL CORPORATION  
PRODUCTION REPORT**

CHRONOLOGICAL HISTORY

CIGE #87D  
Natural Buttes Unit  
Uintah County, Utah  
WI: 100% CIGE

Page 1

TD: 6225'      PBTB: 6183'  
5½" @ 6224'; Perfs: 4844' - 6108'

**Clean Out, Lower Tubing and Install PLE**

- 06/08/97      **Blow well dn. ND WH & NU BOPs.** Road rig from NBU #211 to CIGE 87D. MIRU & RU pmp & lines & flow tank. SDFN  
\$2,012      TC: \$2,012
- 06/09/97      **RIH w/tbg & spot acid on perf.** SICP 200 psi, SITP 100 psi. Blow well dn. ND WH & NU BOPs w/hydril & SH. RU floor. PU & LD hanger & blast jt. RU broach & broach tbg to SN. Talley, PU & RIH w/ tbg, tag @ 5785'. RU swivel & break circ w/air-foam. CO from 5785' to 6178' PBTB, circ hole clean. Pmp 10 bbls dn tbg. RD swivel & POOH w/tbg to float & LD. POOH w/tbg from perf, EOT @ 4702' & SDFN @ 8PM.  
DC: \$8,642      TC: \$10,554
- 06/10/97      **RU BJ Serv & spot acid on.** SICP 450 psi, SITP 450 psi. Blow well dn. PL dn tbg. RIH w/tbg to 6178' PBTB. LD 15 jts broach tbg. PU hanger & land tbg w/183 jts 2¾" 4.7 J-55 w/ NC & SN, EOT @ 5737' SN @ 5705'. RU BJ Serv & spot acid on perf from 6108' to 4844' w/720 gals 15% HCl & add. Max/Avg P = 300/200 psi, MR/ ART 4.7 BPM. Total load = 64 BW, 1STP 0, 5 min on vac. RD BJ Serv & WO acid. RD floor, ND BOPs w/hydril & SH. NU WH & PLE stop. RDMO BJ. RU Delsco & swab, IFL 4800', Made 17 runs, rec 50 BW & acid, FFL 5200', FCP 350 psi, FTP 0 psi PH-3. SDFN  
DC: \$11,168      TC: \$21,722
- 06/12/97      **SI to build-up.** ITP 50 psi, ICP 350 psi, IFL 4900'. Made 6 runs, rec 18 BLW, FFL 5200'. SI for build-up. Needed rig to swab acid on other well. FTP 0 psi, FCP 400 psi. 7 BLWTR  
DC: \$820      TC: \$22,542
- 06/13/97      **SI to build-up.** ITP 200 psi, ICP 200 psi, drop plunger. No arrival, IFL 4000'. Made 3 runs, rec 8 BLW. SI to build press, try in morning again. FTP 0 psi, FCP 400 psi, FFL 5000'. 7 BLWTR, rec 8 BLW, 1 BLW overload. Flowing 150 MCF, 10 BW, 300 TP, 400 CP, on 30/64" chk.  
DC: \$613      TC: \$23,155
- 06/14/97      **On production.** Delsco, ITP 350 psi, ICP 400 psi. Started tripping plunger 4 times. Put on production @ 9:00 AM. FTP 200 psi, FCP 400 psi. Flowing 111 MCF, 5 BW, 125 TP, 173 CP, on 30/64" chk.  
DC: \$385      TC: \$23,540

06/15/97      Flowing 218 MCF, 5 BW, 130 TP, 300 CP, on 30/64" chk.

06/16/97      Flowing 208 MCF, 5 BW, 150 TP, 256 CP, on 30/64" chk.

06/17/97      Flowing 175 MCF, 5 BW, 348 TP, 353 CP, on 30/64" chk.

06/18/97      Flowing 37 MCF, 5 BW, 503 TP, 355 CP, on 30/64" chk. Compressor dn for 20 hrs.

06/19/97      Flowing 197 MCF, 5 BW, 250 TP, 336 CP, on 30/64" chk. Prior Production: Flowing 73 MCF, 0 BW, 109 TP, 178 CP, on 30/64" chk. **Final Report**

JAN. 17. 2003 3:34PM

TPORT

NO. 173 P. 2

**WESTPORT OIL AND GAS COMPANY, L.P.**

410 Seventeenth Street #2300 Denver Colorado 80202-4436  
Telephone: 303 573 5404 Fax: 303 573 5609

**February 1, 2002**

Department of the Interior  
Bureau of Land Management  
2850 Youngfield Street  
Lakewood, CO 80215-7093  
Attention: Ms. Martha Maxwell

**RE: BLM Bond CO-1203  
BLM Nationwide Bond 158626364  
Surety - Continental Casualty Company  
Belco Energy Corporation merger into Westport Oil and Gas Company, Inc.  
Conversion of Westport Oil and Gas Company, Inc., into Westport Oil and Gas Company, L.P.  
Assumption Rider - Westport Oil and Gas Company, L.P.**

**Dear Ms. Maxwell:**

Pursuant to our recent conversations, please find the following list of enclosures for the BLM's consideration and approval:

Two (2) Assumption Riders, fully executed originals.  
Copies of Belco Energy Corporation merger into Westport Oil and Gas Company, Inc.  
Copies of Westport Oil and Gas Company, Inc., conversion into Westport Oil and Gas Company, L.P.  
List of all Federal/BIA/State Leases - Belco/Westport's leases - in all states.

Please inform us of any additional information needed to complete the change to Westport Oil and Gas Company, L.P., as operator of record.

I thank you for your assistance and cooperation in this matter. Please do not hesitate contacting the undersigned, should a question arise.

Sincerely,  
Westport Oil and Gas Company, L.P.

Debby J. Black  
Engineer Technician

Encl:



United States Department of the Interior **RECEIVED**

BUREAU OF LAND MANAGEMENT

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

FEB 22 2002

DIVISION OF  
OIL, GAS AND MINING

In Reply Refer To:

3106

UTU-25566 et al

(UT-924)

FEB 21 2002

NOTICE

Westport Oil and Gas Company L.P. : Oil and Gas  
410 Seventeenth Street, #2300 :  
Denver Colorado 80215-7093 :

Name Change Recognized

Acceptable evidence has been received in this office concerning the name change of Westport Oil and Gas Company, Inc. into Westport Oil and Gas Company, L.P. with Westport Oil and Gas Company, L.P. being the surviving entity.

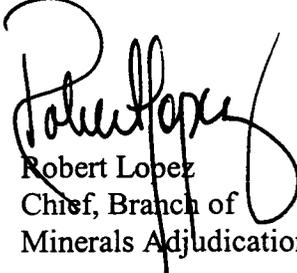
For our purposes, the name change is recognized effective December 31, 2001.

The oil and gas lease files identified have been noted as to the name change. The exhibit was compiled from a list of leases obtained from our computer program. We have not abstracted the lease files to determine if the entities affected by this name change hold an interest in the leases identified nor have we attempted to identify leases where the entities are the operator on the ground maintaining no vested recorded title or operating rights interests. We will be notifying the Minerals Management Service and all applicable Bureau of Land Management offices of the change by a copy of this notice. If additional documentation for changes of operator are required by our Field Offices, you will be contacted by them.

If you identify additional leases in which the entities maintain an interest, please contact this office and we will appropriately document those files with a copy of this Notice.

Due to the name change, the name of the principal/obligor on the bond is required to be changed from Westport Oil and Gas Company, Inc. to Westport Oil and Gas Company, L.P.. You may accomplish this either by consent of surety rider on the original bond or a rider to the original bond. The bonds are held in Colorado.

UTU-03405  
UTU-20895  
UTU-25566  
UTU-43156  
UTU-49518  
UTU-49519  
UTU-49522  
UTU-49523



Robert Lopez  
Chief, Branch of  
Minerals Adjudication

cc: Moab Field Office  
Vernal Field Office  
MMS, Reference Data Branch, MS3130, PO Box 5860, Denver CO 80217  
State of Utah, DOGM, Attn: Jim Thompson (Ste. 1210), Box 145801, SLC UT 84114  
Teresa Thompson (UT-922)  
Joe Incardine (UT-921)

# memorandum

Branch of Real Estate Services  
Uintah & Ouray Agency

Date: 5 December, 2002

Reply to  
Attn of: Supervisory Petroleum Engineer

Subject: Modification of Utah Division of Oil, Gas and Mining Regulations

To: Director, Utah Division of Oil, Gas and Mining Division: John Baza

We have been advised of changes occurring with the operation of your database for Change of Operator. You will be modifying your records to reflect Change of Operator once you have received all necessary documentation from the companies involved, and perhaps in advance of our Notice of Concurrence/Approval of Change of Operator where Indian leases are involved.

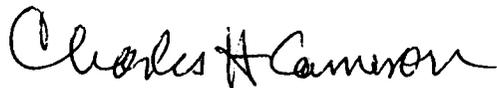
We have no objection.

With further comment to Rulemaking, I wish to comment concerning the provision of Exhibits for upcoming Hearings. I would like to see the Uintah & Ouray Agency, BIA, and the Ute Indian Tribe, Energy & Mineral Resources Department added to the list of those parties that receive advance Exhibits so as to allow us to have research time prior to Hearing dates. We will be able to provide a more informed recommendation to the Oil, Gas and Mining Board. It would be best if we would receive only those Exhibits that concern Indian lands, specifically on or adjacent to Indian lands. This may be a difficult situation to attain, as it is not always clear where 'on or adjacent' occurs.

I am aware that you have gone to extra effort to correct this matter already, and I fully appreciate it. My request is intended only to allow the addition of Uintah & Ouray Agency and Ute Indian Tribe to the official listing.

We appreciate your concern, and hope that these comments are timely enough for consideration in the revision process.

CC: Minerals & Mining Section of RES  
Ute Energy & Mineral Resources Department: Executive Director  
chrono





# United States Department of the Interior

BUREAU OF INDIAN AFFAIRS

Washington, D.C. 20240

FEB 10 2003

IN REPLY REFER TO:  
Real Estate Services

Carroll A. Wilson  
Principal Landman  
Westport Oil and Gas Company, L.P.  
1368 South 1200 East  
Vernal, Utah 84078

Dear Mr. Wilson:

This is in response to your request for approval of RLI Insurance Company's Nationwide Oil and Gas Lease Bond No. RLB0005239 executed effective December 17, 2002, (\$150,000 coverage) with Westport Oil and Gas Company, L. P., as principal.

This bond is hereby approved as of the date of this correspondence and will be retained in the Bureau of Indian Affairs' Division of Real Estate Services, 1849 C Street, NW, MS-4512-MIB, Washington, D.C. 20240. All Bureau oil and gas regional offices and the surety are being informed of this action.

In cases where you have existing individual and/or collective bonds on file with one or more of our regional offices, you may now request those offices, directly, to terminate in lieu of coverage under this Nationwide Bond.

Enclosed is a copy of the approved bond for your files. If we may be of further assistance in this matter, please advise.

Sincerely,

Director, Office of Trust Responsibilities

**ACTING**

Enclosure



# United States Department of the Interior

## BUREAU OF LAND MANAGEMENT

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

IN REPLY REFER TO  
UT-922

February 27, 2003

Westport Oil and Gas Company, L.P.  
Attn: Gary D. Williamson  
1670 Broadway, Suite 2800  
Denver, Colorado 80202

Re: Natural Buttes Unit  
Uintah County, Utah

Gentlemen:

On February 27, 2003, we received an indenture dated December 17, 2002, whereby El Paso Production Oil & Gas Company resigned as Unit Operator and Westport Oil and Gas Company, L.P., was designated as Successor Unit Operator for the Natural Buttes 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 February 27, 2003. In approving this designation, the Authorized Officer neither warrants nor certifies that the designated party has obtained all required approval that would entitle it to conduct operations under the Natural Buttes Unit Agreement.

Your nationwide (Colorado) oil and gas bond No. 1203 will be used to cover all operations within the Natural Buttes 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: Field Manager - Vernal (w/enclosure)  
SITLA  
Division of Oil, Gas & Mining  
Minerals Adjudication Group  
File - Natural Buttes Unit (w/enclosure)  
Agr. Sec. Chron  
Fluid Chron

UT922:TAThompson:tt:02/27/2003

RECEIVED

FEB 28 2003

DIV. OF OIL, GAS & MINING

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

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.

|  |  |  |
|--|--|--|
|  |  | 5. LEASE DESIGNATION AND SERIAL NUMBER:        |
|  |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME:          |
|  |  | 7. UNIT or CA AGREEMENT NAME:                  |
| 1. TYPE OF WELL<br>OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____ |  | 8. WELL NAME and NUMBER:<br><b>Exhibit "A"</b> |
| 2. NAME OF OPERATOR:<br><b>El Paso Production Oil &amp; Gas Company</b>                            |  | 9. API NUMBER:                                 |
| 3. ADDRESS OF OPERATOR:<br><b>9 Greenway Plaza Houston TX 77064-0995</b>                           | PHONE NUMBER:<br><b>(832) 676-5933</b> | 10. FIELD AND POOL, OR WILDCAT:                |
| 4. LOCATION OF WELL<br>FOOTAGES AT SURFACE:<br><br>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:    |  | COUNTY:<br><br>STATE:<br><b>UTAH</b>           |

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

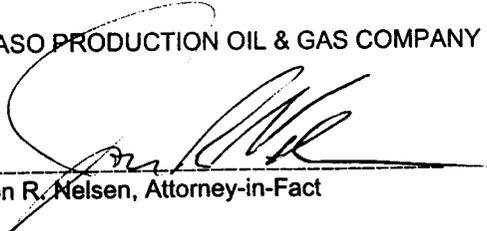
| TYPE OF SUBMISSION   | TYPE OF ACTION  |   |  |
|--|---|---|--|
| <input type="checkbox"/> NOTICE OF INTENT<br>(Submit in Duplicate)<br>Approximate date work will start:<br>_____ | <input type="checkbox"/> ACIDIZE                        | <input type="checkbox"/> DEEPEN                           | <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"/> SUBSEQUENT REPORT<br>(Submit Original Form Only)<br>Date of work completion:<br>_____   | <input type="checkbox"/> CASING REPAIR                  | <input type="checkbox"/> NEW CONSTRUCTION                 | <input type="checkbox"/> TEMPORARILY ABANDON           |
|  | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS       | <input checked="" 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 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 type="checkbox"/> OTHER: _____                  |
|  | <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.

Operator change to Westport Oil and Gas Company, L.P., 1670 Broadway, Suite 2800, Denver, CO. 80202-4800, effective December 17, 2002.

BOND # \_\_\_\_\_  
State Surety Bond No. RLB0005236  
Fee Bond No. RLB0005238

EL PASO PRODUCTION OIL & GAS COMPANY

By:   
Jon R. Nelsen, Attorney-in-Fact

**RECEIVED**  
**FEB 28 2003**  
DIV. OF OIL, GAS & MINING

|   |   |
|---|---|
| NAME (PLEASE PRINT) <b>WESTPORT OIL AND GAS COMPANY, L.P.</b><br><b>David R. Dix</b>          | TITLE <b>Agent and Attorney-in-Fact</b> |
| SIGNATURE  | DATE <b>12/17/02</b>                    |

(This space for State use only)

Form 3160-5  
(August 1999)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

FORM APPROVED  
OMB No. 1004-0135  
Expires November 30, 2000

5. Lease Serial No.  
**SEE ATTACHED EXHIBIT "A"**  
6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
**SEE ATTACHED EXHIBIT "A"**

2. Name of Operator  
**WESTPORT OIL & GAS COMPANY, L.P.**

9. API Well No.  
**SEE ATTACHED EXHIBIT "A"**

3a. Address  
**P.O. BOX 1148 VERNAL, UT 84078**

3b. Phone No. (include area code)  
**(435) 781-7023**

10. Field and Pool, or Exploratory Area

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

**SEE ATTACHED EXHIBIT "A"**

11. County or Parish, State  
**UINTAH COUNTY, UT**

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

| TYPE OF SUBMISSION                                | TYPE OF ACTION                                |   |  |   |
|---|---|---|--|---|
| <input type="checkbox"/> Notice of Intent         | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off   |
| <input type="checkbox"/> Subsequent Report        | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity   |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input checked="" type="checkbox"/> Other |
|   | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | <b>SUCCESSOR OF</b>                       |
|   | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            | <b>OPERATOR</b>                           |

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed if testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator determined that the site is ready for final inspection.

WESTPORT OIL & GAS COMPANY, L.P., IS CONSIDERED TO BE THE OPERATOR ON THE ATTACHED DESCRIBED LANDS AND IS RESPONSIBLE UNDER THE TERMS AND CONDITIONS OF THE LEASE FOR THE OPERATIONS CONDUCTED ON THE LEASED LANDS OR PORTIONS THEREOF, BOND COVERAGE FOR THIS WELL IS PROVIDED BY FEDERAL NATIONWIDE BOND NO. 158626364, EFFECTIVE FEBRUARY 1, 2002, AND BIA NATIONWIDE BOND NO. RLB0005239, EFFECTIVE FEBRUARY 10, 2003.

RECEIVED

MAR 04 2003

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

Name (Printed/Typed)

**CHERYL CAMERON**

Title

**OPERATIONS**

Signature

Date

**March 4, 2003**

DIV. OF OIL, GAS & MINING

THIS SPACE FOR FEDERAL OR STATE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, make 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.

(Instructions on reverse)

**OPERATOR CHANGE WORKSHEET**

**ROUTING**

|         |                                     |
|---------|-------------------------------------|
| 1. GLH  |                                     |
| 2. CDW  | <input checked="" type="checkbox"/> |
| 3. FILE |                                     |

**X Change of Operator (Well Sold)**

Designation of Agent/Operator

Operator Name Change

Merger

|  |                               |
|--|-------------------------------|
| The operator of the well(s) listed below has changed, effective: <b>12-17-02</b> |                               |
| <b>FROM: (Old Operator):</b>   | <b>TO: ( New Operator):</b>   |
| EL PASO PRODUCTION OIL & GAS COMPANY   | WESTPORT OIL & GAS COMPANY LP |
| Address: 9 GREENWAY PLAZA  | Address: P O BOX 1148         |
|  |                               |
| HOUSTON, TX 77064-0995   | VERNAL, UT 84078              |
| Phone: 1-(832)-676-5933  | Phone: 1-(435)-781-7023       |
| Account No. N1845  | Account No. N2115             |

CA No. Unit: NATURAL BUTTES

| <b>WELL(S)</b>              |                |              |              |               |              |                |
|-----------------------------|----------------|--------------|--------------|---------------|--------------|----------------|
| NAME                        | SEC TWN<br>RNG | API NO       | ENTITY<br>NO | LEASE<br>TYPE | WELL<br>TYPE | WELL<br>STATUS |
| NBU 377                     | 31-09S-21E     | 43-047-34363 | 99999        | FEDERAL       | GW           | APD            |
| NBU 378                     | 31-09S-21E     | 43-047-34364 | 2900         | FEDERAL       | GW           | P              |
| NBU 409                     | 32-09S-21E     | 43-047-34421 | 99999        | STATE         | GW           | APD            |
| NBU 411                     | 32-09S-21E     | 43-047-34422 | 99999        | STATE         | GW           | APD            |
| NBU 424-32E                 | 32-09S-21E     | 43-047-33699 | 2900         | STATE         | GW           | P              |
| NBU 27                      | 33-09S-21E     | 43-047-30304 | 2900         | STATE         | GW           | PA             |
| NBU 27-A                    | 33-09S-21E     | 43-047-30398 | 2900         | STATE         | GW           | PA             |
| NBU 262                     | 33-09S-21E     | 43-047-32929 | 2900         | FEDERAL       | GW           | S              |
| NBU 396                     | 33-09S-21E     | 43-047-34480 | 2900         | FEDERAL       | GW           | DRL            |
| NBU 428                     | 33-09S-21E     | 43-047-34709 | 99999        | STATE         | GW           | APD            |
| NBU 438                     | 33-09S-21E     | 43-047-34787 | 99999        | STATE         | GW           | APD            |
| NBU CIGE 56-34-9-21         | 34-09S-21E     | 43-047-30530 | 2900         | STATE         | GW           | P              |
| <b>NBU CIGE 87D-34-9-21</b> | 34-09S-21E     | 43-047-30869 | 2900         | STATE         | GW           | P              |
| NBU 98V                     | 34-09S-21E     | 43-047-31327 | 2900         | FEDERAL       | GW           | TA             |
| CIGE 114-34-9-21            | 34-09S-21E     | 43-047-31915 | 2900         | FEDERAL       | GW           | S              |
| CIGE 143-34-9-21            | 34-09S-21E     | 43-047-31995 | 2900         | FEDERAL       | GW           | P              |
| NBU 221                     | 34-09S-21E     | 43-047-32499 | 2900         | FEDERAL       | GW           | PA             |
| NBU 221X                    | 34-09S-21E     | 43-047-32545 | 2900         | STATE         | GW           | P              |
| CIGE 236-34-9-21            | 34-09S-21E     | 43-047-32861 | 2900         | STATE         | GW           | P              |
| CIGE 203-34-9-21            | 34-09S-21E     | 43-047-32881 | 2900         | STATE         | GW           | P              |

**OPERATOR CHANGES DOCUMENTATION**

Enter date after each listed item is completed

1. (R649-8-10) Sundry or legal documentation was received from the **FORMER** operator on: 02/28/2003
2. (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 03/04/2003
3. The new company has been checked through the **Department of Commerce, Division of Corporations Database** on: 03/06/2003
4. Is the new operator registered in the State of Utah: YES Business Number: 1355743-0181
5. If **NO**, the operator was contacted on: \_\_\_\_\_

6. (R649-9-2)Waste Management Plan has been received on: IN PLACE

7. **Federal and Indian Lease Wells:** The BLM and or the BIA has approved the merger, name change, or operator change for all wells listed on Federal or Indian leases on: BLM-12/31/2003 BIA-12/5/02

8. **Federal and Indian Units:**

The BLM or BIA has approved the successor of unit operator for wells listed on: 02/27/2003

9. **Federal and Indian Communization Agreements ("CA"):**

The BLM or BIA has approved the operator for all wells listed within a CA on: N/A

10. **Underground Injection Control ("UIC")** The Division has approved UIC Form 5, **Transfer of Authority to Inject**, for the enhanced/secondary recovery unit/project for the water disposal well(s) listed on: N/A

**DATA ENTRY:**

1. Changes entered in the Oil and Gas Database on: 03/18/2003
2. Changes have been entered on the Monthly Operator Change Spread Sheet on: 03/18/2003
3. Bond information entered in RBDMS on: N/A
4. Fee wells attached to bond in RBDMS on: N/A

**STATE WELL(S) BOND VERIFICATION:**

1. State well(s) covered by Bond Number: RLB 0005236

**FEDERAL WELL(S) BOND VERIFICATION:**

1. Federal well(s) covered by Bond Number: 158626364

**INDIAN WELL(S) BOND VERIFICATION:**

1. Indian well(s) covered by Bond Number: RLB 0005239

**FEE WELL(S) BOND VERIFICATION:**

1. (R649-3-1) The **NEW** operator of any fee well(s) listed covered by Bond Number RLB 0005238

2. The **FORMER** operator has requested a release of liability from their bond on: N/A  
The Division sent response by letter on: N/A

**LEASE INTEREST OWNER NOTIFICATION:**

3. (R649-2-10) The **FORMER** operator of the fee wells has been contacted and informed by a letter from the Division of their responsibility to notify all interest owners of this change on: N/A

**COMMENTS:**

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UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0135  
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
 WESTPORT OIL & GAS COMPANY, L.P.

3a. Address  
 P.O. BOX 1148 VERNAL, UT 84078

3b. Phone No. (include area code)  
 (435) 781-

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
 Multiple Wells - see attached

9S 21E 3A 4304730869

5. Lease Serial No.  
 Multiple Wells - see attached

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
 891008900A

8. Well Name and No.  
 Multiple Wells - see attached

9. API Well No.  
 Multiple Wells - see attached

10. Field and Pool, or Exploratory Area  
 Natural Buttes Unit

11. County or Parish, State  
 Uintah County, UT

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

| TYPE OF SUBMISSION                                   | TYPE OF ACTION                                |   |  |
|--|---|---|--|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) |
| <input type="checkbox"/> Subsequent Report           | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               |
| <input type="checkbox"/> Final Abandonment Notice    | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                |
|  | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       |
|  | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            |
|  |   |   | <input type="checkbox"/> Water Shut-Off            |
|  |   |   | <input type="checkbox"/> Well Integrity            |
|  |   |   | <input type="checkbox"/> Other                     |

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

Westport Oil & Gas requests a variance to Onshore Order No. 4, Part IIIC.a. requiring each sales tank be equipped with a pressure-vacuum thief hatch and/or vent line valve. The variance is requested as an economic analysis shows the value of the shrunk condensate will not payout the incremental cost of purchasing and maintaining the valve resulting in a loss of value over the producing life of the well.

The volume lost to shrinkage by dropping the tank pressure from 6 ozs. to 0 psig is shown to be 0.3% of the tank volume. This was determined by lab analysis of a representative sample from the field. The sample shrunk from 98.82% of original volume to 98.52% when the pressure was dropped. The average NBU well produces approximately 6 bbls condensate per month. The resulting shrinkage would amount to 0.56 bbls per month lost volume due to shrinkage. The value of the shrunk and lost condensate does not recoup or payout the cost of installing and maintaining the valves and other devices that hold the positive tank pressure. An economic run based on the loss and costs is attached. Westport Oil & gas requests approval of this variance in order to increase the value of the well to the operator and the mineral royalty owners.

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

Name (Printed/Typed) J.T. Conley Title Operations Manager  
 Signature *J.T. Conley* Date 9-2-2003  
 Initials *JTC* Date 9-2-2003

SEP 10 2003  
DIV OF OIL GAS & MINING

THIS SPACE FOR FEDERAL OR STATE USE

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 Accepted by the Utah Division of Oil, Gas and Mining  
 Federal Approval of This Action is Necessary  
 Office \_\_\_\_\_ Date: 9/16/03

Title 18 U.S.C. Section 1001, make 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.

**Westport Oil & Gas, L.P.**

**Project Economics Worksheet**

**Instructions:**

Fill in blue boxed areas with before and after project data. The evaluation results are shown below and graphed automatically at the bottom of the page. This sheet is protected to prevent accidental alteration of the formulas. See JTC for changes. OPX entered as annual costs and/or as unit OPX costs for \$/BF and \$/MCF

Project Name:

**Condensate Shrinkage Economics**

Is this job a well pull or production rig job ???  N (Y or N)

|                         | BEFORE<br>\$/Year | AFTER<br>\$/Year | DIFFERENCE<br>\$/Year |
|-------------------------|-------------------|------------------|-----------------------|
| Gross Oil Revenue       | \$1,088           | \$1,099          | \$11                  |
| Gross Gas Revenue       | \$0               | \$0              | \$0                   |
| NGL Revenue             | \$0               | \$0              | \$0                   |
| PULING UNIT SERVICE     |                   |                  | \$0                   |
| WIRELINE SERVICE        |                   |                  | \$0                   |
| SUBSURF EQUIP REPAIRS   |                   |                  | \$0                   |
| COMPANY LABOR           |                   |                  | \$0                   |
| CONTRACT LABOR          | \$0               | \$200            | \$200                 |
| CONTR SERVICE           |                   |                  | \$0                   |
| LEASE FUEL GAS          | \$0               | \$0              | \$0                   |
| UTILITIES - ELECTRICITY | \$0               | \$0              | \$0                   |
| CHEMICAL TREATING       |                   |                  | \$0                   |
| MATERIAL & SUPPLY       | \$0               | \$150            | \$150                 |
| WATER & HAULING         |                   |                  | \$0                   |
| ADMINISTRATIVE COSTS    |                   |                  | \$0                   |
| GAS PLANT PROCESSING    |                   |                  | \$0                   |
| <b>Totals</b>           | <b>\$0</b>        | <b>\$350</b>     | <b>\$350</b>          |

Increased OPX Per Year

**Investment Breakdown:**

|                 | Cap/Exp<br>Code | Cost, \$       |
|-----------------|-----------------|----------------|
| Capital \$      | 820/830/840     | \$1,200        |
| Expense \$      | 830/840         | \$0            |
| <b>Total \$</b> |                 | <b>\$1,200</b> |

|               |          |              |
|---------------|----------|--------------|
| Oil Price     | \$ 23.00 | \$/BO        |
| Gas Price     | \$ 3.10  | \$/MCF       |
| Electric Cost | \$ -     | \$/ HP / day |
| OPX/BF        | \$ 2.00  | \$/BF        |
| OPX/MCF       | \$ 0.82  | \$/MCF       |

**Production & OPX Detail:**

|                 | Before |       | After |       | Difference |       |
|-----------------|--------|-------|-------|-------|------------|-------|
| Oil Production  | 0.192  | BOPD  | 0.194 | BOPD  | 0.002      | BOPD  |
| Gas Production  | 0      | MCFPD | 0     | MCFPD | 0          | MCFPD |
| Wtr Production  | 0      | BWPD  | 0     | BWPD  | 0          | BWPD  |
| Horse Power     |        | HP    |       | HP    | 0          | HP    |
| Fuel Gas Burned |        | MCFPD |       | MCFPD | 0          | MCFPD |

**Project Life:**

Life =  Years  
(Life no longer than 20 years)

**Internal Rate of Return:**

After Tax IROR =

**AT Cum Cashflow:**

Operating Cashflow =  (Discounted @ 10%)

**Payout Calculation:**

Payout =  $\frac{\text{Total Investment}}{\text{Sum(OPX + Incremental Revenue)}} = 1$

Payout occurs when total AT cashflow equals investment  
See graph below, note years when cashflow reaches zero

Payout =  Years or  Days

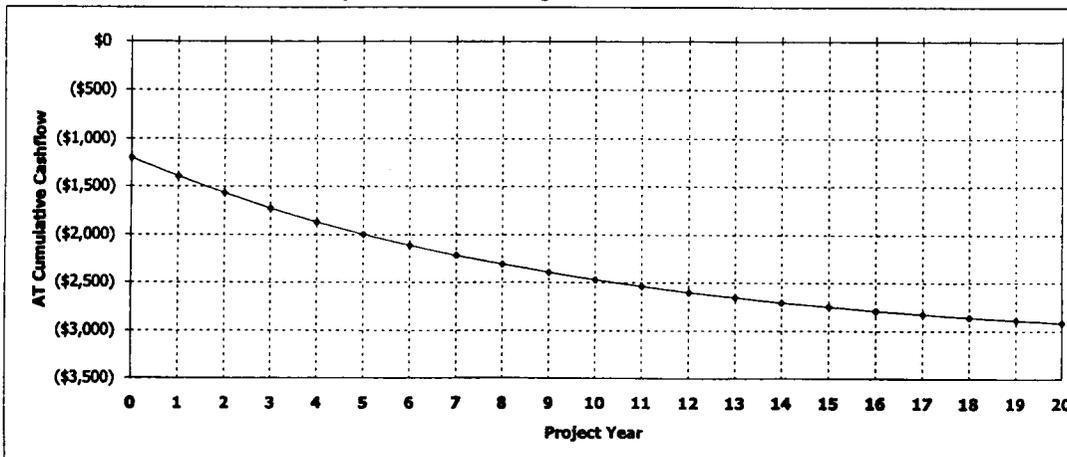
**Gross Reserves:**

Oil Reserves = 6 BO  
Gas Reserves = 0 MCF  
Gas Equiv Reserves = 38 MCFE

**Notes/Assumptions:**

An average NBU well produces 0.192 Bcpd with no tank pressure. The production is increased to 0.196 Bcpd if 4 ozs of pressure are placed on the tank. The increased production does not payout the valve cost or the estimated annual maintenance costs.

Project: Condensate Shrinkage Economics



**Westport Oil and Gas, Inc.**

**NBU/Ouray Field**

RFL 2003-022

**COMPARISON OF FLASH BACK PRESSURES**

Calculated by Characterized Equation-of-State

| Flash Conditions |    | Gas/Oil Ratio<br>( scf/STbbl )<br>(A) | Specific Gravity of<br>Flashed Gas<br>( Air=1.000 ) | Separator<br>Volume<br>Factor<br>(B) | Separator<br>Volume<br>Percent<br>(C) |
|------------------|----|---------------------------------------|---|--------------------------------------|---------------------------------------|
| psig             | °F |                                       |   |                                      |                                       |

**Calculated at Laboratory Flash Conditions**

|    |     |      |       |       |         |
|----|-----|------|-------|-------|---------|
| 80 | 70  |      |       | 1.019 |         |
| 0  | 122 | 30.4 | 0.993 | 1.033 | 101.37% |
| 0  | 60  | 0.0  | —     | 1.000 | 98.14%  |

**Calculated Flash with Backpressure using Tuned EOS**

|        |    |      |       |       |        |
|--------|----|------|-------|-------|--------|
| 80     | 70 |      |       | 1.015 |        |
| 6.0 oz | 65 | 24.6 | 0.777 | 1.003 | 98.82% |
| 0      | 60 | 0.0  | —     | 1.000 | 98.52% |
| 80     | 70 |      |       | 1.015 |        |
| 4.0 oz | 65 | 24.7 | 0.778 | 1.003 | 98.82% |
| 0      | 60 | 0.0  | —     | 1.000 | 98.52% |
| 80     | 70 |      |       | 1.015 |        |
| 2.0 oz | 65 | 24.7 | 0.779 | 1.003 | 98.82% |
| 0      | 60 | 0.0  | —     | 1.000 | 98.52% |
| 80     | 70 |      |       | 1.015 |        |
| 0      | 65 | 24.8 | 0.780 | 1.003 | 98.82% |
| 0      | 60 | 0.0  | —     | 1.000 | 98.52% |

(A) Cubic Feet of gas at 14.696 psia and 60 °F per Barrel of Stock Tank Oil at 60 °F.

(B) Barrels of oil at indicated pressure and temperature per Barrel of Stock Tank Oil at 60 °F.

(C) Oil volume at indicated pressure and temperature as a percentage of original saturated oil volume.

Note: Bubblepoint of sample in original sample container was 80 psig at 70° F with 1 cc water

## ALL WELLS ROCKY MOUNTIAN GAS-NBU ENARDO VARIANCE

| WELL       | LEGALS        | STFLEASENO | CANUMBER   | APINO            |
|------------|---------------|------------|------------|------------------|
| CIGE 003   | 32-9-22 SENE  | ML22649    | 891008900A | 430473032000S1 ✓ |
| CIGE 004   | 9-10-21 NESE  | UTU01416   | 891008900A | 430473033400S1   |
| CIGE 005   | 31-9-22 NWSE  | U01207A    | 891008900A | 430473033500S1 ✓ |
| CIGE 006   | 19-9-21 SWSE  | U0581      | 891008900A | 430473035600S1   |
| CIGE 007   | 8-10-21 NENW  | UTU01791   | 891008900A | 430473035800S1   |
| CIGE 008   | 35-9-22 SWSE  | UTU010954A | 891008900A | 430473042700S1   |
| CIGE 009   | 36-9-22 NWSE  | ML22650    | 891008900A | 430473041900S1 ✓ |
| CIGE 010   | 2-10-22 NWSE  | ML22651    | 891008900A | 430473042500S1   |
| CIGE 011   | 14-9-20 SWSE  | UTU0577A   | 891008900A | 430473042400S1   |
| CIGE 011GR | 14-9-20 SWSE  | UTU0577A   | 891008900A | 430473042400S1   |
| CIGE 013   | 7-10-21 NESE  | UTU02270A  | 891008900A | 430473042000S1   |
| CIGE 014   | 9-10-22 NESW  | UTU01196B  | 891008900A | 430473048400S1   |
| CIGE 018   | 2-10-21 NWNE  | ML22652    | 891008900A | 430473047100S1 ✓ |
| CIGE 019   | 16-9-21 SWSW  | ML3141A    | 891008900A | 430473045900S1   |
| CIGE 020   | 20-10-21 SESW | UTU02278   | 891008900A | 430473048500S1   |
| CIGE 022   | 15-9-20 SENW  | UTU0144868 | 891008900A | 430473049700S1   |
| CIGE 023   | 7-10-22 SESE  | ML23609    | 891008900A | 430473033300S1 ✓ |
| CIGE 024   | 29-9-22 SESW  | U01207     | 891008900A | 430473049300S1   |
| CIGE 025   | 34-9-22 SENW  | UTU0149077 | 891008900A | 430473073700S1   |
| CIGE 027   | 33-9-22 NENW  | UTU01191A  | 891008900A | 430473073800S1   |
| CIGE 028   | 35-9-21 NESE  | ML22582    | 891008900A | 430473073900S1 ✓ |
| CIGE 030   | 6-10-21 NENW  | UTU01791   | 891008900A | 430473049800S1   |
| CIGE 031   | 1-10-22 SWNW  | U011336    | 891008900A | 430473051100S1   |
| CIGE 032A  | 20-9-20 NESW  | UTU01567A  | 891008900A | 430473049600S1   |
| CIGE 034   | 13-10-20 SWNE | UTU02270A  | 891008900A | 430473050800S1   |
| CIGE 035   | 1-10-20 NESW  | UTU02270A  | 891008900A | 430473049400S1   |
| CIGE 036D  | 32-9-22 NWNW  | ML22649    | 891008900A | 430473083300S1 ✓ |
| CIGE 037D  | 21-9-21 SWSE  | UTU0576    | 891008900A | 430473091000S1   |
| CIGE 038D  | 4-10-21 SWSE  | U01416     | 891008900A | 430473049500S1   |
| CIGE 040   | 3-10-21 NESW  | UTU0149078 | 891008900A | 430473074000S1   |
| CIGE 042   | 25-9-21 SWSE  | U04139     | 891008900A | 430473049200S1 ✓ |
| CIGE 043   | 14-10-22 SENW | U01197A    | 891008900A | 430473049100S1 ✓ |
| CIGE 044   | 9-9-21 SESE   | UTU01188   | 891008900A | 430473052700S1   |
| CIGE 045   | 15-9-21 NESE  | UTU01193   | 891008900A | 430473052800S1   |
| CIGE 046   | 21-9-21 NENE  | UTU0576    | 891008900A | 430473052900S1   |
| CIGE 047   | 14-10-21 NWSE | UTU01393C  | 891008900A | 430473051000S1   |
| CIGE 048   | 15-10-21 SWNE | UTU01416A  | 891008900A | 430473050600S1   |
| CIGE 051D  | 31-9-22 NENE  | U01191     | 891008900A | 430473088900S1 ✓ |
| CIGE 052   | 5-10-22 SENW  | UTU01195   | 891008900A | 430473053100S1   |
| CIGE 053   | 6-10-22 NESW  | UTU01195   | 891008900A | 430473053300S1   |
| CIGE 054D  | 35-9-21 NENE  | ML22582    | 891008900A | 430473085100S1 ✓ |
| CIGE 055   | 1-10-21 SENW  | ML23612    | 891008900A | 430473051200S1 ✓ |
| CIGE 056   | 34-9-21 SWSE  | U01194A    | 891008900A | 430473053000S1 ✓ |
| CIGE 057   | 10-10-21 NENE | UTU0149079 | 891008900A | 430473054300S1   |
| CIGE 058   | 16-10-21 SESE | ML10755    | 891008900A | 430473053200S1   |
| CIGE 060   | 14-9-21 SENW  | UTU01193   | 891008900A | 430473054900S1   |
| CIGE 061   | 13-9-21 SENW  | U01193     | 891008900A | 430473055000S1   |
| CIGE 062D  | 36-9-22 NWSW  | ML22650    | 891008900A | 430473088500S1 ✓ |
| CIGE 063D  | 29-9-22 NWNW  | UTU462     | 891008900A | 430473094900S1   |
| CIGE 064D  | 33-9-22 SWSW  | UTU01191A  | 891008900A | 430473095000S1   |
| CIGE 066   | 23-10-21 SENW | UTU02278A  | 891008900A | 430473054200S1   |
| CIGE 067A  | 2-10-22 NENE  | ML22651    | 891008900A | 430473093800S1   |
| CIGE 068D  | 35-9-22 NWSW  | UTU010954A | 891008900A | 430473095100S1   |
| CIGE 069   | 19-10-21 SENW | ML22792    | 891008900A | 430473063500S1   |
| CIGE 070   | 20-9-21 NESE  | UTU0575    | 891008900A | 430473063600S1   |
| CIGE 071   | 7-9-21 NESE   | UTU0575B   | 891008900A | 430473063700S1   |
| CIGE 072   | 18-9-21 SWNE  | UTU0575    | 891008900A | 430473063400S1   |
| CIGE 073D  | 5-10-22 SWSW  | UTU01191A  | 891008900A | 430473095200S1   |
| CIGE 074D  | 6-10-22 NWSE  | UTU01195   | 891008900A | 430473095300S1   |
| CIGE 075D  | 8-10-21 SENE  | UTU01791   | 891008900A | 430473095400S1   |
| CIGE 076D  | 9-10-21 NENE  | UTU01416   | 891008900A | 430473095500S1   |
| CIGE 077D  | 10-10-21 SESE | UTU0149079 | 891008900A | 430473095600S1   |
| CIGE 078C  | 16-9-21 NENW  | UTU38409   | 891008900A | 430473087000S1   |
| CIGE 079D  | 1-10-21 NENE  | ML23612    | 891008900A | 430473089600S1 ✓ |
| CIGE 080D  | 2-10-21 NWNW  | ML22652    | 891008900A | 430473085300S1 ✓ |
| CIGE 081D  | 4-10-21 NENE  | ML22940    | 891008900A | 430473085400S1   |
| CIGE 086D  | 16-9-21 SWSE  | ML3282     | 891008900A | 430473088600S1   |
| CIGE 087D  | 34-9-21 NENE  | U01194A    | 891008900A | 430473086900S1 ✓ |
| CIGE 088D  | 15-10-21 NWNW | UTU01791A  | 891008900A | 430473095800S1   |
| CIGE 089D  | 34-9-22 SENE  | UTU0149077 | 891008900A | 430473114600S1   |
| CIGE 090D  | 9-9-21 NWNE   | UTU01188A  | 891008900A | 430473114900S1   |
| CIGE 091D  | 15-9-21 NWNE  | UTU01188   | 891008900A | 430473115100S1   |

Division of Oil, Gas and Mining  
**OPERATOR CHANGE WORKSHEET**

|                |
|----------------|
| <b>ROUTING</b> |
| 1. DJJ         |
| 2. CDW         |

**X Change of Operator (Well Sold)**

Operator Name Change/Merger

The operator of the well(s) listed below has changed, effective: **1/6/2006**

|   |  |
|---|--|
| <b>FROM:</b> (Old Operator):<br>N2115-Westport Oil & Gas Co., LP<br>1368 South 1200 East<br>Vernal, UT 84078<br>Phone: 1-(435) 781-7024 | <b>TO:</b> ( New Operator):<br>N2995-Kerr-McGee Oil & Gas Onshore, LP<br>1368 South 1200 East<br>Vernal, UT 84078<br>Phone: 1-(435) 781-7024 |
|---|--|

| WELL NAME | CA No. | Unit: | NATURAL BUTTES UNIT |        |           |            |           |             |
|-----------|--------|-------|---------------------|--------|-----------|------------|-----------|-------------|
|           | SEC    | TWN   | RNG                 | API NO | ENTITY NO | LEASE TYPE | WELL TYPE | WELL STATUS |

**OPERATOR CHANGES DOCUMENTATION**

Enter date after each listed item is completed

- (R649-8-10) Sundry or legal documentation was received from the **FORMER** operator on: 5/10/2006
- (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 5/10/2006
- The new company was checked on the **Department of Commerce, Division of Corporations Database** on: 3/7/2006
- 4a. Is the new operator registered in the State of Utah: YES Business Number: 1355743-0181
- 4b. If **NO**, the operator was contacted on: \_\_\_\_\_
- 5a. (R649-9-2)Waste Management Plan has been received on: IN PLACE
- 5b. Inspections of LA PA state/fee well sites complete on: n/a 3 LA wells & all PA wells transferred
- 5c. Reports current for Production/Disposition & Sundries on: ok

6. **Federal and Indian Lease Wells:** The BLM and or the BIA has approved the merger, name change, or operator change for all wells listed on Federal or Indian leases on: BLM 3/27/2006 BIA not yet

7. **Federal and Indian Units:**  
The BLM or BIA has approved the successor of unit operator for wells listed on: 3/27/2006

8. **Federal and Indian Communization Agreements ("CA"):**  
The BLM or BIA has approved the operator for all wells listed within a CA on: n/a

9. **Underground Injection Control ("UIC")** The Division has approved UIC Form 5, **Transfer of Authority to Inject**, for the enhanced/secondary recovery unit/project for the water disposal well(s) listed on: \_\_\_\_\_

**DATA ENTRY:**

- Changes entered in the **Oil and Gas Database** on: 5/15/2006
- Changes have been entered on the **Monthly Operator Change Spread Sheet** on: 5/15/2006
- Bond information entered in RBDMS on: 5/15/2006
- Fee/State wells attached to bond in RBDMS on: 5/16/2006
- Injection Projects to new operator in RBDMS on: \_\_\_\_\_
- Receipt of Acceptance of Drilling Procedures for APD/New on: n/a Name Change Only

**BOND VERIFICATION:**

- Federal well(s) covered by Bond Number: CO1203
- Indian well(s) covered by Bond Number: RLB0005239
- (R649-3-1) The **NEW** operator of any fee well(s) listed covered by Bond Number RLB0005236
- a. The **FORMER** operator has requested a release of liability from their bond on: n/a rider added KMG  
The Division sent response by letter on: \_\_\_\_\_

**LEASE INTEREST OWNER NOTIFICATION:**

- (R649-2-10) The **FORMER** operator of the fee wells has been contacted and informed by a letter from the Division of their responsibility to notify all interest owners of this change on: 5/16/2006

**COMMENTS:**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0135  
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
**KERR-McGEE OIL & GAS ONSHORE LP**

3a. Address  
**1368 SOUTH 1200 EAST VERNAL, UT 84078**

3b. Phone No. (include area code)  
**(435) 781-7024**

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

5. Lease Serial No.  
**MULTIPLE LEASES**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
**MUTIPLE WELLS**

9. API Well No.

10. Field and Pool, or Exploratory Area

11. County or Parish, State  
**UINTAH COUNTY, UTAH**

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

| TYPE OF SUBMISSION                                    | TYPE OF ACTION                                |   |   |
|---|---|---|---|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume)                  |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation                                |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                                 |
|   | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon                        |
|   | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal                             |
|   |   |   | <input type="checkbox"/> Water Shut-Off                             |
|   |   |   | <input type="checkbox"/> Well Integrity                             |
|   |   |   | <input checked="" type="checkbox"/> Other <b>CHANGE OF OPERATOR</b> |

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

PLEASE BE ADVISED THAT KERR-McGEE OIL & GAS ONSHORE LP, IS CONSIDERED TO BE THE OPERATOR OF THE ATTACHED WELL LOCATIONS. EFFECTIVE JANUARY 6, 2006. KERR-McGEE OIL & GAS ONSHORE LP, IS RESPONSIBLE UNDER TERMS AND CONDITIONS OF THE LEASE(S) FOR THE OPERATIONS CONDUCTED UPON LEASE LANDS. BOND COVERAGE IS PROVIDED BY STATE OF UTAH NATIONWIDE BOND NO. RLB0005237.

RECEIVED  
MAY 10 2006

BLM BOND = C01203  
BIA BOND = RLB0005239

APPROVED 5116106

*Earlene Russell*  
Division of Oil, Gas and Mining  
Earlene Russell, Engineering Technician

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

|  |                                  |
|--|----------------------------------|
| Name (Printed/Typed)<br><b>RANDY BAYNE</b> | Title<br><b>DRILLING MANAGER</b> |
| Signature<br><i>Randy Bayne</i>            | Date<br><b>May 9, 2006</b>       |

THIS SPACE FOR FEDERAL OR STATE USE

|   |        |      |
|---|--------|------|
| Approved by   | Title  | Date |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. | Office |      |

Title 18 U.S.C. Section 1001, make 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  
OMB No. 1004-0135  
Expires November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**

*Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

5. Lease Serial No.

**MULTIPLE LEASES**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well

Oil Well  Gas Well  Other

2. Name of Operator

**WESTPORT OIL & GAS COMPANY L.P.**

3a. Address

**1368 SOUTH 1200 EAST VERNAL, UT 84078**

3b. Phone No. (include area code)

**(435) 781-7024**

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

**SEE ATTACHED**

8. Well Name and No.

**MUTIPLE WELLS**

9. API Well No.

10. Field and Pool, or Exploratory Area

11. County or Parish, State

**UINTAH COUNTY, UTAH**

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

| TYPE OF SUBMISSION                                    | TYPE OF ACTION                                |   |  |  |
|---|---|---|--|--|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off                      |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity                      |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input checked="" type="checkbox"/> Other CHANGE OF OPERATOR |
|   | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       |  |
|   | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            |  |

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

EFFECTIVE JANUARY 6, 2006, WESTPORT OIL & GAS COMPANY L.P., HAS RELINQUISHED THE OPERATORSHIP OF THE ATTACHED WELL LOCATIONS TO KERR-McGEE OIL & GAS ONSHORE LP.

**APPROVED** 5/16/06  
*Earlene Russell*  
Division of Oil, Gas and Mining  
Earlene Russell, Engineering Technician

RECEIVED  
MAY 10 2006

DIV. OF OIL, GAS & MINING

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

Name (Printed/Typed)

**BRAD LANEY**

Title

**ENGINEERING SPECIALIST**

Signature

Date

**May 9, 2006**

**THIS SPACE FOR FEDERAL OR STATE USE**

Approved by

*Brad Laney*

Title

Date

**5-9-06**

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, make 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.

|  |   |
|--|---|
| <b>STATE OF UTAH</b><br>DEPARTMENT OF NATURAL RESOURCES<br>DIVISION OF OIL, GAS, AND MINING  | <b>FORM 9</b><br><br><b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b><br>U-01194AST                                   |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><br>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. | <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b><br><br><b>7. UNIT or CA AGREEMENT NAME:</b><br>NATURAL BUTTES          |
| <b>1. TYPE OF WELL</b><br>Gas Well   | <b>8. WELL NAME and NUMBER:</b><br>CIGE 87D   |
| <b>2. NAME OF OPERATOR:</b><br>KERR-MCGEE OIL & GAS ONSHORE, L.P.  | <b>9. API NUMBER:</b><br>43047308690000   |
| <b>3. ADDRESS OF OPERATOR:</b><br>P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779  | <b>PHONE NUMBER:</b><br>720 929-6007 Ext  |
| <b>4. LOCATION OF WELL</b><br><b>FOOTAGES AT SURFACE:</b><br>0967 FNL 0422 FEL<br><b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b><br>Qtr/Qtr: NENE Section: 34 Township: 09.0S Range: 21.0E Meridian: S  | <b>9. FIELD and POOL or WILDCAT:</b><br>NATURAL BUTTES<br><br><b>COUNTY:</b><br>UINTAH<br><br><b>STATE:</b><br>UTAH |

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

| TYPE OF SUBMISSION   | TYPE OF ACTION  |   |   |
|--|---|---|---|
| <input checked="" type="checkbox"/> <b>NOTICE OF INTENT</b><br>Approximate date work will start:<br>3/5/2010 | <input type="checkbox"/> ACIDIZE                              | <input type="checkbox"/> ALTER CASING                   | <input type="checkbox"/> CASING REPAIR                  |
| <input type="checkbox"/> <b>SUBSEQUENT REPORT</b><br>Date of Work Completion:                                | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS             | <input type="checkbox"/> CHANGE TUBING                  | <input type="checkbox"/> CHANGE WELL NAME               |
| <input type="checkbox"/> <b>SPUD REPORT</b><br>Date of Spud:   | <input checked="" type="checkbox"/> <b>CHANGE WELL STATUS</b> | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE              |
| <input type="checkbox"/> <b>DRILLING REPORT</b><br>Report Date:  | <input type="checkbox"/> DEEPEN                               | <input type="checkbox"/> FRACTURE TREAT                 | <input type="checkbox"/> NEW CONSTRUCTION               |
|  | <input type="checkbox"/> OPERATOR CHANGE                      | <input type="checkbox"/> PLUG AND ABANDON               | <input type="checkbox"/> PLUG BACK                      |
|  | <input type="checkbox"/> PRODUCTION START OR RESUME           | <input type="checkbox"/> RECLAMATION OF WELL SITE       | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION |
|  | <input type="checkbox"/> REPERFORATE CURRENT FORMATION        | <input type="checkbox"/> SIDETRACK TO REPAIR WELL       | <input type="checkbox"/> TEMPORARY ABANDON              |
|  | <input type="checkbox"/> TUBING REPAIR                        | <input type="checkbox"/> VENT OR FLARE                  | <input type="checkbox"/> WATER DISPOSAL                 |
|  | <input type="checkbox"/> WATER SHUTOFF                        | <input type="checkbox"/> SI TA STATUS EXTENSION         | <input type="checkbox"/> APD EXTENSION                  |
|  | <input type="checkbox"/> WILDCAT WELL DETERMINATION           | <input type="checkbox"/> OTHER                          | OTHER: _____  |

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

The operator requests authorization to shut-in the subject well due to operational issues. The subject well location last produced on 2/6/2010. The operator is currently working on getting the subject well location back on sales. We will shut-in the subject well on 3/5/2010.

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

**Date:** March 08, 2010

**By:** *Derek Quist*

|  |                                     |                                    |
|--|-------------------------------------|------------------------------------|
| <b>NAME (PLEASE PRINT)</b><br>Andy Lytle | <b>PHONE NUMBER</b><br>720 929-6100 | <b>TITLE</b><br>Regulatory Analyst |
| <b>SIGNATURE</b><br>N/A                  |                                     | <b>DATE</b><br>3/5/2010            |

|  |   |
|--|---|
| <b>STATE OF UTAH</b><br>DEPARTMENT OF NATURAL RESOURCES<br>DIVISION OF OIL, GAS, AND MINING  | <b>FORM 9</b><br><br><b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b><br>U-01194AST                                   |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><br>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. | <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b><br><br><b>7. UNIT or CA AGREEMENT NAME:</b><br>NATURAL BUTTES          |
| <b>1. TYPE OF WELL</b><br>Gas Well   | <b>8. WELL NAME and NUMBER:</b><br>CIGE 87D   |
| <b>2. NAME OF OPERATOR:</b><br>KERR-MCGEE OIL & GAS ONSHORE, L.P.  | <b>9. API NUMBER:</b><br>43047308690000   |
| <b>3. ADDRESS OF OPERATOR:</b><br>P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779  | <b>PHONE NUMBER:</b><br>720 929-6007 Ext  |
| <b>4. LOCATION OF WELL</b><br><b>FOOTAGES AT SURFACE:</b><br>0967 FNL 0422 FEL<br><b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b><br>Qtr/Qtr: NENE Section: 34 Township: 09.0S Range: 21.0E Meridian: S  | <b>9. FIELD and POOL or WILDCAT:</b><br>NATURAL BUTTES<br><br><b>COUNTY:</b><br>UINTAH<br><br><b>STATE:</b><br>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<br>Approximate date work will start:                 | <input type="checkbox"/> ACIDIZE                               | <input type="checkbox"/> ALTER CASING                   | <input type="checkbox"/> CASING REPAIR                  |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT<br>Date of Work Completion:<br>4/23/2010 | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS              | <input type="checkbox"/> CHANGE TUBING                  | <input type="checkbox"/> CHANGE WELL NAME               |
| <input type="checkbox"/> SPUD REPORT<br>Date of Spud:  | <input type="checkbox"/> CHANGE WELL STATUS                    | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE              |
| <input type="checkbox"/> DRILLING REPORT<br>Report Date:                                       | <input type="checkbox"/> DEEPEN                                | <input type="checkbox"/> FRACTURE TREAT                 | <input type="checkbox"/> NEW CONSTRUCTION               |
|  | <input type="checkbox"/> OPERATOR CHANGE                       | <input type="checkbox"/> PLUG AND ABANDON               | <input type="checkbox"/> PLUG BACK                      |
|  | <input checked="" type="checkbox"/> PRODUCTION START OR RESUME | <input type="checkbox"/> RECLAMATION OF WELL SITE       | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION |
|  | <input type="checkbox"/> REPERFORATE CURRENT FORMATION         | <input type="checkbox"/> SIDETRACK TO REPAIR WELL       | <input type="checkbox"/> TEMPORARY ABANDON              |
|  | <input type="checkbox"/> TUBING REPAIR                         | <input type="checkbox"/> VENT OR FLARE                  | <input type="checkbox"/> WATER DISPOSAL                 |
|  | <input type="checkbox"/> WATER SHUTOFF                         | <input type="checkbox"/> SI TA STATUS EXTENSION         | <input type="checkbox"/> APD EXTENSION                  |
|  | <input type="checkbox"/> WILDCAT WELL DETERMINATION            | <input type="checkbox"/> OTHER                          | OTHER: _____  |

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

THIS WELL RETURNED TO PRODUCTION ON 4/23/2010.

**Accepted by the**  
**Utah Division of**  
**Oil, Gas and Mining**  
**FOR RECORD ONLY**  
 May 03, 2010

|  |                                     |                                    |
|--|-------------------------------------|------------------------------------|
| <b>NAME (PLEASE PRINT)</b><br>Andy Lytle | <b>PHONE NUMBER</b><br>720 929-6100 | <b>TITLE</b><br>Regulatory Analyst |
| <b>SIGNATURE</b><br>N/A                  |                                     | <b>DATE</b><br>5/3/2010            |

|  |   |
|--|---|
| <b>STATE OF UTAH</b><br>DEPARTMENT OF NATURAL RESOURCES<br>DIVISION OF OIL, GAS, AND MINING  | <b>FORM 9</b><br><br><b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b><br>U-01194AST                                   |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><br>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. | <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b><br><br><b>7. UNIT or CA AGREEMENT NAME:</b><br>NATURAL BUTTES          |
| <b>1. TYPE OF WELL</b><br>Gas Well   | <b>8. WELL NAME and NUMBER:</b><br>CIGE 87D   |
| <b>2. NAME OF OPERATOR:</b><br>KERR-MCGEE OIL & GAS ONSHORE, L.P.  | <b>9. API NUMBER:</b><br>43047308690000   |
| <b>3. ADDRESS OF OPERATOR:</b><br>P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779  | <b>PHONE NUMBER:</b><br>720 929-6007 Ext  |
| <b>4. LOCATION OF WELL</b><br><b>FOOTAGES AT SURFACE:</b><br>0967 FNL 0422 FEL<br><b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b><br>Qtr/Qtr: NENE Section: 34 Township: 09.0S Range: 21.0E Meridian: S  | <b>9. FIELD and POOL or WILDCAT:</b><br>NATURAL BUTTES<br><br><b>COUNTY:</b><br>UINTAH<br><br><b>STATE:</b><br>UTAH |

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

| TYPE OF SUBMISSION   | TYPE OF ACTION  |   |   |
|--|---|---|---|
| <input checked="" type="checkbox"/> <b>NOTICE OF INTENT</b><br>Approximate date work will start:<br>3/5/2010 | <input type="checkbox"/> ACIDIZE                              | <input type="checkbox"/> ALTER CASING                   | <input type="checkbox"/> CASING REPAIR                  |
| <input type="checkbox"/> <b>SUBSEQUENT REPORT</b><br>Date of Work Completion:                                | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS             | <input type="checkbox"/> CHANGE TUBING                  | <input type="checkbox"/> CHANGE WELL NAME               |
| <input type="checkbox"/> <b>SPUD REPORT</b><br>Date of Spud:   | <input checked="" type="checkbox"/> <b>CHANGE WELL STATUS</b> | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE              |
| <input type="checkbox"/> <b>DRILLING REPORT</b><br>Report Date:  | <input type="checkbox"/> DEEPEN                               | <input type="checkbox"/> FRACTURE TREAT                 | <input type="checkbox"/> NEW CONSTRUCTION               |
|  | <input type="checkbox"/> OPERATOR CHANGE                      | <input type="checkbox"/> PLUG AND ABANDON               | <input type="checkbox"/> PLUG BACK                      |
|  | <input type="checkbox"/> PRODUCTION START OR RESUME           | <input type="checkbox"/> RECLAMATION OF WELL SITE       | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION |
|  | <input type="checkbox"/> REPERFORATE CURRENT FORMATION        | <input type="checkbox"/> SIDETRACK TO REPAIR WELL       | <input type="checkbox"/> TEMPORARY ABANDON              |
|  | <input type="checkbox"/> TUBING REPAIR                        | <input type="checkbox"/> VENT OR FLARE                  | <input type="checkbox"/> WATER DISPOSAL                 |
|  | <input type="checkbox"/> WATER SHUTOFF                        | <input type="checkbox"/> SI TA STATUS EXTENSION         | <input type="checkbox"/> APD EXTENSION                  |
|  | <input type="checkbox"/> WILDCAT WELL DETERMINATION           | <input type="checkbox"/> OTHER                          | OTHER: _____  |

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

The operator requests authorization to shut-in the subject well due to operational issues. The subject well location last produced on 2/6/2010. The operator is currently working on getting the subject well location back on sales. We will shut-in the subject well on 3/5/2010.

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

Date: March 08, 2010

By: *Derek Quist*

|  |                                     |                                    |
|--|-------------------------------------|------------------------------------|
| <b>NAME (PLEASE PRINT)</b><br>Andy Lytle | <b>PHONE NUMBER</b><br>720 929-6100 | <b>TITLE</b><br>Regulatory Analyst |
| <b>SIGNATURE</b><br>N/A                  |                                     | <b>DATE</b><br>3/5/2010            |

|  |   |
|--|---|
| <b>STATE OF UTAH</b><br>DEPARTMENT OF NATURAL RESOURCES<br>DIVISION OF OIL, GAS, AND MINING  | <b>FORM 9</b><br><br><b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b><br>U-01194AST                                   |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><br>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. | <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b><br><br><b>7. UNIT or CA AGREEMENT NAME:</b><br>NATURAL BUTTES          |
| <b>1. TYPE OF WELL</b><br>Gas Well   | <b>8. WELL NAME and NUMBER:</b><br>CIGE 87D   |
| <b>2. NAME OF OPERATOR:</b><br>KERR-MCGEE OIL & GAS ONSHORE, L.P.  | <b>9. API NUMBER:</b><br>43047308690000   |
| <b>3. ADDRESS OF OPERATOR:</b><br>P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779  | <b>PHONE NUMBER:</b><br>720 929-6007 Ext  |
| <b>4. LOCATION OF WELL</b><br><b>FOOTAGES AT SURFACE:</b><br>0967 FNL 0422 FEL<br><b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b><br>Qtr/Qtr: NENE Section: 34 Township: 09.0S Range: 21.0E Meridian: S  | <b>9. FIELD and POOL or WILDCAT:</b><br>NATURAL BUTTES<br><br><b>COUNTY:</b><br>UINTAH<br><br><b>STATE:</b><br>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<br>Approximate date work will start:                 | <input type="checkbox"/> ACIDIZE                               | <input type="checkbox"/> ALTER CASING                   | <input type="checkbox"/> CASING REPAIR                  |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT<br>Date of Work Completion:<br>4/23/2010 | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS              | <input type="checkbox"/> CHANGE TUBING                  | <input type="checkbox"/> CHANGE WELL NAME               |
| <input type="checkbox"/> SPUD REPORT<br>Date of Spud:  | <input type="checkbox"/> CHANGE WELL STATUS                    | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE              |
| <input type="checkbox"/> DRILLING REPORT<br>Report Date:                                       | <input type="checkbox"/> DEEPEN                                | <input type="checkbox"/> FRACTURE TREAT                 | <input type="checkbox"/> NEW CONSTRUCTION               |
|  | <input type="checkbox"/> OPERATOR CHANGE                       | <input type="checkbox"/> PLUG AND ABANDON               | <input type="checkbox"/> PLUG BACK                      |
|  | <input checked="" type="checkbox"/> PRODUCTION START OR RESUME | <input type="checkbox"/> RECLAMATION OF WELL SITE       | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION |
|  | <input type="checkbox"/> REPERFORATE CURRENT FORMATION         | <input type="checkbox"/> SIDETRACK TO REPAIR WELL       | <input type="checkbox"/> TEMPORARY ABANDON              |
|  | <input type="checkbox"/> TUBING REPAIR                         | <input type="checkbox"/> VENT OR FLARE                  | <input type="checkbox"/> WATER DISPOSAL                 |
|  | <input type="checkbox"/> WATER SHUTOFF                         | <input type="checkbox"/> SI TA STATUS EXTENSION         | <input type="checkbox"/> APD EXTENSION                  |
|  | <input type="checkbox"/> WILDCAT WELL DETERMINATION            | <input type="checkbox"/> OTHER                          | OTHER: _____  |

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

THIS WELL RETURNED TO PRODUCTION ON 4/23/2010.

**Accepted by the**  
**Utah Division of**  
**Oil, Gas and Mining**  
**FOR RECORD ONLY**  
 May 03, 2010

|  |                                     |                                    |
|--|-------------------------------------|------------------------------------|
| <b>NAME (PLEASE PRINT)</b><br>Andy Lytle | <b>PHONE NUMBER</b><br>720 929-6100 | <b>TITLE</b><br>Regulatory Analyst |
| <b>SIGNATURE</b><br>N/A                  |                                     | <b>DATE</b><br>5/3/2010            |

**Federal Approval of this  
Action is Necessary**

API Well No: 43047308690000

|   |  |
|---|--|
| <p><b>STATE OF UTAH</b><br/>DEPARTMENT OF NATURAL RESOURCES<br/>DIVISION OF OIL, GAS, AND MINING</p>  | <p><b>FORM 9</b></p>   |
| <p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p>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.</p> | <p><b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b><br/>U-01194AST</p> |
|   | <p><b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b></p>                  |
|   | <p><b>7. UNIT or CA AGREEMENT NAME:</b><br/>NATURAL BUTTES</p>       |
| <p><b>1. TYPE OF WELL</b><br/>Gas Well</p>  | <p><b>8. WELL NAME and NUMBER:</b><br/>CIGE 87D</p>                  |
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| <p><b>3. ADDRESS OF OPERATOR:</b><br/>P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779</p>   | <p><b>PHONE NUMBER:</b><br/>720 929-6007 Ext</p>                     |
| <p><b>4. LOCATION OF WELL FOOTAGES AT SURFACE:</b><br/>0967 FNL 0422 FEL<br/><b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b><br/>Qtr/Qtr: NENE Section: 34 Township: 09.0S Range: 21.0E Meridian: S</p>   | <p><b>9. FIELD and POOL or WILDCAT:</b><br/>NATURAL BUTTES</p>       |
|   | <p><b>COUNTY:</b><br/>UINTAH</p>                                     |
|   | <p><b>STATE:</b><br/>UTAH</p>  |

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

| TYPE OF SUBMISSION  | TYPE OF ACTION   |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> <b>NOTICE OF INTENT</b><br>Approximate date work will start:<br>5/14/2010 | <input type="checkbox"/> ACIDIZE                       | <input type="checkbox"/> ALTER CASING                   | <input type="checkbox"/> CASING REPAIR                  |
| <input type="checkbox"/> <b>SUBSEQUENT REPORT</b><br>Date of Work Completion:                                 | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS      | <input type="checkbox"/> CHANGE TUBING                  | <input type="checkbox"/> CHANGE WELL NAME               |
| <input type="checkbox"/> <b>SPUD REPORT</b><br>Date of Spud:  | <input type="checkbox"/> CHANGE WELL STATUS            | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE              |
| <input type="checkbox"/> <b>DRILLING REPORT</b><br>Report Date:   | <input type="checkbox"/> DEEPEN                        | <input type="checkbox"/> FRACTURE TREAT                 | <input type="checkbox"/> NEW CONSTRUCTION               |
|   | <input type="checkbox"/> OPERATOR CHANGE               | <input type="checkbox"/> PLUG AND ABANDON               | <input type="checkbox"/> PLUG BACK                      |
|   | <input type="checkbox"/> PRODUCTION START OR RESUME    | <input type="checkbox"/> RECLAMATION OF WELL SITE       | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION |
|   | <input type="checkbox"/> REPERFORATE CURRENT FORMATION | <input type="checkbox"/> SIDETRACK TO REPAIR WELL       | <input type="checkbox"/> TEMPORARY ABANDON              |
|   | <input type="checkbox"/> TUBING REPAIR                 | <input type="checkbox"/> VENT OR FLARE                  | <input type="checkbox"/> WATER DISPOSAL                 |
|   | <input type="checkbox"/> WATER SHUTOFF                 | <input type="checkbox"/> SI TA STATUS EXTENSION         | <input type="checkbox"/> APD EXTENSION                  |
|   | <input type="checkbox"/> WILDCAT WELL DETERMINATION    | <input checked="" type="checkbox"/> OTHER               | OTHER: REQUIRED WELL WO                                 |

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

THE OPERATOR REQUESTS AUTHORIZATION TO PERFORM WORK ON THE SUBJECT WELL IN ORDER TO SATISFY THE CORRECTIVE ACTION REQUIREMENTS (AOR WORK) SET FORTH BY THE EPA IN THE SWD/UIC PERMIT FOR THE PROPOSED NBU 921-34H SWD WELL. THIS WELL IS WITHIN THE QUARTER MILE BOUNDRY OF THE PROPOSED NBU 921-34H SWD AND IS REQUIRED TO MEET CERTAIN CONDITIONS OF THE EPA SWD/UIC PERMIT. PLEASE SEE ATTACHED PROCEDURE FOR WELL WORK DETAILS.

**Approved by the  
Utah Division of  
Oil, Gas and Mining**  
**Date:** May 17, 2010  
**By:** *Derek [Signature]*

|  |   |  |
|--|---|--|
| <p><b>NAME (PLEASE PRINT)</b><br/>Andy Lytle</p> | <p><b>PHONE NUMBER</b><br/>720 929-6100</p> | <p><b>TITLE</b><br/>Regulatory Analyst</p> |
| <p><b>SIGNATURE</b><br/>N/A</p>                  | <p><b>DATE</b><br/>5/12/2010</p>            |  |

**CIGE 87D (AOR work for the NBU 921-34H SWD)  
 967' FNL & 422' FEL  
 NENE - Section 34 – T9S – R21E  
 Uintah County, UT**

**KBE:** 5096'  
**GLE:** 5081'  
**TD:** 6225'  
**PBTD:** 6183'

**API NUMBER:** 43-047-30869  
**LEASE NUMBER:** U-01194-A-ST  
**WI:** 100.000000%  
**NRI:** 81.24800%  
**ORRI:** 7.592840%  
**UNIT/CA NUMBER:**

**CASING:** 12.25" hole  
 9.625", 36.0#, K-55 @ 213' w/ 125 sx Class H cement. Circulated 5 bbl cement to surface, TOC @ surface by circulation.

7.875" hole  
 5.5", 17.0#, K-55 @ 6224' w/580 sx liteweight 50-50 Pozmix lead, 1005 sx 50-50 Pozmix tail. Circulated 40 bbl cement to surface, TOC @ surface by circulation. No CBL run during completion.

**TUBING:** 2.375" 4.7# J-55 landed at 5737', SN at 5705'

| Tubular/Borehole            | Drift inches | Collapse psi | Burst Psi | Capacities |          |          |
|-----------------------------|--------------|--------------|-----------|------------|----------|----------|
|                             |              |              |           | Gal./ft.   | Cuft/ft. | Bbl./ft. |
| 2.375" 4.7# J-55 tbg.       | 1.901        | 8100         | 7700      | 0.1626     | 0.02173  | 0.00387  |
| 5.5" 17# J/K-55 csg.        | 4.892        | 4910         | 5320      | 0.9764     | 0.1305   | 0.02324  |
| <b>Annular Capacities</b>   |              |              |           |            |          |          |
| 2.375" tbg. X 5.5" 17# csg. |              |              |           | 0.7462     | 0.0997   | 0.01776  |
| 5.5" csg. X 9.625" 36# csg. |              |              |           | 2.0118     | 0.2691   | 0.0479   |
| 5.5" csg. X 7.875" hole     |              |              |           | 1.2978     | 0.1733   | 0.0309   |

**GEOLOGIC INFORMATION:**

| Formation   | Depth to top, ft. |
|-------------|-------------------|
| Uinta       | Surface           |
| Green River | 1472'             |
| Wasatch     | 4772'             |

**Tech. Pub. #92 Base of USDW's**

USDW Elevation ~2500' MSL  
 USDW Depth ~2581' GLE

**This depth is inconsistent with actual samples taken from the Bird's Nest at numerous wells in the immediate vicinity.**

## PERFORATIONS

| Formation | Date      | Top  | Bottom | SPF | Status |
|-----------|-----------|------|--------|-----|--------|
| Wasatch   | 7/27/1982 | 4844 | 4844   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5291 | 5291   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5294 | 5294   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5297 | 5297   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5351 | 5351   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5354 | 5354   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5626 | 5626   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5630 | 5630   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5746 | 5746   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5749 | 5749   | 1   | Open   |
| Wasatch   | 7/27/1982 | 5753 | 5753   | 1   | Open   |
| Wasatch   | 7/27/1982 | 6102 | 6102   | 1   | Open   |
| Wasatch   | 7/27/1982 | 6108 | 6108   | 1   | Open   |

## WELL HISTORY

### Completion – January 1993

- Note – During the drilling of the well, circulation was lost at 1726' with dry drilling to 1912'. At that point, a cement plug consisting of 200 sx RFC was spotted across the Birds Nest. There were apparently no significant circulation problems for the remainder of the drilling process.
- Ran a GR-CCL for depth control, no CBL run. Perforated the gross Wasatch interval 4844' through 6108' with 1 spf per above detail. Landed tubing at 4702'.
- Broke down and balled out with 104 bbl 3% KCl, then fractured with 50000 gals gel containing 100000# 20/40 mesh sand.
- Tested 2150 MCFd, 0 BOPD, 0 BWPD, 1450 psi FTP and SICP, 16/64<sup>th</sup> choke on 8/6/1982.

### Workover #1 – June 1997

- Cleaned out to 6178' and landed tubing at 5737'.
- Acidized with 750 gal 15% HCl.
- Swabbed well to kick off, RTP.

EPA Corrective action Procedure: Note: The Corrective Action Requirement for either confining zones may be waived if the CBL (that will be run) demonstrates Part II mechanical integrity over the Bird's nest.

1. MIRU. ND wellhead and NU BOPE. TOOH with tubing.
2. TIH with tools, set CBP @  $\pm 4800'$  (cap with cmt). Pressure test casing to 1000 psi.
3. Run a GR-CBL-CCL from RBP @  $\pm 4800'$  to surface holding 1000 psi on the casing. Bring log to Robert Miller for review (need an electronic copy also). Any additional demonstration of external mechanical integrity will be contingent upon the results from the CBL.
4. Corrective action is contingent upon the CBL results. Although the well has cement till to surface, it is likely that the interval of interest is covered by lightweight lead cement and will not calculate as an 80% bond index per EPA guidance. Demonstration of external mechanical integrity via perforation and RATS may be required, followed by remedial cementing.
5. Based on CBL, a decision to continue on at this time or RDMOL will be made.

|  |   |
|--|---|
| <b>STATE OF UTAH</b><br>DEPARTMENT OF NATURAL RESOURCES<br>DIVISION OF OIL, GAS, AND MINING  | <b>FORM 9</b><br><br><b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b><br>U-01194AST                                   |
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| <b>1. TYPE OF WELL</b><br>Gas Well   | <b>8. WELL NAME and NUMBER:</b><br>CIGE 87D   |
| <b>2. NAME OF OPERATOR:</b><br>KERR-MCGEE OIL & GAS ONSHORE, L.P.  | <b>9. API NUMBER:</b><br>43047308690000   |
| <b>3. ADDRESS OF OPERATOR:</b><br>P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779  | <b>PHONE NUMBER:</b><br>720 929-6007 Ext  |
| <b>4. LOCATION OF WELL</b><br><b>FOOTAGES AT SURFACE:</b><br>0967 FNL 0422 FEL<br><b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b><br>Qtr/Qtr: NENE Section: 34 Township: 09.0S Range: 21.0E Meridian: S  | <b>9. FIELD and POOL or WILDCAT:</b><br>NATURAL BUTTES<br><br><b>COUNTY:</b><br>UINTAH<br><br><b>STATE:</b><br>UTAH |

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

| TYPE OF SUBMISSION   | TYPE OF ACTION   |   |   |
|--|--|---|---|
| <input type="checkbox"/> <b>NOTICE OF INTENT</b><br>Approximate date work will start:                | <input type="checkbox"/> ACIDIZE                       | <input type="checkbox"/> ALTER CASING                   | <input type="checkbox"/> CASING REPAIR                  |
| <input checked="" type="checkbox"/> <b>SUBSEQUENT REPORT</b><br>Date of Work Completion:<br>6/9/2010 | <input type="checkbox"/> CHANGE TO PREVIOUS PLANS      | <input type="checkbox"/> CHANGE TUBING                  | <input type="checkbox"/> CHANGE WELL NAME               |
| <input type="checkbox"/> <b>SPUD REPORT</b><br>Date of Spud:   | <input type="checkbox"/> CHANGE WELL STATUS            | <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS | <input type="checkbox"/> CONVERT WELL TYPE              |
| <input type="checkbox"/> <b>DRILLING REPORT</b><br>Report Date:                                      | <input type="checkbox"/> DEEPEN                        | <input type="checkbox"/> FRACTURE TREAT                 | <input type="checkbox"/> NEW CONSTRUCTION               |
|  | <input type="checkbox"/> OPERATOR CHANGE               | <input type="checkbox"/> PLUG AND ABANDON               | <input type="checkbox"/> PLUG BACK                      |
|  | <input type="checkbox"/> PRODUCTION START OR RESUME    | <input type="checkbox"/> RECLAMATION OF WELL SITE       | <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION |
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|  | <input type="checkbox"/> WATER SHUTOFF                 | <input type="checkbox"/> SI TA STATUS EXTENSION         | <input type="checkbox"/> APD EXTENSION                  |
|  | <input type="checkbox"/> WILDCAT WELL DETERMINATION    | <input checked="" type="checkbox"/> OTHER               | OTHER: EPA REQUIRED AOR \                               |

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

THE OPERATOR HAS RECENTLY COMPLETED EPA REQUIRED WELL WORK ON THE SUBJECT WELL. THE WORK WAS PERFORMED IN ORDER TO SATISFY THE CORRECTIVE ACTION REQUIREMENTS (AOR WORK) SET FORTH BY THE EPA IN THE SWD/UIC PERMIT FOR THE PROPOSED NBU 921-34H SWD WELL. THIS WELL IS WITHIN A QUARTER MILE BOUNDRY OF THE PROPOSED NBU 921-34H SWD WELL AND IS REQUIRED TO MEET CERTAIN CONDITIONS OF THE EPA SWD/UIC PERMIT. PLEASE SEE ATTACHED CHRONOLOGICAL WELL HISTORY FOR WELL WORK DETAILS.

Accepted by the  
 Utah Division of  
 Oil, Gas and Mining  
**FOR RECORD ONLY**  
 July 20, 2010

|  |                                     |                                    |
|--|-------------------------------------|------------------------------------|
| <b>NAME (PLEASE PRINT)</b><br>Andy Lytle | <b>PHONE NUMBER</b><br>720 929-6100 | <b>TITLE</b><br>Regulatory Analyst |
| <b>SIGNATURE</b><br>N/A                  |                                     | <b>DATE</b><br>7/19/2010           |

**US ROCKIES REGION**  
**Operation Summary Report**

Well: CIGE 87D Spud Date:  
 Project: UTAH-UINTAH Site: CIGE 87D Rig Name No: LEED 465/465  
 Event: WELL WORK EXPENSE Start Date: 6/7/2010 End Date: 6/9/2010  
 Active Datum: RKB @0.00ft (above Mean Sea Level) UWI: CIGE 87D

| Date     | Time Start-End | Duration (hr) | Phase  | Code | Sub Code | P/U | MD From (ft) | Operation   |
|----------|----------------|---------------|--------|------|----------|-----|--------------|---|
| 6/7/2010 | 7:00 - 7:15    | 0.25          | WO/REP | 48   | A        | P   |              | JSA-SAFETY MEETING #1   |
|          | 7:15 - 18:00   | 10.75         | WO/REP | 30   | A        | P   |              | ROAD RIG TO LOC, MIRU, NO PRESSURE ON TBG, 250# ON CSG, BLOWED CSG DN, PUMP 25 BBLS DN CSG, TRY NIPPLE DN WELL HEAD W/ WELL HEAD WOULD NOT MOVE, TOOK LOCKING PIN OUT OF HANGER, STILL WOULD NOT MOVE W/ PULLING 60,000#, P/U SURFACE JARS, ENTENCEFIRER AND SHOCK SUB, SCREW INTO TOP OF TREE, PULLED UP TO 80,000# SET JARS OFF, WELL HEAD DIDNOT MOVE, COULD NOT GET JARS TO RESET, R/D JARS, SHUT WELL IN SDFN,     |
| 6/8/2010 | 7:00 - 7:15    | 0.25          | WO/REP | 48   |          | P   |              | JSA-SAFETY MEETING #2,  |
|          | 7:15 - 10:00   | 2.75          | WO/REP | 30   | F        | P   |              | 100# ON WELL, BLOWED DN TO TK, PUMP 20 BBLS WTR DN CSG, P/U SURFACE JARS, INTENSIFIERS, SHOCK SUB, SCREW INTO TOP OF TREE, P/U SET JARS OFF @ 90,000#, 4 TIMES WELL HEAD CAME OFF OF TBG HANGER, THREADS IN SIDE OF TBG HANGER ALL MISS UP, WAIT ON SPEAR, P/U SPEAR, STUNG INTO TBG, P/U W/ TBG HANGER CAME OUT OF TBG SPOOL AND 2 3/8" TBG, R/D TOOLS, STRIP BOPS OVER TOP OF TBG, N/U BOPS, R/U TBG EQUIP AND FLOOR, |
|          | 10:00 - 12:00  | 2.00          | WO/REP | 31   | I        | P   |              | TOOH W 2 3/8" TBG TALLY OUT, STAND BACK 152 JTS, LAY DN 30 JTS ON TRAILER, @ 5775' TBG  |
|          | 12:00 - 13:30  | 1.50          | WO/REP | 34   | I        | P   |              | R/U CUTTER WIRELINE RIH W/ 5 1/2" GAGUE RING TO @ 5000', RIH W/ BAKER 8K CBP, SET CBP @ 4800', R/D WIRELINE,  |
|          | 13:30 - 17:00  | 3.50          | WO/REP | 31   | I        | P   |              | RIH W/ 2 3/8" TBG TO @ 4800', CIRC WELL W/ T-MAC WTR, CIRC GAS OUT OF WELL, P PRESSURE TEST CSG TO 1000#, HOLD FOR 10 MIN OK, TOOH W/ TBG, SHUT WELL IN, SDFN,  |
| 6/9/2010 | 7:00 - 7:15    | 0.25          | WO/REP | 48   |          | P   |              | JSA-SAFETY MEETING #3   |
|          | 7:15 - 9:00    | 1.75          | WO/REP | 30   |          | P   |              | N/D BOPS AND TBG SPOOL, P/U NEW SPOOL, CAMERON HAD WRONG PACK OFF IN SPOOL AND TBG HANGER, N/U OLD TBG SPOOL AND BOPS,  |
|          | 9:00 - 12:30   | 3.50          | WO/REP | 41   | A        | P   |              | R/U CUTTER WIRELINE RIN W/ CBL TOOLS, RUN CBL LOG FROM 4775' TO SURFACE W/ 1000#, R/D WIRELINE,   |
|          | 12:30 - 13:30  | 1.00          | WO/REP | 30   |          | P   |              | N/D BOPS AND OLD TBG SPOOL. N/U NEW CAMERON TBG SPOOL, N/U BOPS,  |
|          | 13:30 - 16:00  | 2.50          | WO/REP | 31   | I        | P   |              | TIH W/ 2 3/8" TBG W/ NOTCH COLLER ON BOTTOM, LANDED TBG 4700', N/D BOPS, N/U WELL HEAD, R/D SERVICE UNIT,   |
|          |                |               |        |      |          |     |              |   |

|  |   |   |
|--|---|---|
| <b>STATE OF UTAH</b><br>DEPARTMENT OF NATURAL RESOURCES<br>DIVISION OF OIL, GAS, AND MINING  |   | <b>FORM 9</b>   |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><br>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. |   | <b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b><br>U-01194AST  |
| <b>1. TYPE OF WELL</b><br>Gas Well   |   | <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b><br><br><b>7. UNIT or CA AGREEMENT NAME:</b><br>NATURAL BUTTES          |
| <b>2. NAME OF OPERATOR:</b><br>KERR-MCGEE OIL & GAS ONSHORE, L.P.  |   | <b>8. WELL NAME and NUMBER:</b><br>CIGE 87D   |
| <b>3. ADDRESS OF OPERATOR:</b><br>P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779  |   | <b>9. API NUMBER:</b><br>43047308690000   |
| <b>4. LOCATION OF WELL</b><br><b>FOOTAGES AT SURFACE:</b><br>0967 FNL 0422 FEL<br><b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b><br>Qtr/Qtr: NENE Section: 34 Township: 09.0S Range: 21.0E Meridian: S  |   | <b>9. FIELD and POOL or WILDCAT:</b><br>NATURAL BUTTES<br><br><b>COUNTY:</b><br>UINTAH<br><br><b>STATE:</b><br>UTAH |
| 11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  |   |   |
| <b>TYPE OF SUBMISSION</b>  | <b>TYPE OF ACTION</b>   |   |
| <input type="checkbox"/> NOTICE OF INTENT<br>Approximate date work will start:   | <input type="checkbox"/> ACIDIZE<br><input type="checkbox"/> ALTER CASING<br><input type="checkbox"/> CASING REPAIR<br><input type="checkbox"/> CHANGE TO PREVIOUS PLANS<br><input type="checkbox"/> CHANGE TUBING<br><input type="checkbox"/> CHANGE WELL NAME<br><input type="checkbox"/> CHANGE WELL STATUS<br><input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS<br><input type="checkbox"/> CONVERT WELL TYPE<br><input type="checkbox"/> DEEPEN<br><input type="checkbox"/> FRACTURE TREAT<br><input type="checkbox"/> NEW CONSTRUCTION<br><input type="checkbox"/> OPERATOR CHANGE<br><input type="checkbox"/> PLUG AND ABANDON<br><input type="checkbox"/> PLUG BACK<br><input checked="" type="checkbox"/> PRODUCTION START OR RESUME<br><input type="checkbox"/> RECLAMATION OF WELL SITE<br><input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION<br><input type="checkbox"/> REPERFORATE CURRENT FORMATION<br><input type="checkbox"/> SIDETRACK TO REPAIR WELL<br><input type="checkbox"/> TEMPORARY ABANDON<br><input type="checkbox"/> TUBING REPAIR<br><input type="checkbox"/> VENT OR FLARE<br><input type="checkbox"/> WATER DISPOSAL<br><input type="checkbox"/> WATER SHUTOFF<br><input type="checkbox"/> SI TA STATUS EXTENSION<br><input type="checkbox"/> WILDCAT WELL DETERMINATION<br><input type="checkbox"/> OTHER |   |
| <input checked="" type="checkbox"/> SUBSEQUENT REPORT<br>Date of Work Completion:<br>8/25/2011   | <input type="checkbox"/> ALTER CASING<br><input type="checkbox"/> CHANGE TUBING<br><input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS<br><input type="checkbox"/> FRACTURE TREAT<br><input type="checkbox"/> PLUG AND ABANDON<br><input type="checkbox"/> RECLAMATION OF WELL SITE<br><input type="checkbox"/> SIDETRACK TO REPAIR WELL<br><input type="checkbox"/> VENT OR FLARE<br><input type="checkbox"/> SI TA STATUS EXTENSION<br><input type="checkbox"/> OTHER   |   |
| <input type="checkbox"/> SPUD REPORT<br>Date of Spud:  | <input type="checkbox"/> ALTER CASING<br><input type="checkbox"/> CHANGE TUBING<br><input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS<br><input type="checkbox"/> FRACTURE TREAT<br><input type="checkbox"/> PLUG AND ABANDON<br><input type="checkbox"/> RECLAMATION OF WELL SITE<br><input type="checkbox"/> SIDETRACK TO REPAIR WELL<br><input type="checkbox"/> VENT OR FLARE<br><input type="checkbox"/> SI TA STATUS EXTENSION<br><input type="checkbox"/> OTHER   |   |
| <input type="checkbox"/> DRILLING REPORT<br>Report Date:   | <input type="checkbox"/> ALTER CASING<br><input type="checkbox"/> CHANGE TUBING<br><input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS<br><input type="checkbox"/> FRACTURE TREAT<br><input type="checkbox"/> PLUG AND ABANDON<br><input type="checkbox"/> RECLAMATION OF WELL SITE<br><input type="checkbox"/> SIDETRACK TO REPAIR WELL<br><input type="checkbox"/> VENT OR FLARE<br><input type="checkbox"/> SI TA STATUS EXTENSION<br><input type="checkbox"/> OTHER   |   |
| 12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.<br>THE SUBJECT WELL WAS RETURNED TO PRODUCTION ON 08/25/2011.   |   |   |
| <b>Accepted by the<br/>         Utah Division of<br/>         Oil, Gas and Mining<br/>         FOR RECORD ONLY</b>   |   |   |
| <b>NAME (PLEASE PRINT)</b><br>Sheila Wopsock   | <b>PHONE NUMBER</b><br>435 781-7024   | <b>TITLE</b><br>Regulatory Analyst  |
| <b>SIGNATURE</b><br>N/A  | <b>DATE</b><br>9/6/2011   |   |