

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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

MI-11004
5. Lease Designation and Serial No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work
DRILL DEEPEN PLUG BACK

6. If Indian, Allottee or Tribe Name

7. Unit Agreement Name

Island
8. Farm or Lease Name

Unit
9. Well No.

17
10. Field and Pool, or Wildcat

Island NATURAL BUTTES

11. Sec., T., R., M., or Blk. and Survey or Area

2-10S-19E
12. County or Parrish 13. State

14. Distance in miles and direction from nearest town or post office*
36 miles Southwest of Ouray, Utah

Uintah Utah

15. Distance from proposed* location to nearest property or lease line, ft. (Also to nearest drlg. line, if any) 563'

16. No. of acres in lease 640

17. No. of acres assigned to this well NA

18. Distance from proposed location* to nearest well, drilling, completed, or applied for, on this lease, ft. 2828'

19. Proposed depth 6680' *depth needed*

20. Rotary or cable tools Rotary

21. Elevations (Show whether DF, RT, GR, etc.)
GR 5030 as graded

22. Approx. date work will start*
Upon Approval

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#; 300';	165 sx Reg. Type G w/5% Dowell D43A or 3% CaCl & 1/4# flocele/sx			
7-7/8"; 5-1/2"; 17#; 6680';	Amt to be determined, 50-50 Pozmix w/ 8% gel, 0.2% Halad-24, 10% salt, 5 pounds gilsonite/sx and 1/4# flocele/sx, cement will be brought up to a point 300' above the Birds Nest Aquifer.			

See attached drilling plan.

RECEIVED

JUN 27 1984

DIVISION OF OIL GAS & MINING

APPROVED BY THE STATE OF UTAH DIVISION OF OIL, GAS, AND MINING

DATE: 6/28/84
BY: [Signature]

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

24. Signed: [Signature] Title: Drilling Engineer Date: June 20, 1984

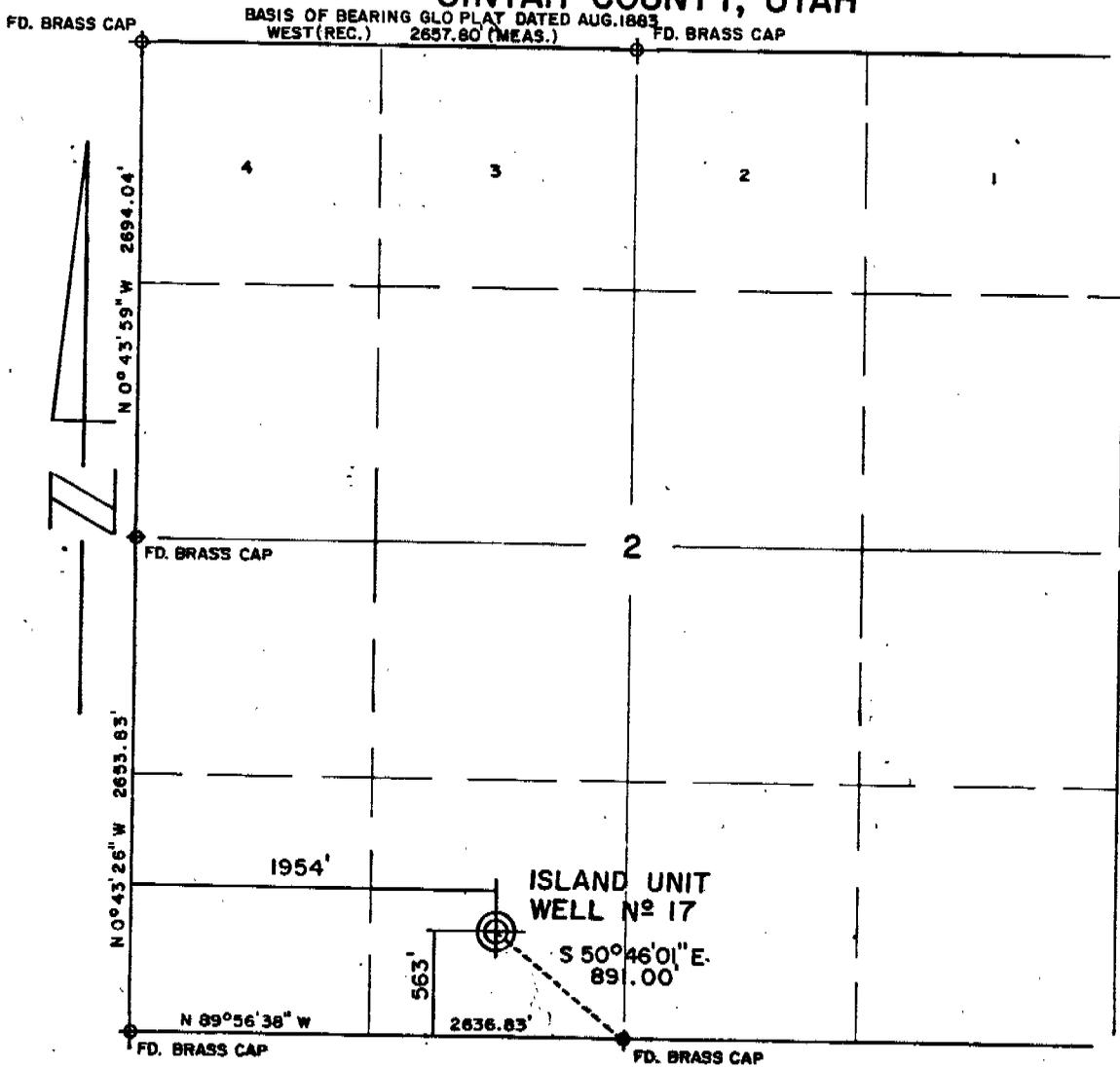
(This space for Federal or State office use)

Permit No. Approval Date

Approved by Title Date

Conditions of approval, if any:

T.10S.,R.19E.
S.L.B.&M.
UINTAH COUNTY, UTAH



LOCATION PLAN
SCALE 1" = 1000'



LEGEND

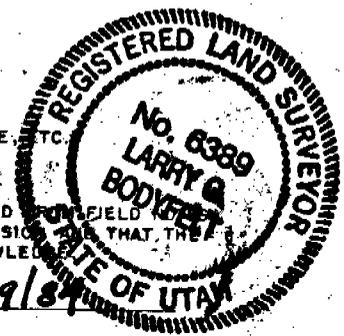
- SURFACE OWNER BOUNDARY
- - - MINERAL LEASE BOUNDARY
- ⊕ WELL LOCATION
- ◆ FD. BRASS CAP
- ⊗ FD. STONE

* NOTE: FOR SURFACE INFORMATION (ROADS, TOPO, DRAINAGE, ETC.) SEE AREA MAP.

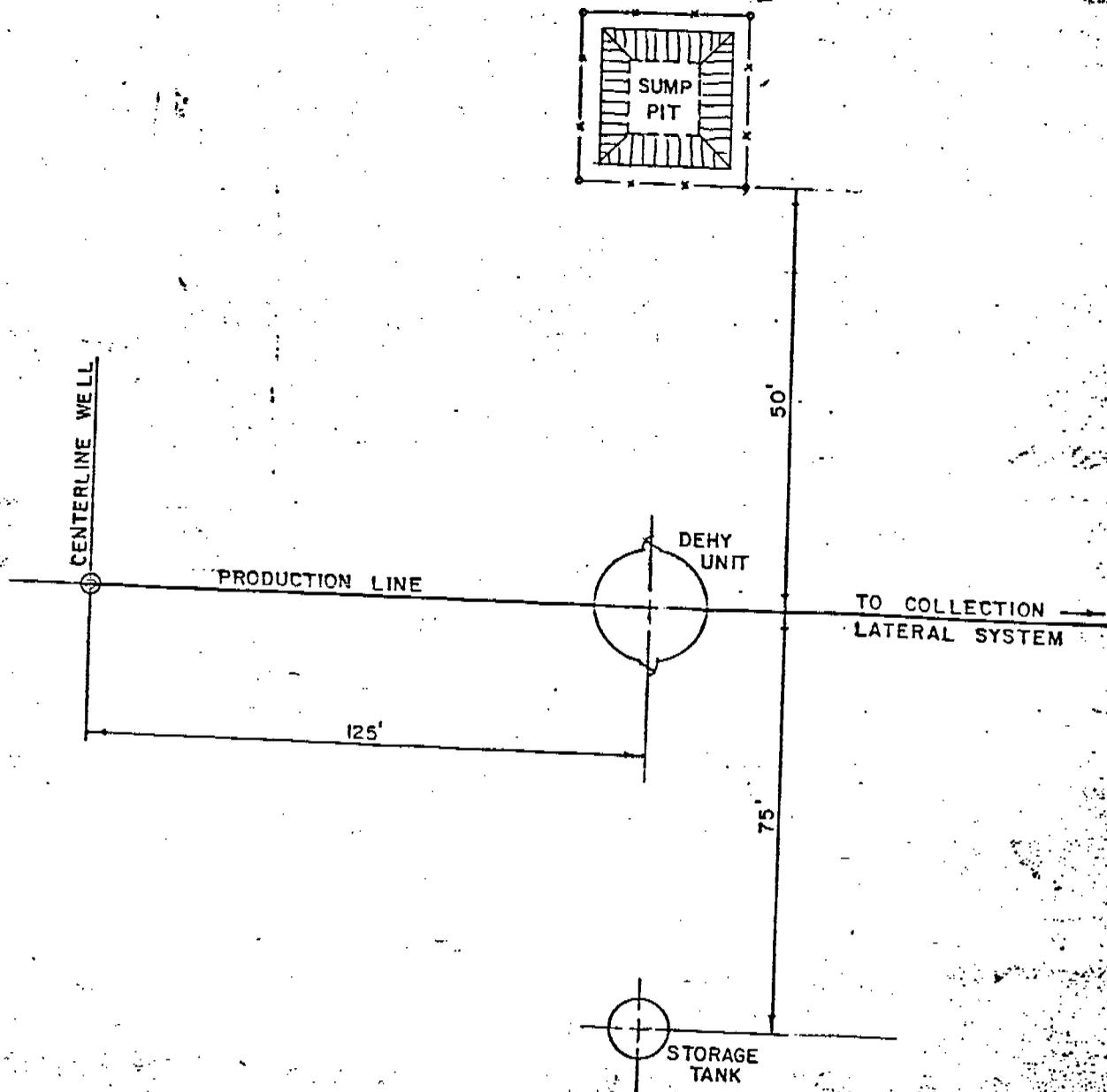
THIS IS TO CERTIFY THAT THE ABOVE PLAT WAS PREPARED FROM FIELD OF ACTUAL SURVEYS MADE BY ME OR UNDER MY SUPERVISION AND THAT THE SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Larry G. Bodyfelt
LARRY G. BODYFELT, UTAH REG. L.S. No 6389

5/29/84

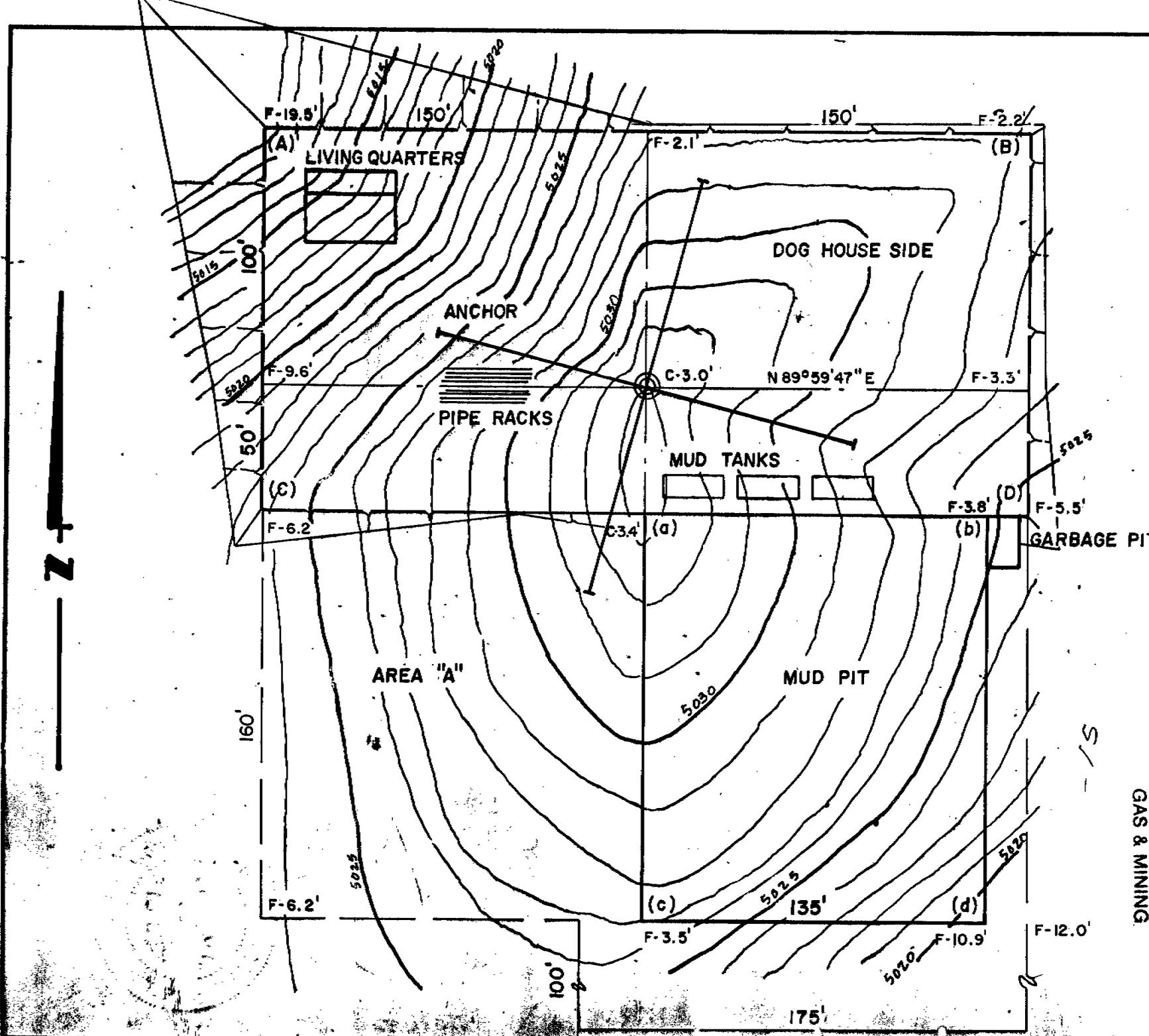


ENGINEERING RECORD		CERTIFIED	
SURVEYED: N.P.R. 5/16/84	FIELD: ISLAND	WELL LOCATION PLAT FOR ISLAND UNIT WELL No 17	
BASIS OF BEARING: GLO PLAT (DATED AUGUST 1883)			
SURFACE OWNER: U. S. GOVERNMENT			
MINERAL LEASE: M.L. - 11004			
LOCATION: SE 1/4 SW 1/4, SEC. 2, T. 10S., R. 19E., S.L.B. & M. 563 FSL 1954' FWL			
COUNTY: UTAH	STATE: UTAH	DRAWN CRW 5/24/84	SCALE: 1" = 1000'
ELEVATION AS GRADED: 5030		CHECKED <i>L.B.</i>	DRWG. NO. M-22471
		APPROVED <i>L.B.</i>	



REVISIONS			
NO.	DESCRIPTION	DATE	BY

TYPICAL PRODUCTION FACILITIES LAYOUT FOR ISLAND UNIT WELL NO. 17	
DRAWN:	SCALE: NONE
CHECKED:	DRWG. NO. M-12205
APPROVED:	



AT SITES WHERE TOPSOIL IS PRESENT SAME IS TO BE REMOVED AND STORED ON THE ADJACENT LAND FOR RESTORATION AT THE SITE WHEN REQUIRED. 2050 CU. YDS. OR THE TOP 6" OF TOPSOIL IS TO BE STOCKPILED.

MUD & GARBAGE PITS ARE TO BE UNLINED & FENCED

AREA "A" SHOULD BE LEVELED TO STACK DRILL PIPE, SET "FRAC" TANKS, TESTING SEPARATOR AND OTHER EQUIPMENT.

GARBAGE PIT IS 12' X 20' X 10' DEEP AND COVERED TO CONTAIN GARBAGE.

REFERENCE POINTS ARE SET AT 200' NORTH, 200' SOUTH, 200' EAST AND 200' WEST.

AREA FOR LOCATION IS 2.54 ACRES.

REFERENCE DRAWINGS ARE:
 M-22471 M-22473
 M-22474 M-12205

DEADMAN ANCHORS ARE AT 120' SPACING (MIN.).

CUTS AND FILLS ARE AT 2:1 UNLESS OTHERWISE NOTED.

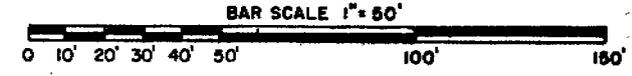
CONTOURS ARE AT 1' INTERVALS.

DIVISION OF OIL
GAS & MINING

JUN 27 1984

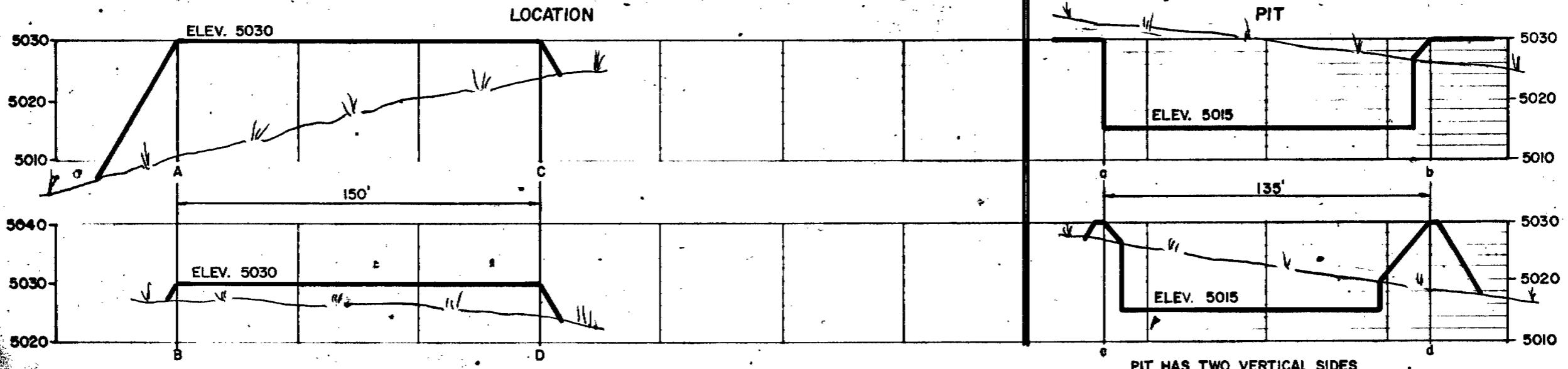
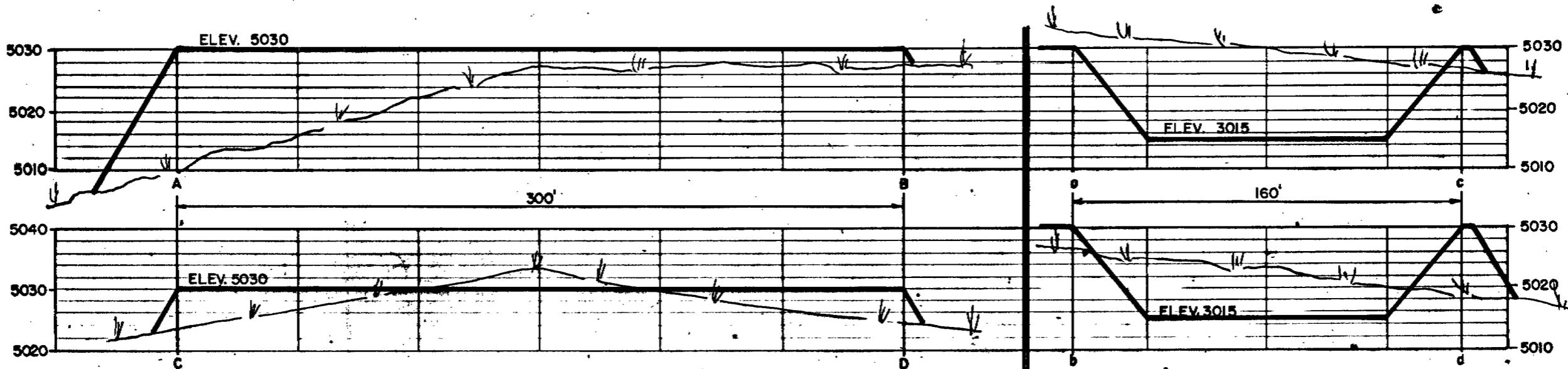
RECEIVED

ISLAND UNIT WELL No 17



M-22472

5/25/84 CRW



PROFILE SECTIONS
ISLAND UNIT WELL N^o 17

SCALE HORIZ. 1" = 50'
VERT. 1" = 20'

MUD PIT IS UNLINED, CUTS & FILLS ARE AT 2:1 UNLESS NOTED, SYMBOL FOR NATURAL GROUND.

AFFIDAVIT OF SURFACE INSPECTION

STATE OF WYOMING)
) ss.
 COUNTY OF SWEETWATER)

The undersigned, Nick P. Roich of Rock Springs, Wyoming, of lawful age, being by me first duly sworn, deposes and says:

On the 22 day of May, 1984, the undersigned made a careful and detailed physical inspection of the following described lands situated in Uinta County, State of Utah, to ascertain whether there were any mining claims or discovery monuments located upon said lands, and also to determine the existence of improvements and visible easements for highway, railroad, roads, telephone, electric, ditches, canals, or pipelines:
 Township 10S Range 19E Section 2
 Well Location SE SW Footage Location 563 FSL 1954 FWL
 Well Name Island Unit No. 17

*In the above detailed search covering said lands (no) evidence of mining claims, location notices, corner monuments was found on the above described lands. The subject inspection (~~did~~) (did not) find excavations, pits, shafts, tunnels, cross-cuts, drifts, prospect holes, wells, (~~and~~) (nor any other evidence of (present) or (past) mining or drilling activity of any kind. Said search (~~did~~) (did not) find evidence which would suggest the marking of any boundaries of mining claim or claims. In addition (no) evidence was found that anyone was working or had ever worked, placed on production or developed said lands or any portions thereof for oil, gas or other locatable minerals.

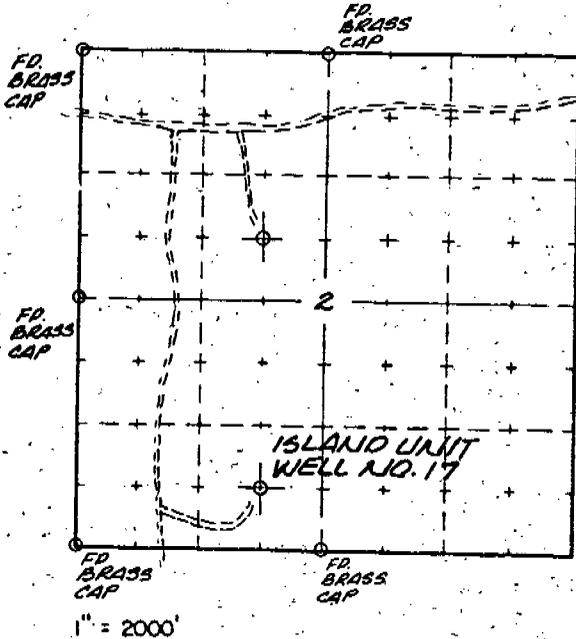
Examination of said lands (~~did~~) (did not) disclose rights-of-way and easements on, across, within and over the subject description.

If any of the above are noted, please indicate type and the approximate location on the plat below.

*If any of the above are not found, mark the same out.

Notes

See road survey.



Further affiant saith not.

Nick P. Roich

The foregoing instrument was acknowledged before me this 30th day of May

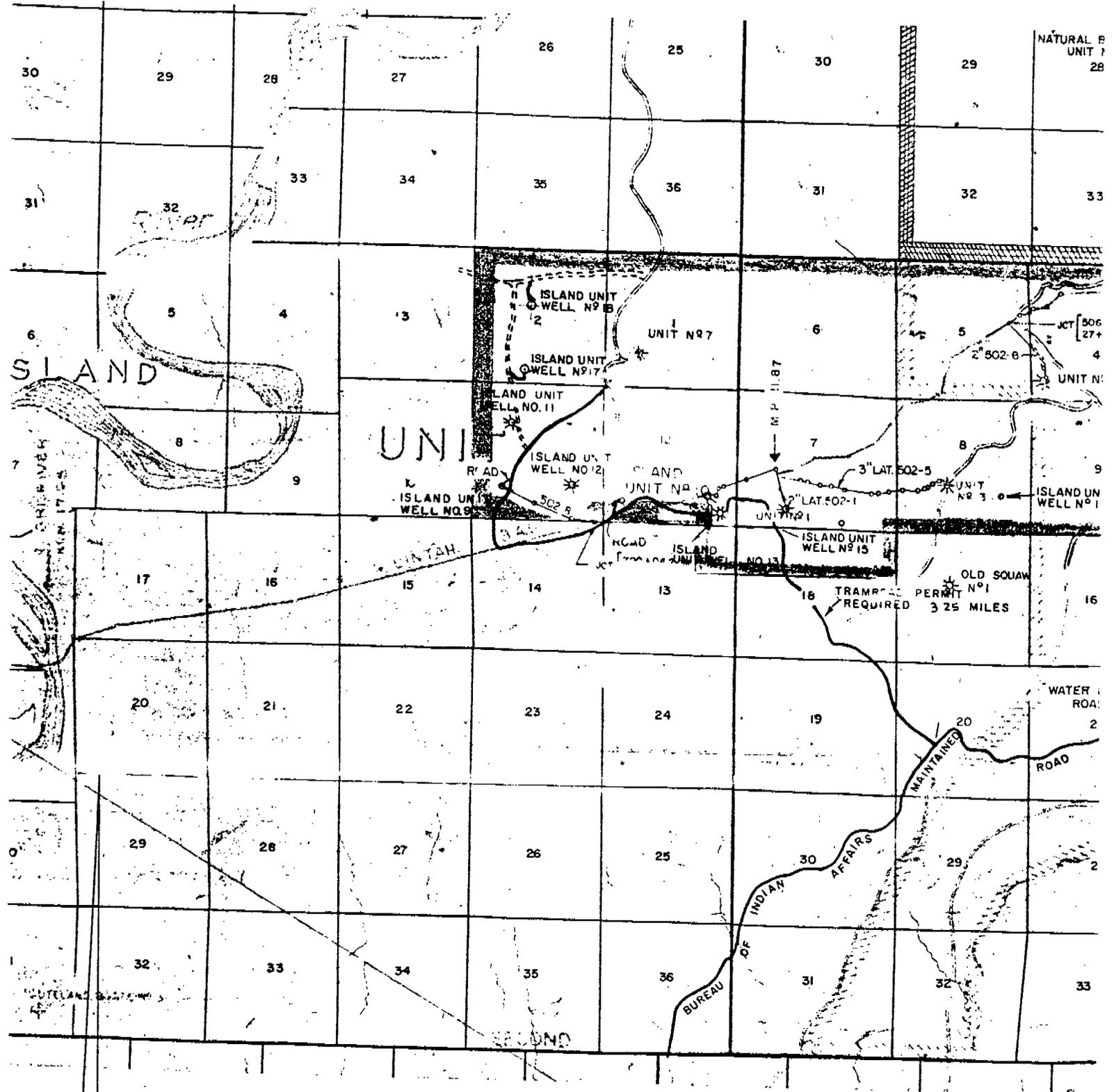
Witness my hand and official seal.

My Commission Expires:

June 29, 1987

Betty J. Smith
 Notary Public

**SEC. 2, T. 19 E., R. 10 S.,
SALT LAKE BASE & MERIDIAN
UINTAH CO., UTAH**



AREA MAP

**ISLAND UNIT WELL NO. 17
ISLAND UNIT WELL NO. 18**



Drilling Plan
 Celsius Energy Company
 Island Unit Well No. 17
 Island Field

1 & 2. SURFACE ELEVATION, ESTIMATED TOPS AND WATER, OIL, GAS OR MINERAL BEARING FORMATIONS:

Uintah	-	Surface
Green River	-	1,360
Birds Nest Aquifer	-	2,260, oil or gas
Wasatch Tongue	-	4,530, oil or gas
Green River Tongue	-	4,835, oil or gas
Wasatch	-	4,985. gas
Chapita Wells	-	5,765, objective, gas
Total Depth	-	6,680

3. PRESSURE CONTROL EQUIPMENT: (See attached diagram)
 Operator's minimum specifications for pressure control equipment requires an 11-inch 3000 psi double gate hydraulically operated blowout preventer and an 11-inch 3000 psi annular preventer. Surface casing and all preventer rams will be pressure tested to 1000 psi for 15 minutes using rig pump and mud. NOTE: Surface casing will be pressure tested to minimum of 1000 psi; or one psi per foot; or 70 percent of the internal yield of the casing, whichever is applicable. BOP's will be checked daily as to mechanical operating condition and will be tested by rig equipment after each string of casing is run. All ram type preventers will have hand wheels which will be operative at the time the preventers are installed.

4. CASING PROGRAM:

<u>Footage</u>	<u>Size</u>	<u>Grade</u>	<u>Wt.</u>	<u>Condition</u>	<u>Thread</u>	<u>Cement</u>
300	9-5/8	K-55	36	New	8 rd ST&C	165 sx Regular Type G with 5% Dowell D43A or 3% CaCl & 1/4# flocele/sx
6680	5-1/2	K-55	17	New	8 rd LT&C	Amt to be determined, 50-50 Pozmix w/8% gel, 0.2% Halad-24, 10% salt, 5 pounds gilsonite/sx and 1/4# flocele/sx, cement will be brought up to a point 300' above the Birds Nest Aquifer.

AUXILIARY EQUIPMENT:

- a) Manually operated kelly cock
- b) No floats at bit
- c) Monitoring of mud system will be visual
- d) Full opening floor valve manually operated

5. MUD PROGRAM: Water base mud from surface casing to total depth.

Sufficient mud materials to maintain mud properties, control lost circulation and to contain blowout will be available at the wellsite.

6. LOGGING: DIL-SFL-GR - from surface casing to total depth
BHC-Sonic w/Caliper - from surface casing to total depth
CNL-FDC-GR over zones of interest

TESTING: No drill stem tests are anticipated.

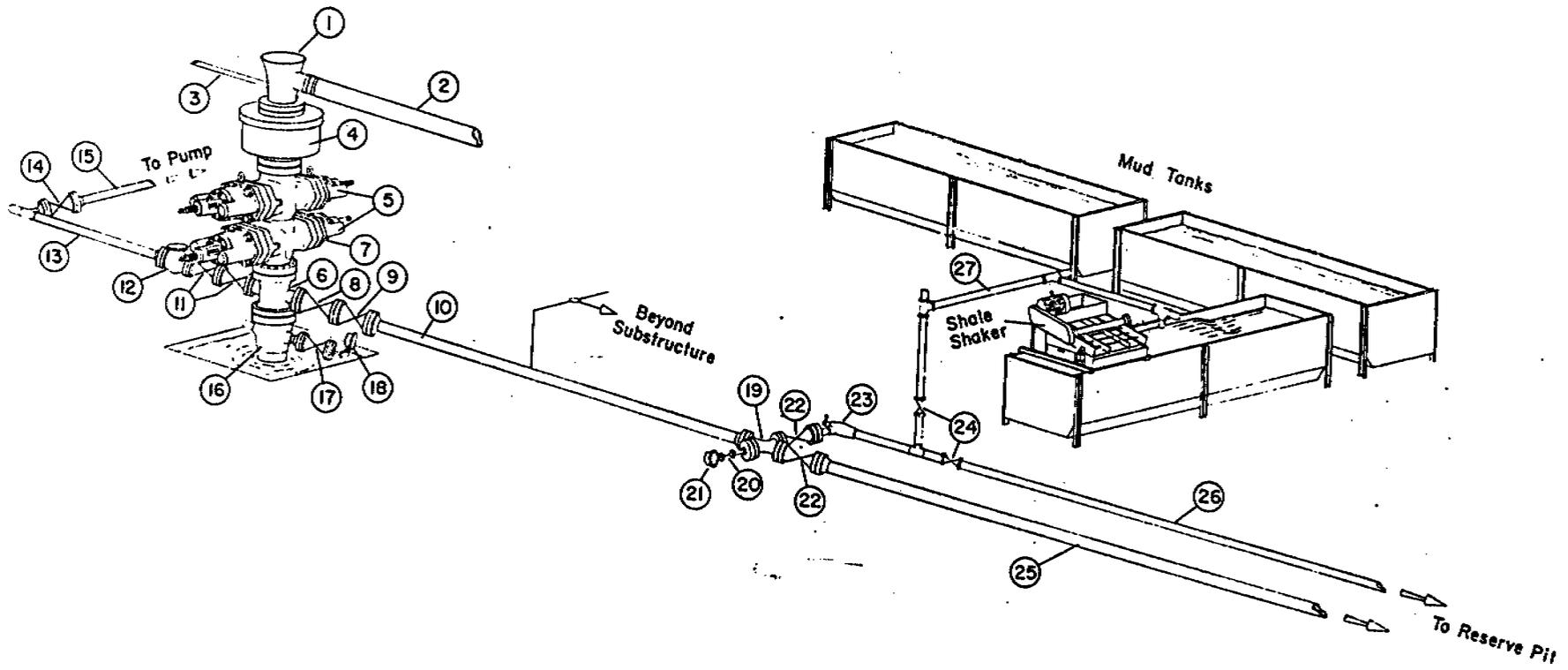
CORING: No coring is anticipated.

7. ABNORMAL PRESSURE AND TEMPERATURE: No abnormal pressures are anticipated, a BHT of 150° F. is expected.

8. ANTICIPATED STARTING DATE: Upon approval.

DURATION OF OPERATION: 15 Days.

CELSIUS/WEXPRO 3000 psi BLOWOUT PREVENTION EQUIPMENT



STANDARD STACK REQUIREMENTS

No	ITEM	NOMINAL	ID	TYPE	FURNISHED BY	
					OPER.	CONTR.
1	Drilling Nipple (Rotating Head when air drilling)					
2	Flowline					
3	Fill up Line (eliminated for air drilling)	2"				
4	Annular Preventer			Hydril Cameron Shaffer		
5	Two Single or One dual Hydril oper rams.			H:ORC; F:LWS; R.F.		
6	Drilling spool with 3" and 2" outlets			Forged		
7	As Alternate to (6) Run & Kill and Choke lines from outlets in this ram					
8	Gate Valve		3-1/8			
9	Valve-hydraulically operated (Gate)		3-1/8			
10	Choke Line	3"				
11	Gate Valves		2-1/16			
12	Check Valve		2-1/16			
13	Kill Line	2"				
14	Gate Valve		2-1/16			
15	Kill Line to Pumps	2"				
16	Casing Head					
17	Valve Gate _____ Plug _____		1-13/16			
18	Compound Pressure Cage					
	Wear Bushing					

RECONCILE WELL NAME AND LOCATION ON APD AGAINST SAME DATA ON PLAT MAP.

AUTHENTICATE LEASE AND OPERATOR INFORMATION

VERIFY ADEQUATE AND PROPER BONDING

AUTHENTICATE IF SITE IS IN A NAMED FIELD, ETC.

APPLY SPACING CONSIDERATION

ORDER _____

UNIT Island

c-3-b

c-3-c

CHECK DISTANCE TO NEAREST WELL.

CHECK OUTSTANDING OR OVERDUE REPORTS FOR OPERATOR'S OTHER WELLS.

IF POTASH DESIGNATED AREA, SPECIAL LANGUAGE ON APPROVAL LETTER

IF IN OIL SHALE DESIGNATED AREA, SPECIAL APPROVAL LANGUAGE.

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

ML-11004
3. Lease Designation and Serial No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

6. If Indian, Allottee or Tribe Name

7. Unit Agreement Name

8. Island
Farm or Lease Name

9. Unit
Well No.

10. 17
Field and Pool, or Wildcat
Island

11. Sec., T., R., M., or Blk.
and Survey or Area

12. 2-10S-19E
County or Parrish 13. State

Uintah Utah

17. No. of acres assigned
to this well

NA

20. Rotary or cable tools

Rotary

22. Approx. date work will start*

Upon Approval

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

Wexpro Company

3. Address of Operator

P. O. Box 458, Rock Springs, WY 82902

4. Location of Well (Report location clearly and in accordance with any State requirements.*)

At surface

SE 1/4 SW 1/4, 563' FSL, 1954' FWL

At proposed prod. zone

14. Distance in miles and direction from nearest town or post office*

36 miles Southwest of Ouray, Utah

15. Distance from proposed* location to nearest property or lease line, ft.

(Also to nearest drlc. line, if any) 563'

16. No. of acres in lease

640

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

2828'

19. Proposed depth

6680'

21. Elevations (Show whether DP, RT, GR, etc.)

GR 5030 as graded

23.

PROPOSED CASING AND CEMENTING PROGRAM

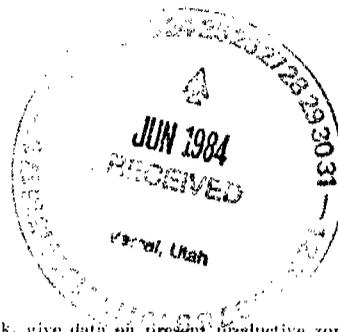
Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
12-1/4"; 9-5/8"; 7-7/8"; 5-1/2"; 17#; 6680';	36#; 300';	165 sx Reg. Type G w/5% Dowell D43A or 3% CaCl & 1/4# flocele/sx	50-50 Pozmix w/ 8% gel, 0.2% Halad-24,	10% salt, 5 pounds gilsonite/sx and 1/4# flocele/sx, cement will be brought up to a point 300' above the Birds Nest Aquifer.

See attached drilling plan.

RECEIVED

JUL 10 1984

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: J. A. Buehler Title: Drilling Engineer Date: June 20, 1984

(This space for Federal or State office use)

Permit No. _____ Approval Date: _____
Approved by: Don Alford Title: ASSOCIATE DISTRICT MANAGER Date: 07-09-84

Conditions of approval: HIPARY Recommended, prior to drilling out surface casing shoe, the Ram-Type Preventers should be pressure tested to 2400 psi, & Annular-Type Preventer be tested to 1500 psi.

*See Instructions On Reverse Side

APPROVED FOR UNIT PURPOSES ONLY

State OG+M
UT-080-4-M-220

June 28, 1984

Wexpro Company
P. O. Box 458
Rock Springs, Wyoming 82902

RE: Well No. Island Unit #17
SESW Sec. 2, T. 10S, R. 19E
563' FSL, 1954' FUL
Uintah County, Utah

Gentlemen:

Approval to drill the above referenced gas well is hereby granted in accordance with Section 40-6-13, Utah Code Annotated, as amended 1983; and predicated on Rule A-3, General Rules and Regulations and Rules of Practice and Procedure, subject to the following stipulations:

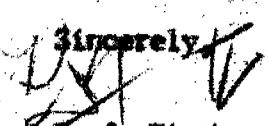
1. Prior to commencement of drilling, receipt by the Division of evidence providing assurance of an adequate and approved supply of water.

In addition, the following actions are necessary to fully comply with this approval:

1. Spudding notification to the Division within 24 hours after drilling operations commence.
2. Submittal to the Division of completed Form OGC-6-X, Report of Water Encountered During Drilling.
3. Prompt notification to the Division should you determine that it is necessary to plug and abandon this well. Notify John R. Beza, Petroleum Engineer, (Office) (801) 533-5771, (Home) 298-7695 or R. J. Firth, Associate Director, (Home) 571-6068.
4. This approval shall expire one (1) year after date of issuance unless substantial and continuous operation is underway or an application for an extension is made prior to the approval expiration date.

The API number assigned to this well is 43-047-31503.

Sincerely,


R. J. Firth
Associate Director, Oil & Gas

RJF/as
cc: State Lands
Branch of Fluid Minerals
Enclosures

DIVISION OF OIL, GAS AND MINING

SPUDDING INFORMATION

API #43-047-31503

NAME OF COMPANY: WEXPRO

WELL NAME: ISLAND UNIT #17

SECTION SESW 2 TOWNSHIP 10S RANGE 19E COUNTY Uintah

DRILLING CONTRACTOR All Western

RIG # 3

SPUDED: DATE 8-9-84

TIME 4:00 PM

HOW Rotary

DRILLING WILL COMMENCE _____

REPORTED BY Lee Martin

TELEPHONE # 307-382-9791

DATE 8-10-84 SIGNED AS

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

ML-11004

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

-

SUNDRY NOTICES AND REPORTS ON WELLS

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

7. UNIT AGREEMENT NAME

Island

8. FARM OR LEASE NAME

Unit

9. WELL NO.

17

10. FIELD AND POOL, OR WILDCAT

Island

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

2-10S-19E

12. COUNTY OR PARISH 13. STATE

Uintah

Utah

1. OIL WELL GAS WELL OTHER

RECEIVED

2. NAME OF OPERATOR

Wexpro Company

AUG 21 1984

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs WY 82902

DIVISION OF OIL
GAS & MINING

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

SE SW, 563' FSL, 1954' FWL

14. PERMIT NO.

43-047-31503

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

GR 5030' as graded

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Supplemental History

(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.)*

SPUDED 8-9-84 at 1:26 P.M.

Depth 1400', drilling.

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

SIGNED

A. J. Mauer

TITLE

Drilling Superintendent

DATE

8-15-84

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

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

5. LEASE DESIGNATION AND SERIAL NO. ML-11004	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME --	
7. UNIT AGREEMENT NAME Island	
8. FARM OR LEASE NAME Unit	
9. WELL NO. 17	
10. FIELD AND POOL, OR WILDCAT Island	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2-10S-19E	
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
Wexpro Company

3. ADDRESS OF OPERATOR
P. O. Box 458, Rock Springs, WY 82902

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

SE SW, 563' FSL, 1954' FWL

14. PERMIT NO.
43-047-31503

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
GR 5030' as graded KB 5045.50'

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) Supplemental History <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.)*

TD 6680' reached 8-25-84. Rig released 3:30 P.M., 8-27-84. Waiting on completion tools.

Landed 9-5/8-inch O.D., 36-pound, K-55, 8 round thread, ST&C casing at 327.58 feet or 15.50 feet below KB. Pumped 20 barrels gelled water ahead of cement. Cemented casing using 165 sacks Regular G with 2% gel treated with 3% D-44 and 1/4-pound flocele per sack. Returned cement to surface. Cement in place at 8:00 P.M., 8-11-84.

Landed 5-1/2-inch O.D., 17-pound, K-55, 8 round thread, LT&C casing at 6663.64 feet KBM or 15.50 feet below KB. Circulated casing 1 1/2 hours prior to cementing operations. Good returns while circulating. Cemented casing with 350 sacks Dowell Highlift cement treated with 3% D-44 and 2% D-46. Tailed in with 850 sacks Dowell RFC cement treated with 5 pounds per sack D-42 and 2% D-46. Good returns while mixing and into 70 barrels displacement. Lost all returns. Pumped remaining displacement at 1.5 BPM. Bumped plug with 3700 psi, 500 over displacement pressure. Bumped plug with 2 1/2 barrels over displacement of 156.3 barrels. Cement in place at 10:35 A.M., 8-27-84. Set full casing weight of 120,000 pounds on slips.

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

SIGNED A.J. Maser TITLE Drilling Superintendent DATE August 28, 1984

(This space for Federal or State office use)

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

BLOW OUT PREVENTION TEST

NAME OF COMPANY: Wexpro-celcius

WELL NAME: ????????????

SECTION: 2 TOWNSHIP 10S. RANGE 19 E. COUNTY: Uintah

DRILLING CONTRACTOR: Allwestern

RIG # _____

BOP TEST: DATE: 8-29-84

TIME: 10:00 P.M.

DRILLING: _____

CASING: _____

H₂S: _____

REPORTED BY: Candy from Rebel Testers Ogden, Ut

TELEPHONE NO. _____

DATE: 8-29-84 SIGNED D.J.

RECEIVED

SEP 5 1984

REBEL TESTERS
P. O. BOX 4036
OGDEN, UTAH 84403
(801) 479-6233

DIVISION OF OIL
GAS & MINING

801-781-2487
Vernal, Utah

Date 8-30-84

Co. Calsius Energy Co.
Lease & Well # Island Unit #17 County & State UTAH, UTAH
Sec. 2 T.S. 10-S Range 19-E
Field _____ Rig Allwestern #3

Operator & Equipment to Test Following _____

Hydrill	<u>1500</u>	PSI	Choke Manifold	<u>2500</u>	PSI
Upper Rams	<u>N/A</u>	PSI	H.C.R. Valve	<u>2500</u>	PSI
Lower Rams	<u>2500</u>	PSI	Manual Valve	<u>2500</u>	PSI
Blind Rams	<u>2500</u>	PSI	Upper Kelly Valve	<u>2500</u>	PSI
Casing	<u>2500</u>	PSI	Lower Valve	<u>2500</u>	PSI

Other TJV Valve, 2000 ~~NOT TEST~~ Joint Connection _____

Remarks Arrived on location at 10:00pm and began test at the choke manifold, waited on rig to get up and finished test at 10:00am.

Test BOP Stack 8 hour Minimum				<u>\$900⁰⁰</u>
Test Plug Used	<u>10" National 4 1/2 XH</u>			<u>\$100⁰⁰</u>
Test Subs Used		@	each	
Test Seals		@	each	
Special X over Subs		@	each	<u>\$200⁰⁰</u>
Additional Hours	<u>4</u>	@	<u>100⁰⁰ 50⁰⁰</u> Each	<u>\$400⁰⁰</u>
<u>84</u> Miles @	<u>1.00</u>		each	<u>\$84⁰⁰</u>
Operator <u>Scott Smith</u>	Unit No. <u>1</u>		Total	<u>\$1284⁰⁰</u>

Prices Subject to Correction by Bookkeeping Dept. \$1284⁰⁰

Customers Signature [Signature]
Customers Order No. _____

Thank you!

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

MIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. ML-11004
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs WY 82902		7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SW, 563' FSL, 1954' FWL		8. FARM OR LEASE NAME Unit
14. PERMIT NO. 43-047-31503	15. ELEVATIONS (Show whether OF, RT, GR, etc.) GR 5030' as graded KB 5045.50'	9. WELL NO. 17
		10. FIELD AND POOL, OR WILDCAT Island
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA 2-10S-19E
		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"/>	FULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Supplemental History</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.)***

TD 6680' reached 8-25-84, in the process of completing well.

RECEIVED

OCT 30 1984

**DIVISION OF OIL
GAS & MINING**

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

SIGNED *Lee Martin* TITLE Asst. Drilling Supt. DATE 10-26-84

(This space for Federal or State office use)

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

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

SUBMIT IN DUPLICATE*
(See other instructions
on reverse side)

14

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

5. LEASE DESIGNATION AND SERIAL NO.
ML-11004

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Island

8. FARM OR LEASE NAME
Unit

9. WELL NO.
17

10. FIELD AND POOL, OR WILDCAT
Island Natural Butte

11. SEC. T. R., M., OR BLOCK AND SURVEY OR AREA
2-10S-19E

RECEIVED
NOV 20 1984

DIVISION OF
OIL, GAS & MINING

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

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

2. NAME OF OPERATOR
Wexpro Company

3. ADDRESS OF OPERATOR
P. O. Box 458, Rock Springs, WY 82902

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface SE SW, 563' FSL, 1954' FWL
At top prod. interval reported below
At total depth

14. PERMIT NO. 43-047-31503 DATE ISSUED 6-28-84

12. COUNTY OR PARISH Uintah 13. STATE Utah

15. DATE SPUNDED 8-9-84 16. DATE T.D. REACHED 8-25-84 17. DATE COMPL. (Ready to prod.) 10-18-84

18. ELEVATIONS (DF, REB, RT, OR, ETC.)* GG 5030' KB 5045.5'

19. ELEV. CASINGHEAD --

20. TOTAL DEPTH, MD & TVD 6680' 21. PLUG, BACK T.D., MD & TVD 6556'

22. IF MULTIPLE COMPL., HOW MANY* --

23. INTERVALS DRILLED BY -- ROTARY TOOLS 330-6680' CABLE TOOLS 0-330'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
5978-6522' - Wasatch

25. WAS DIRECTIONAL SURVEY MADE
No

26. TYPE ELECTRIC AND OTHER LOGS RUN
Dual Guard, DEN, ACB, CSNG, TMD

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	327.58	12-1/4	165 sx Reg G/w 2% gel & 3% D-44 & 1/2# flocele/sx	
5-1/2	17	6663.64	7-7/8	350 sx Dowell Hi-lift w/ additives & 850 sx Dowell RFC w/ additives	

29. LINER RECORD

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

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8	5891.18	--

31. PERFORATION RECORD (Interval, size and number)

6456-6522' - 21 holes
5978-6044' - 20 holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6456-6522'	96,800 gal YF4G gel w/24,000# 100 mesh & 155,000# 20/40 mesh
5978-6044'	90,000 gal YF4G gel w/22,500# 100 mesh & 167,500# 20/40 mesh

33. PRODUCTION

DATE FIRST PRODUCTION 10-8-84 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Shut-in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
10-18-84	7	1 1/2"	→	--	608	--	--

FLOW. TUBING PRBS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
110	800	→	--	1836	--	--

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Vented

TEST WITNESSED BY
R. C. Christofferson

35. LIST OF ATTACHMENTS

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

SIGNED Thomas H. G. [Signature] TITLE Director, Petroleum Eng. DATE 11-14-84

*(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.)

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
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			
38. GEOLOGIC MARKERS			
	MEAS. DEPTH	TOP	TRON VERT. DEPTH
Uinta Green River Birds Nest Aquifer Wasatch Tongue Green River Tongue Wasatch Chapita Wells Zone	Surface 1,401 2,278 4,453 4,825 5,010 5,768		



United States Department of the Interior

BUREAU OF LAND MANAGEMENT
VERNAL DISTRICT OFFICE
170 South 500 East
Vernal, Utah 84078

RECEIVED
JUN 04 1986

IN REPLY
REFER TO:

3162.51
Oil and Gas Leases
ML-11004
(U-8020)

DIVISION OF
OIL, GAS & MINING

June 2, 1986

Jennifer Head
Regulatory Affairs Administrator
Wexpro Company
P.O. Box 458
Rock Springs, Wyoming 82901

Re: NTL-2B Approval for Pits
at Island Unit Wells in
Sec. 2, T. 10 S., R. 19 E.
Uintah County, Utah

Dear Jennifer:

Recently we received your requests to dispose of produced water into unlined pits at the following locations:

Island Unit No. 17 in SE $\frac{1}{4}$ SW $\frac{1}{4}$ Sec. 2, T.10S., R.19E. On lease
ML-11004 (State Lease, BLM Surface)
Island Unit No. 18 in SE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec. 2, T.10S., R.19E. On lease
ML-11004 (State Lease, BLM Surface)

We have a tentative agreement with the Utah Division of Oil, Gas and Mining that the State has NTL-2B primary jurisdiction over State Mineral Leases, such as ML-11004. The Division of Oil, Gas and Mining is in the process of acquiring jurisdiction over most of the smaller NTL-2B pits from the Division of Water Pollution Control.

We are requesting that you contact the State of Utah, Division of Oil, Gas and Mining with regard to an NTL-2B approval for these two wells and for Well No. 26 you are currently in the process of completing. You may contact John Baza of their office at (801) 538-5340 regarding questions related to applying for these approvals from them.

Sincerely,

Paul M. Andrews
Area Manager
Bookcliffs Resource Area

cc: State of Utah, Division of Oil, Gas and Mining

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

071713

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. ML-110044
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SW, 563' FSL, 1954' FWL		8. FARM OR LEASE NAME Unit
14. PERMIT NO. 43-047-31503	15. ELEVATIONS (Show whether of, ft. or, etc.) GR 5030'	9. WELL NO. 17
		10. FIELD AND POOL, OR WILDCAT Island
		11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA 2-10S-19E
		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) Approval for Disposal Pits <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.)*

Wexpro Company requests permission to dispose of produced water into two unlined disposal pits located on the wellsite of the above captioned well. Pit No. 1 which is 12'X12'X6' will receive no more than five barrels of water per day on a monthly basis. Pit No. 2 which is a submerged barrel 3' X 6' will receive no more than a trace of water per day. The producing formation of the above captioned well is the Wasatch formation. Both pits are fully contained on the well location and no new surface disturbance was created. Pit No. 1 is fenced and bermed.

Please see attached schematic for further reference.

*No action...
Health Dept.*

RECEIVED
JUL 11 1986

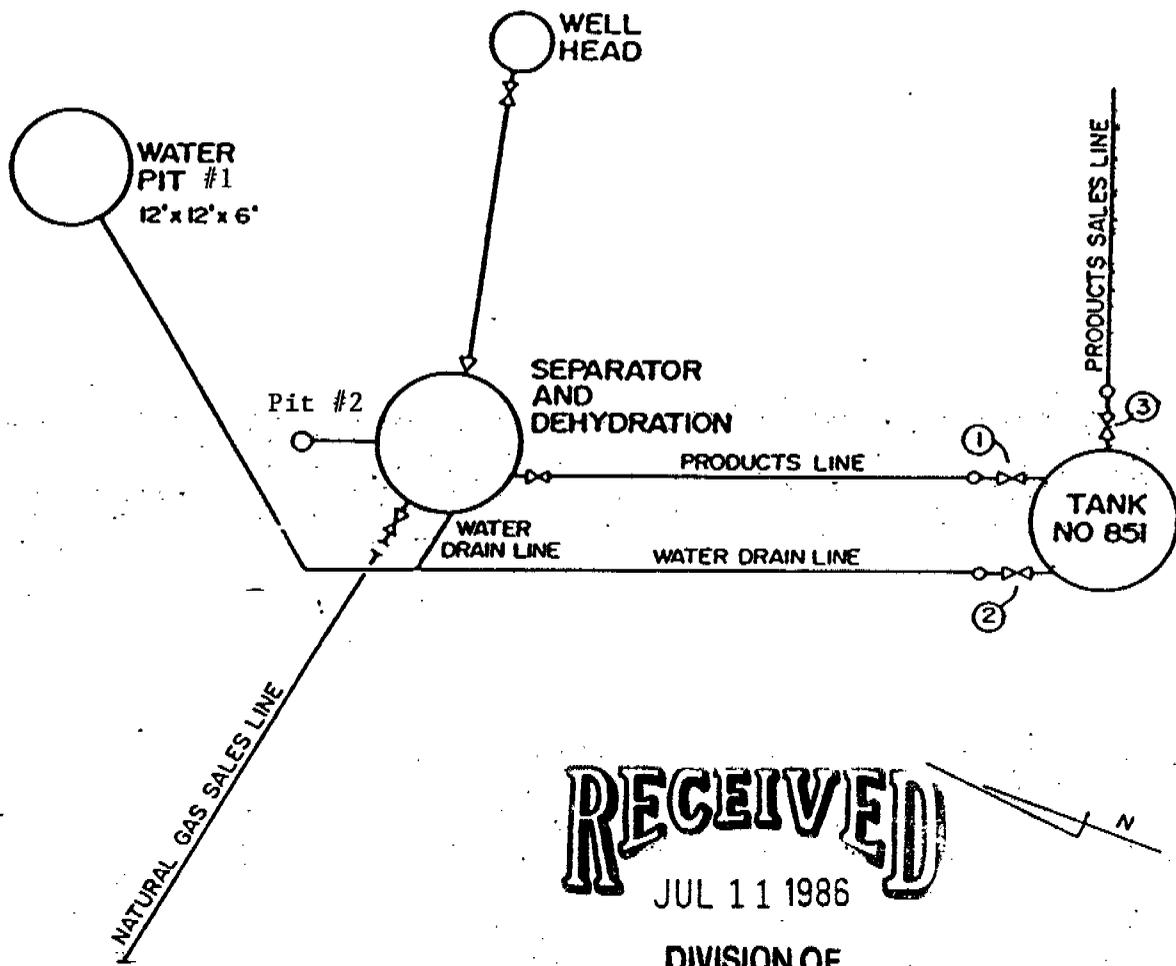
DIVISION OF
OIL, GAS & MINING

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

SIGNED *H.K. Logan* TITLE District Manager DATE June 26, 1986

(This space for Federal or State office use)

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



RECEIVED
 JUL 11 1986

DIVISION OF
 OIL, GAS & MINING

LEGEND

- |—|— GAS METER
- ◁— CHOKE
- ◇— VALVE
- SEAL
- INTERMITTENT WATER VAPOR LINE

VALVE NO.	PROD.	SALES	VALVE NO.	PROD.	SALES
1	OPEN	CLOSED			
2	CLOSED	CLOSED			
3	CLOSED	OPEN			

Rev. 10/2/85

OPERATOR: WEXPRO
LEASE NO.: ML - 11004 TYPE: FEDERAL
NAME: ISLAND UNIT NO. 17
SEC. SE SW SEC. 2 T. 10S R. 19E
COUNTY: UTAH
STATE: UTAH
INITIAL PRODUCTION:

SITE SECURITY DIAGRAM	
ISLAND UNIT WELL NO. 17	
DRAWN:	SCALE:
CHECKED:	DRAWING NO. M-24704

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

SUBMIT IN TRIPLICATE*
 (Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-110044
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SW, 563' FSL, 1954' FWL		8. FARM OR LEASE NAME Unit
14. PERMIT NO. 43-047-31503		9. WELL NO. 17
15. ELEVATIONS (Show whether OF, NT, GR, etc.) GR 5030'		10. FIELD AND POOL, OR WILDCAT Island
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2-10S-19E
		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>Approval for Disposal Pits</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.) *

Wexpro Company requests permission to dispose of produced water into two unlined disposal pits located on the wellsite of the above captioned well. Pit No. 1 which is 12'X12'X6' will receive no more than five barrels of water per day on a monthly basis. Pit No. 2 which is a submerged barrel 3' X 6' will receive no more than a trace of water per day. The producing formation of the above captioned well is the Wasatch formation. Both pits are fully contained on the well location and no new surface disturbance was created. Pit No. 1 is fenced and bermed.

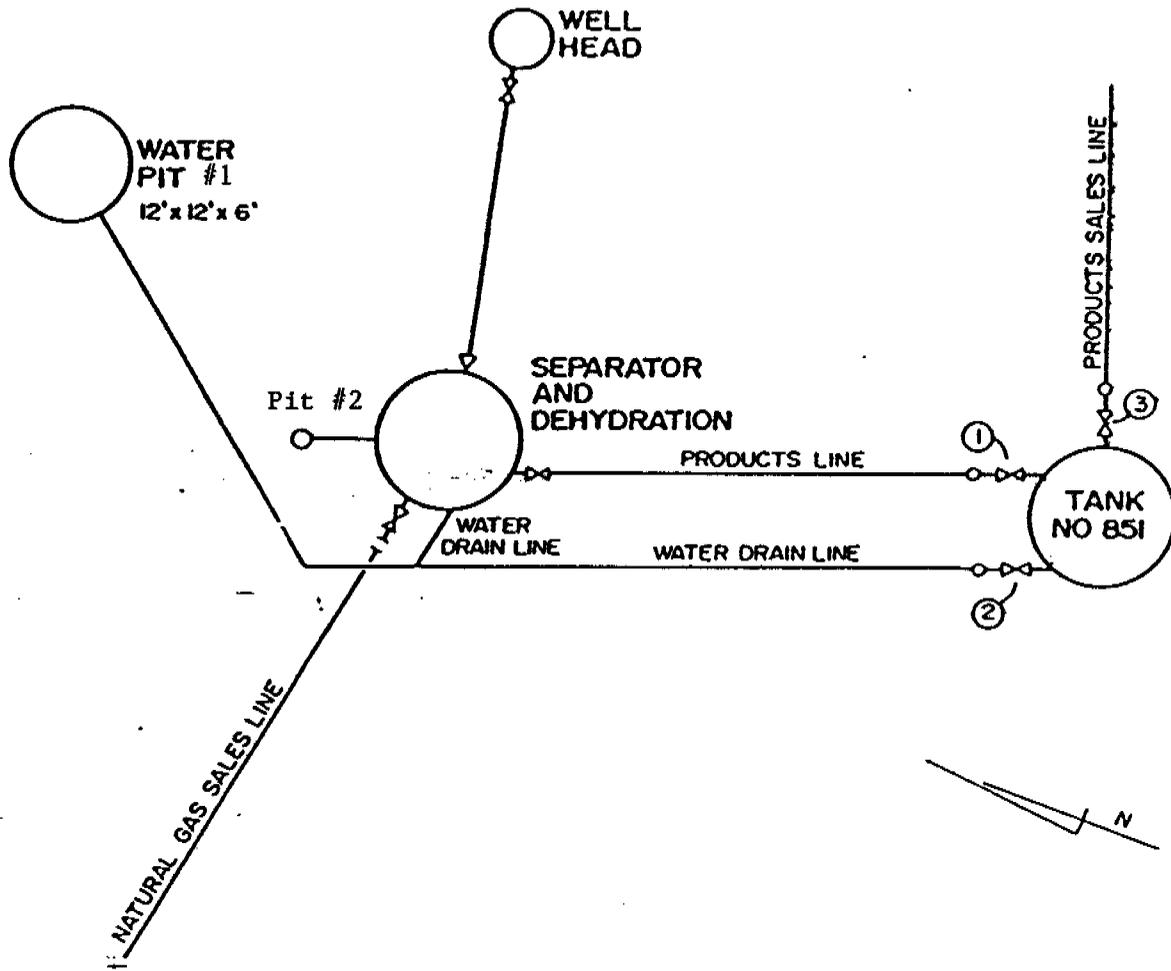
Please see attached schematic for further reference.

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

SIGNED *Al K. [Signature]* TITLE District Manager DATE June 26, 1986

(This space for Federal or State office use)

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



LEGEND

- |—|— GAS METER
- ◁— CHOKE
- X— VALVE
- SEAL
- INTERMITTENT WATER VAPOR LINE

VALVE NO.	PROD.	SALES	VALVE NO.	PROD.	SALES
1	OPEN	CLOSED			
2	CLOSED	CLOSED			
3	CLOSED	OPEN			

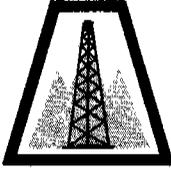
Rev. 10/2/85

OPERATOR: WEXPRO
 LEASE NO.: ML - 11004 TYPE: FEDERAL
 NAME: ISLAND UNIT NO. 17
 SEC. SE SW SEC. 2 T. 10S R. 19E
 COUNTY: Uintah
 STATE: UTAH
 INITIAL PRODUCTION:

SITE SECURITY DIAGRAM

ISLAND UNIT WELL
 NO. 17

DRAWN: SCALE:
 CHECKED: DRWG. M-24704



WEXPRO COMPANY

625 CONNECTICUT AVENUE • P.O. BOX 1129 • ROCK SPRINGS, WYOMING 82901 • (307) 362-5611

December 9, 1986

RECEIVED
DEC 12 1986

State of Utah
Department of Natural Resources
Division of Oil, Gas and Mining
355 West North Temple
Salt Lake City, Utah 84180

DIVISION OF
OIL, GAS & MINING

Gentlemen:

Please advise of the status of the attached sundry notices which were mailed to you in June, 1986 regarding approval of disposal pits on Island Unit Wells No. 17 and 18.

Sincerely,

Cathy J. Flansburg
Regulatory Affairs Technician

CJF
Attachments



STATE OF UTAH
 NATURAL RESOURCES
 Oil, Gas & Mining

122409

Norman H. Bangerter, Governor
 Dee C. Hansen, Executive Director
 Dianne R. Nielson, Ph.D., Division Director

355 W. North Temple • 3 Triad Center • Suite 350 • Salt Lake City, UT 84180-1203 • 801-538-5340

December 19, 1986

Ms. Cathy J. Flansburg
 Wexpro Company
 P.O. Box 1129
 Rock Springs, WY 82901

Dear Ms. Flansburg:

RE: Request for Approval of Disposal Pits

*API No 4304731503
 Sec 2. T 10 & R. 19E.*

In response to your recent letter dated December 9, 1986; your original sundry notices requesting approval to dispose of produced water into unlined pits at Island Unit Wells No. 17 and 18 were received in this office on July 11, 1986. The regulations and approval authority for surface disposal of produced water currently exist with the Bureau of Water Pollution Control (BWPC), Utah Division of Environmental Health. Upon receipt of your sundry notices, they were copied for our well records, but the originals were forwarded to the BWPC for consideration. It is suggested that you contact the BWPC regarding any administrative action which may have been taken.

It is anticipated that the produced water surface disposal authority will soon be transferred to this Division; however, for the time being, you must handle all matters of this type with the BWPC. I apologize for any confusion this may have caused.

Sincerely,

John R. Baza
 John R. Baza
 Petroleum Engineer

cc: D.R. Nielson
 R. J. Firth
 ✓ Well files
 0258T-64



United States Department of the Interior

BUREAU OF LAND MANAGEMENT
VERNAL DISTRICT OFFICE
170 SOUTH 500 EAST
VERNAL, UTAH 84078



031813

IN REPLY REFER TO:

3162.32
UT08581
Oil and Gas
ML-11004,
U-013768,
U-4482,
U-4484

RECEIVED
FEB 22 1988

DIVISION OF
OIL, GAS & MINING

COPY

Ms. Cathy J. Flansberg
Coordinator Regulatory Affairs
Wexpro Company
625 Connecticut Avenue
- P.O. Box 458
Rock Springs, Wyoming 82902

Re: Request for NTL-2B Application Status
Island Unit Wells ~~17~~, ~~18~~, ~~26~~, and ~~29~~
in Sec. 2, T.10S., R.19E;
Wells ~~19~~, ~~22~~, and ~~22~~
in Sec. 8 and 9 T.10S., R.20E;
Well ~~30~~ in Sec. 12, T.10S., R.19E.
Uintah County, Utah

Dear Ms. Flansberg:

We have reviewed the status of your applications for NTL-2B water disposal facilities for the above wells as you requested in your letter of January 12, 1988. The pit at the Island Unit Well No. 22 was approved in a letter to your office dated August 8, 1986. The pit at Well No. 19 was recently inspected and found to be adequate. It is approved subject to the guidelines and requirements provided for in Section V, NTL-2B.

Requests for unlined water disposal pits at Island Unit Wells No. 20 and No. 32 were denied in a letter to your office dated March 13, 1987. This letter indicated that pits at these two locations should be lined. Please notify this office when these pits have been lined and what lining material was used. We will then inspect the pits for NTL-2B approval as soon as schedules permit.

The Island Unit Wells No. 17, 18, 26, and 29 all on Lease ML-11004 are under the jurisdiction of the State of Utah, Division of Oil, Gas, and Mining for NTL-2B approval. You should contact the State of Utah, Division of Oil, Gas, and Mining regarding your applications for NTL-2B approval for these wells.

N1670

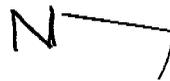
- #22 43-047-31632-S6W/WSTC
- #19 43-047-31633-S6W/WSTC
- #17 43-047-31503-S6W/WSTC 10S19E 2
- #29 43-047-31752-S6W/WSTC
- #30 43-047-31749-S6W/WSTC
- #26 43-047-31701-S6W/WSTC
- #18 43-047-31502-S6W/WSTC
- #32 43-047-31751-S6W/WSTC

If you have questions on the above please contact Keith Chapman or Jim Piani at (801) 789-1362.

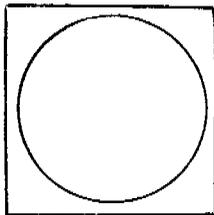
Sincerely,

Karl J Wright
For Paul M. Andrews
Area Manager
Bookcliffs Resource Area

cc: Jim Baza
State of Utah
Division of Oil, Gas, and Mining
355 West North Temple
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203



access
road



tank w/
firewall



dehydrator



emergency
pit

○ well head.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. LEASE DESIGNATION AND SERIAL NO.
SEE ATTACHED SHEET

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NA

7. IF UNIT OR CA, AGREEMENT DESIGNATION
ISLAND

8. WELL NAME AND NO.

SEE ATTACHED SHEET

9. API WELL NO.
SEE ATTACHED SHEET

10. FIELD AND POOL, OR EXPLORATORY AREA
ISLAND

11. COUNTY OR PARISH, STATE

43-047-31503 UINTAH COUNTY, UTAH

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE ATTACHED SHEET

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

TYPE OF SUBMISSION

Notice of Intent
 Subsequent Report
 Final Abandonment Notice

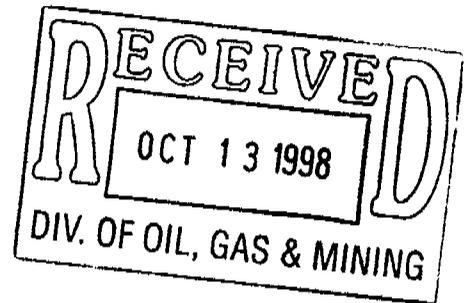
TYPE OF ACTION

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

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

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

Wexpro Company is required as a Condition of Approval on Sundry Notices approving installation of blowdown tanks on Island Unit Wells No. 21, 25, 26, 27 and 30, to notify the BLM of the name and location of the facility to be used to dispose of produced water. Please note that all excess produced water is hauled by tank truck over Unit, Tribal, County and State roads to the Ace Disposal Pit which is approved by the State of Utah. Attached is a list of all wells in the Island Unit. Produced water from any of these wells may be hauled to the Ace Pit.



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

Signed

[Signature]

Title

G. T. Nimmo, Operations Manager

Date

October 9, 1998

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

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

*See Instruction on Reverse Side

WELL NAME and FIELD	API NUMBER	TYPE WELL	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER	PRODUCING FORMATION	BWPD	NTL-2B (CRITERIA)	PIT SIZE	NTL-2B SUBMITTED	NTL-2B APPROVED	SITE-SECURITY REVISION
ISLAND UNIT					891006935A								
UNIT NO. 3	4304715843	WAG	NE SW 8-10S-20E	UINTAH, UT		U-4486	WASATCH	TRACE	4	24X25X4	6-18-84	7-27-84	04-27-95
UNIT NO. 9	4304730488	WAG	C SW 11-10S-19E	UINTAH, UT		U-4481	WASATCH	0.02	4	18X12X4	4-22-80	5-9-80	8-10-90
UNIT NO. 11	4304731241	WAG	SE NW 11-10S-19E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 12	4304731242	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	0.02	4	18X20X8	6-18-84	7-27-84	8-10-90
UNIT NO. 13	4304731239	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH	4.00	4	16X20X5	5-13-86	6-4-86	
UNIT NO. 14	4304731331	WAG	NE SE 8-10S-20E	UINTAH, UT		U-4486	WASATCH	TRACE	4	BARREL	6-18-84	7-27-84	8-10-90
UNIT NO. 15	4304731330	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4482	WASATCH	0.57	4	12X12X4	5-13-86	6-4-86	05-27-98
UNIT NO. 16	4304731505	C/O	NE SW 11-10S-18E	UINTAH, UT		U-013818	GREEN RIVER	TRACE	4	BARREL	6-18-84	7-27-84	8-10-90
UNIT NO. 17	4304731503	WAG	SE SW 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	1.00	4	24X24X8	5-13-86	6-4-86	
UNIT NO. 18	4304731502	WAG	SE NW 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	0.25	4	8X10X3	3-13-85	8-20-87	3-3-88
UNIT NO. 19	4304731633	WAG	SE SW 9-10S-20E	UINTAH, UT		U-013788	WASATCH	EMRG	4	12X12X6	6-28-86**	NO ST. RESP.	8-20-90
UNIT NO. 20	4304731629	WAG	SW NW 7-10S-20E	UINTAH, UT		U-4482	WASATCH	EMRG	4	12X12X4	6-28-86**	NO ST. RESP.	07-14-98
UNIT NO. 21	4304731628	WAG	NW NW 12-10S-19E	UINTAH, UT		U-4484	WASATCH	EMRG	4	10X10X8	5-8-86	8-8-86	7-28-88
UNIT NO. 22	4304731632	WAG	SE SE 9-10S-20E	UINTAH, UT		U-013788	WASATCH	TRACE	4	7X28X4	7-14-86	8-8-86	
UNIT NO. 23	4304731631	WAG	NE NE 9-10S-20E	UINTAH, UT		U-013788	WASATCH	TRACE	4	BARREL	7-14-86	8-8-86	
UNIT NO. 24	4304731630	WAG	SW NW 8-10S-20E	UINTAH, UT		U-4482	WASATCH	3.50	4	14X12X8	1-20-86	2-10-86	1-20-86
UNIT NO. 25	4304731702	WAG	NW NE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	TRACE	4	9X8X3	1-20-86	2-10-86	
UNIT NO. 26	4304731701	WAG	SE SE 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	TRACE	4	BARREL	1-20-86	2-10-86	
UNIT NO. 27	4304731703	WAG	NE NW 9-10S-20E	UINTAH, UT		U-013788	WASATCH	EMRG	4	12X12X8	5-8-86	6-4-86	7-28-88
UNIT NO. 29	4304731752	WAG	SE NE 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	TRACE	4	11X11X3	5-8-86	6-4-86	
UNIT NO. 30	4304731749	WAG	NW NE 12-10S-19E	UINTAH, UT		U-4484	WASATCH	TRACE	4	BARREL	5-8-86	6-4-86	
UNIT NO. 32	4304731751	WAG	SW NE 8-10S-20E	UINTAH, UT		U-4482	WASATCH	TRACE	4	BARREL	7-15-86	8-8-86	05-27-98
UNIT NO. 34	4304732962	WAG	NE SE 8-10S-20E	UINTAH, UT		U-4486	WASATCH	TRACE	4	13X6X5	8-22-86	9-15-88	
UNIT NO. 35	4304732963	WAG	NE SE 8-10S-20E	UINTAH, UT		U-013788	WASATCH	TRACE	4	BARREL	7-14-86	8-8-86	1-20-86
UNIT NO. 36	4304732964	WAG	SE SE 9-10S-20E	UINTAH, UT		14-20-482-391	WASATCH	3.70	4	16X9X5	7-14-86	8-8-86	1-20-86
UNIT NO. 37	4304732966	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4483	WASATCH	TRACE	4	5X9X4	7-14-86	8-8-86	
UNIT NO. 38	4304733107	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH	TRACE	4	BARREL	7-14-86	8-8-86	
UNIT NO. 39	4304732967	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4484	WASATCH	1.50	4	11X8X7	1-20-86	2-10-86	1-20-86
UNIT NO. 41	4304732968	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	1-20-86	2-10-86	
UNIT NO. 43	4304732965	WAG	SE SE 9-10S-20E	UINTAH, UT		U-013788	WASATCH	TRACE	4	BARREL	1-5-87	4-28-87	8-22-88
UNIT NO. 44	4304732969	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4483	WASATCH	5.00	4	21X23X5	1-5-87	4-28-87	
UNIT NO. 45	4304732960	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4483	WASATCH	TRACE	4	BARREL	1-5-87**	NO ST. RESP.	8-22-88
UNIT NO. 46	4304732961	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4482	WASATCH	5.00	4	24X26X5	1-5-87**	NO ST. RESP.	8-22-88
UNIT NO. 48	4304733106	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4482	WASATCH	TRACE	4	BARREL	1-5-87	4-28-87	8-22-88
UNIT NO. 50	4304733109	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH	5.00	4	15X21X10	11-9-88	12-21-88	
UNIT NO. 51	4304733110	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	07-14-98
UNIT NO. 52	4304733111	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	5.00	4	16X16X6	2-17-87	3-13-87	
UNIT NO. 53	4304733112	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	12-1-87
UNIT NO. 54	4304733113	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	5.00	4	16X16X6	11-9-88	12-21-88	
UNIT NO. 55	4304733113	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	10-07-91
UNIT NO. 56	4304732962	WAG	NE SE 8-10S-20E	UINTAH, UT		U-4486	WASATCH	5.00	4	16X16X6	11-9-88	12-21-88	
UNIT NO. 57	4304732963	WAG	NE SE 8-10S-20E	UINTAH, UT		U-013788	WASATCH						05-27-98
UNIT NO. 58	4304732964	WAG	SE SE 9-10S-20E	UINTAH, UT		14-20-482-391	WASATCH						05-27-98
UNIT NO. 59	4304732966	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4483	WASATCH			NO PIT			05-27-98
UNIT NO. 60	4304733107	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			05-15-98
UNIT NO. 61	4304732967	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4484	WASATCH			NO PIT			
UNIT NO. 62	4304732968	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4481	WASATCH			NO PIT			05-15-98
UNIT NO. 63	4304732965	WAG	SE SE 9-10S-20E	UINTAH, UT		U-013788	WASATCH			NO PIT			05-27-98
UNIT NO. 64	4304732969	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4483	WASATCH			NO PIT			05-27-98
UNIT NO. 65	4304732960	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4483	WASATCH			NO PIT			05-27-98
UNIT NO. 66	4304732961	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4482	WASATCH			NO PIT			05-27-98
UNIT NO. 67	4304733106	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4482	WASATCH			NO PIT			05-27-98
UNIT NO. 68	4304733109	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			
UNIT NO. 69	4304733110	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			
UNIT NO. 70	4304733111	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			
UNIT NO. 71	4304733112	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			
UNIT NO. 72	4304733113	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			

WELL NAME and FIELD	API NUMBER	TYPE WELL	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER	PRODUCING FORMATION	BWPD	NTL-2B (CRITERIA)	PIT SIZE	NTL-2B SUBMITTED	NTL-2B APPROVED	SITE-SECRTY REVISED
UNIT NO. 58	4304733114	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			

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 to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE BELOW

43.047.31503

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. LEASE DESIGNATION AND SERIAL NO.

SEE BELOW

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. IF UNIT OR CA, AGREEMENT DESIGNATION

ISLAND

8. WELL NAME AND NO.

ISLAND UNIT WELLS

9. API WELL NO.

SEE BELOW

10. FIELD AND POOL, OR EXPLORATORY AREA

ISLAND

11. COUNTY OR PARISH, STATE

UINTAH COUNTY, UTAH

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

TYPE OF SUBMISSION

Notice of Intent
 Subsequent Report
 Final Abandonment Notice

TYPE OF ACTION

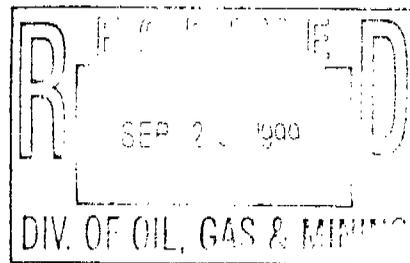
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 Other ELECTRONIC MEASUREMENT
 Change in Plans
 New Construction
 Non-Routine Fracturing
 Water Shut-Off
 Conversion to Injection
 Dispose Water

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

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

On all wells in the Island Unit, with the exception of Island No. 23, Wexpro intends to install EGM to replace the current gas chart meters. A Fisher ROC model 364/MCU will be installed with the following Rosemount transducers, 3051CG3M52A1AT1, 3051CD2M52A1AT1 and 0444LM1U1A2E5.

See attached for the list of wells to be included in the project.



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

Signed [Signature]

G. T. Nimmo, Operations Manager

Title

Date

September 16, 1990

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

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

*See Instruction on Reverse Side

WELL NAME	PAD NO.	API NUMBER	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER
ISLAND UNIT				Unit Number	891006935A	
UNIT NO. 3		4304715643	NE SW 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 9		4304730488	C SW 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 10	8	4304730725	SW SW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 11		4304731241	SE NW 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 12	6	4304731242	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 13	5	4304731239	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 14	3	4304731331	NE SE 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 15		4304731330	SW SE 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 16		4304731505	NE SW 11-10S-18E	UINTAH, UT		U-013818
UNIT NO. 17		4304731503	SE SW 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 18		4304731502	SE NW 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 19		4304731633	SE SW 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 20	7	4304731629	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 21		4304731628	NW NW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 22	4	4304731632	SE SE 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 24		4304731630	SW NW 8-10S-20E	UINTAH, UT		U-4482
UNIT NO. 25		4304731702	NW NE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 26		4304731701	SE SE 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 27		4304731703	NE NW 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 29		4304731752	SE NE 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 30		4304731749	NW NE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 32		4304731751	SW NE 8-10S-20E	UINTAH, UT		U-4482
UNIT NO. 34	3	4304732962	NE SE 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 35	3	4304732963	NE SE 8-10S-20E	UINTAH, UT		U-013768
UNIT NO. 36	4	4304732964	SE SE 9-10S-20E	UINTAH, UT		14-20-462-391
UNIT NO. 37	1	4304732966	NW NW 8-10S-20E	UINTAH, UT		U-4483
UNIT NO. 38	5	4304733107	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 39	1	4304732967	NW NW 8-10S-20E	UINTAH, UT		U-4481
UNIT NO. 41	1	4304732968	NW NW 8-10S-20E	UINTAH, UT		U-4483
UNIT NO. 43	4	4304732965	SE SE 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 44	2	4304732959	SW SE 7-10S-20E	UINTAH, UT		U-4483
UNIT NO. 45	2	4304732960	SW SE 7-10S-20E	UINTAH, UT		U-4483
UNIT NO. 46	2	4304732961	SW SE 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 50	5	4304733108	SE SE 12-10S-19E	UINTAH, UT		U-4482
UNIT NO. 51	5	4304733109	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 52	5	4304733110	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 53	6	4304733111	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 54	6	4304733112	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 55	6	4304733113	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 56	6	4304733114	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 64	7	4304733304	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 65	7	4304733305	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 66	7	4304733306	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 67	8	4304733307	SW SW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 68	8	4304733308	SW SW 12-10S-19E	UINTAH, UT		U-4484

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

<p>SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug-back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. ML-11004</p>																				
<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p>		<p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME --</p>																				
<p>2. NAME OF OPERATOR WEXPRO COMPANY</p>		<p>7. UNIT/AGREEMENT NAME ISLAND</p>																				
<p>3. ADDRESS OF OPERATOR PHONE NUMBER P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791</p>		<p>8. FARM OR LEASE NAME ISLAND UNIT</p>																				
<p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements* See also space 17 below.) At surface 563' FSL, 1954' FWL, SE SW</p>		<p>9. WELL NO. ISLAND UNIT NO. 17</p>																				
<p>14. PERMIT NO. 43-047-31503</p>		<p>10. FIELD AND POOL, OR WILDCAT ISLAND</p>																				
<p>15. ELEVATIONS (Surface, Bottom of Pit, GR, etc.) 5030' GG</p>		<p>11. SEC., T., R., M., OR BLK AND SURVEY OR AREA 2-10S-19E</p>																				
<p>16. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <p>NOTICE OF INTENTION TO:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%;">TEST WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">PULL OR ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> </tr> <tr> <td>(Other) <input type="checkbox"/></td> <td></td> </tr> </table> </td> <td style="width: 50%; border: none;"> <p>SUBSEQUENT REPORT OF:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%;">WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREATMENT* <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT* <input type="checkbox"/></td> </tr> <tr> <td>(Other) <input type="checkbox"/></td> <td>PIT CLOSURE & FACILITY INSTALLATION <input checked="" type="checkbox"/></td> </tr> </table> <p>(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</p> </td> </tr> </table>		<p>NOTICE OF INTENTION TO:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%;">TEST WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">PULL OR ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> </tr> <tr> <td>(Other) <input type="checkbox"/></td> <td></td> </tr> </table>	TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>		<p>SUBSEQUENT REPORT OF:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%;">WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREATMENT* <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT* <input type="checkbox"/></td> </tr> <tr> <td>(Other) <input type="checkbox"/></td> <td>PIT CLOSURE & FACILITY INSTALLATION <input checked="" type="checkbox"/></td> </tr> </table> <p>(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</p>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>	FRACTURE TREATMENT* <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>	(Other) <input type="checkbox"/>	PIT CLOSURE & FACILITY INSTALLATION <input checked="" type="checkbox"/>	<p>12. COUNTY OR PARISH UINTAH</p>
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<p>13. STATE UTAH</p>																						

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.)*

Wexpro Company proposes to install one 210 barrel blowdown tank beside the existing earthen pit, dig up the existing line to the pit and tie into the tank. A containment dike will be constructed around the blowdown tank and the earthen pit will be closed. One 6' X 6' culvert pit will be installed behind the production tank to drain off water. Please refer to the attached schematic for placement of equipment and design of the culvert pit. The culvert will be placed inside the tank dike and buried five feet into the ground with one foot above ground level. The culvert pit will have an earthen bottom. The top will be covered with expanded metal.

RECEIVED

MAY 18 2000

DIVISION OF OIL, GAS AND MINING

COPY SENT TO OFFICE
Date: 6-1-00
Initials: CHD

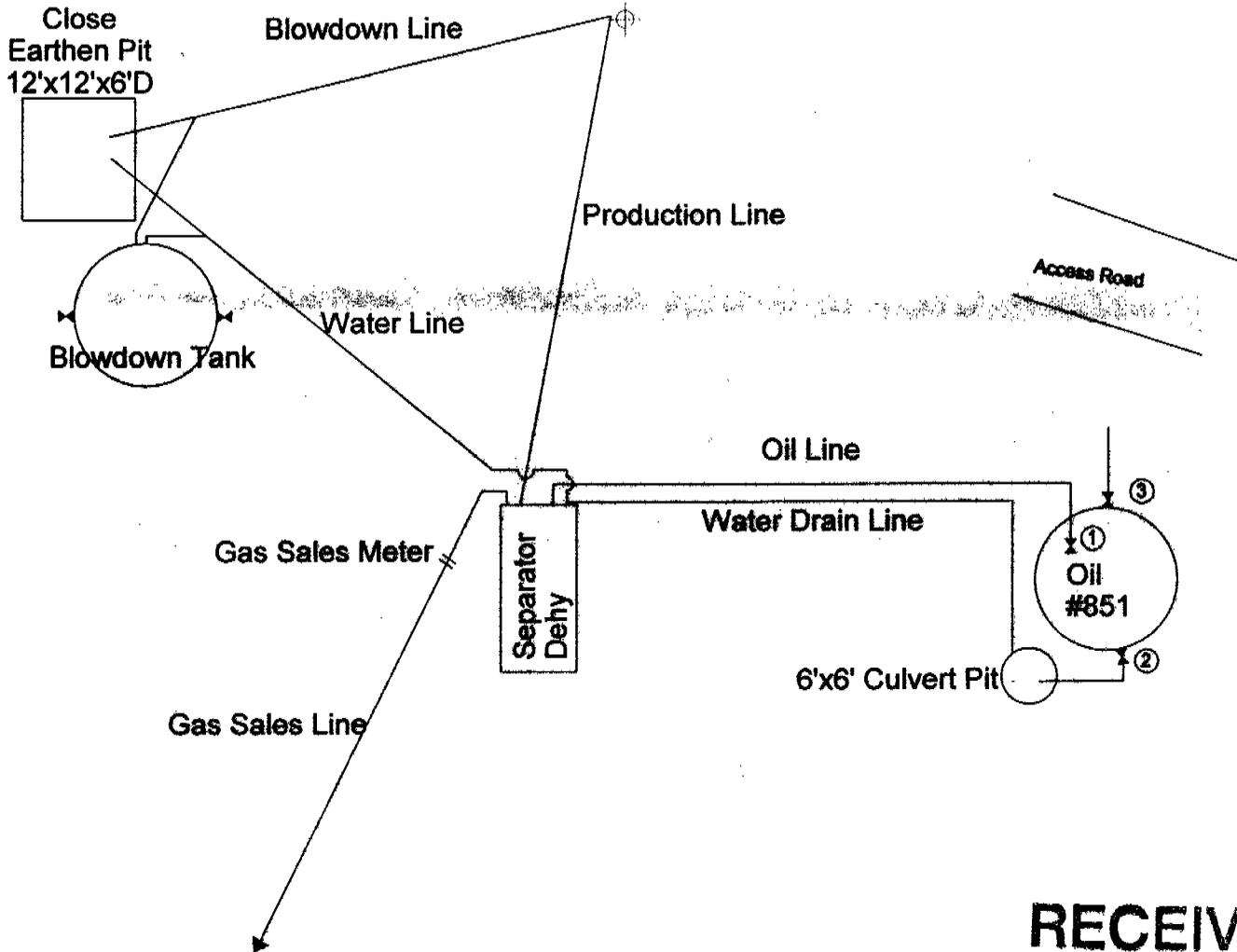
**Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY**

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

SIGNED [Signature] TITLE G. T. Nimmo, Operations Manager DATE May 16, 2000

(This space for Federal or State office use)

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



RECEIVED

MAY 18 2000

DIVISION OF
OIL, GAS AND MINING

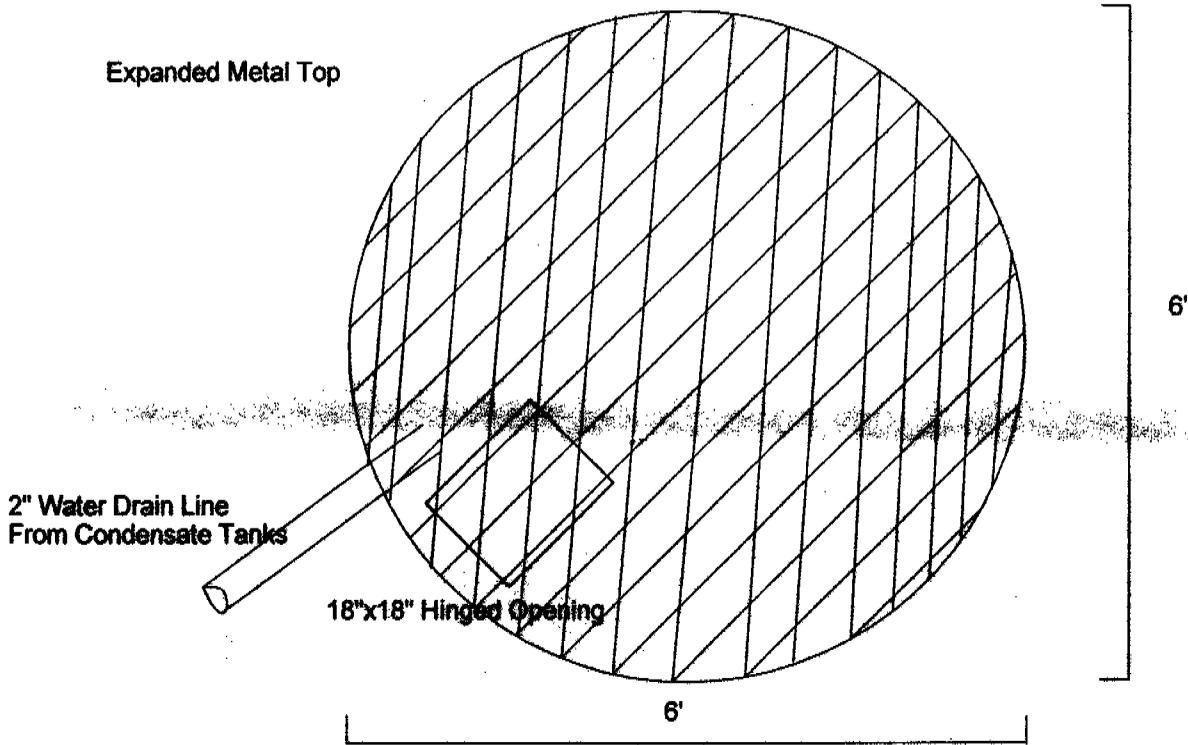
LEGEND

- ⊕ GAS METER
- ⊗ VALVE
- ⊕ WELLHEAD

VALVE NO.	PRODUCTION	SALES
1	OPEN	CLOSED
2	CLOSED	CLOSED
3	CLOSED	OPEN
4	OPEN	CLOSED

SITE SECURITY DRAWING	
Well Name	Island Unit # 17
Lease No.	ML-11004
Unit ID.	891006935A
Location	SE SW SEC. 2 T10S R19E
County, ST.	Uintah, Utah
Operator	Wexpro

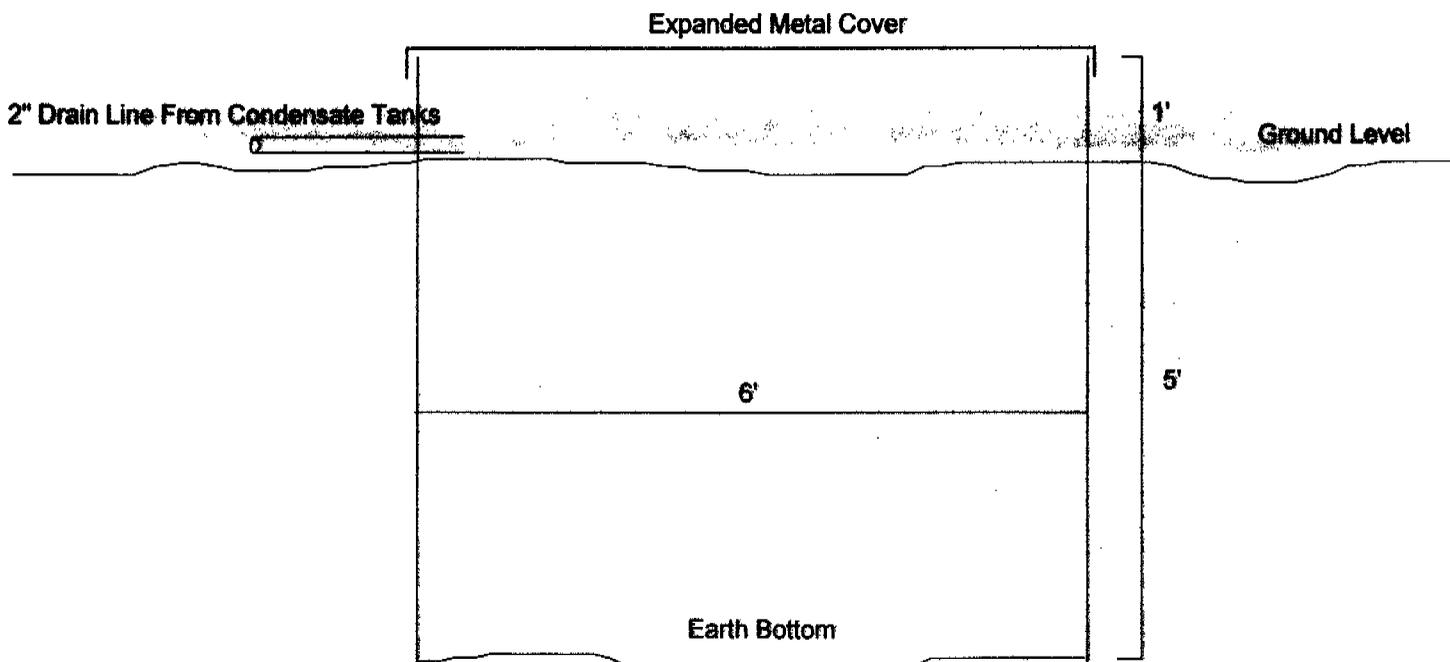
6'x6' Culvert Water Drain Pit



RECEIVED

MAY 18 2000

DIVISION OF
OIL, GAS AND MINING



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

5. LEASE DESIGNATION AND SERIAL NO.

ML-11004

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.)

6. IF INDIAN, ALOTTEE OR TRIBE NAME

1. OIL WELL GAS WELL OTHER

7. UNIT AGREEMENT NAME
ISLAND UNIT

2. NAME OF OPERATOR
WEXPRO COMPANY

8. FARM OR LEASE NAME
ISLAND UNIT

3. ADDRESS OF OPERATOR
P.O. BOX 458, ROCK SPRINGS, WY 82902

9. WELL NO.
ISLAND UNIT WELL NO. 17

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

10. FIELD AND POOL, OR WILDCAT ISLAND

563' FSL, 1954' FWL, SE SW

11. SECT.R.W. OR BLX AND SURVEY OR AREA

2 - 10S - 19E

14. PERMIT NO.
43-047-31503

15. ELEVATIONS (Show whether DF,RT,GR,etc.)
5030' GR

12. COUNTY OR PARISH
UTAH

18. STATE
UTAH

16.

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

NOTICE OF INTENTION TO:

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

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

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

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

The above well resumed production, after being off over 90 days, on December 16, 2004.

Please consider the faxed copy as initial notification. Original and copies to follow via mail.

RECEIVED
DEC 27 2004

DIV. OF OIL, GAS & MINING

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

SIGNED

TITLE Operations Manager

DATE

September 7, 2004

(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

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-11004
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: N/A
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER _____		7. UNIT or CA AGREEMENT NAME: Island Unit UTU063026X
2. NAME OF OPERATOR: Wexpro Company		8. WELL NAME and NUMBER: Island Unit Well No. 17
3. ADDRESS OF OPERATOR: P.O. Box 458 CITY Rock Springs STATE WY ZIP 82902		9. API NUMBER: 4304731503
4. LOCATION OF WELL FOOTAGES AT SURFACE: 563' FSL 1954' FWL		10. FIELD AND POOL, OR WILDCAT: Island
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SE SW 2 10S 19E		COUNTY: Uintah
		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: 4/24/2008	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE	<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/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"/> TEMPORARILY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input checked="" type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUT-OFF <input type="checkbox"/> OTHER: _____
<input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: _____			

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

Water produced from the above well will be disposed of in a water / blow down tank as previously approved. Excess water production will be hauled to the following State of Utah approved disposal sites:

R N Industries Inc Sec. 4-2S-2W - Bluebell
LaPoint Recycle & Storage Sec. 12-5S-19E - LaPoint
Dalbo, Inc Sec. 02-6S-20E - Vernal

All excess produced water will be hauled by tank truck over Unit, Tribal, County and State roads.

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

NAME (PLEASE PRINT) G.T. Nimmo	TITLE Operations Manager
SIGNATURE	DATE 4/24/2008

RECEIVED
APR 28 2008
DIV. OF OIL, GAS & MINING

(This space for State use only)

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

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-11004
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: N/A
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER _____		7. UNIT or CA AGREEMENT NAME: Island Unit UTU063026X
2. NAME OF OPERATOR: Wexpro Company		8. WELL NAME and NUMBER: Island Unit 17
3. ADDRESS OF OPERATOR: PO Box 458 CITY Rock Springs STATE WY ZIP 82902		9. API NUMBER: 4304731503
		10. FIELD AND POOL, OR WILDCAT: Island/Wasatch
4. LOCATION OF WELL FOOTAGES AT SURFACE: 563' FSL 1954' FWL		COUNTY: Uintah
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SESW 2 10S 19E		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE	<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/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"/> TEMPORARILY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUT-OFF <input type="checkbox"/> OTHER: _____
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 5/5/08			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.
 The above well resumed production on May 5, 2008 at 1:30 P.M.; after being off more than 90 days.

NAME (PLEASE PRINT) E.T. Nimmo	TITLE Operations Manager
SIGNATURE	DATE 5/6/2008

(This space for State use only)

RECEIVED
MAY 09 2008