

FILE NOTATIONS

Entered in MID File ✓
Location Map Pinned
Card Indexed ✓

Checked by Chief
Approval Letter 5-10-70
Disapproval Letter

COMPLETION DATA:

Well Completed
..... WW..... TA.....
..... OS..... PA.....

Location Inspected
Bond released
State or Fee Land

LOGS FILED

Miller's Log.....
Sonic Logs (No.)
..... I..... Dual I Lat..... GR-N..... Micro.....
Sonic CR..... Lat..... MI-L..... Sonic.....
Log..... Log..... Others.....

DESIGNATION OF OPERATOR

The undersigned is, on the records of the Bureau of Land Management, holder of lease

DISTRICT LAND OFFICE:
SERIAL NO.:

and hereby designates

NAME: *Glade Stubbs*
ADDRESS: *Box 33, Virgin, Utah / Residence: Dixie Hotel - Virgin, Utah*

as his operator and local agent, with full authority to act in his behalf in complying with the terms of the lease and regulations applicable thereto and on whom the supervisor or his representative may serve written or oral instructions in securing compliance with the Operating Regulations with respect to (describe acreage to which this designation is applicable):

Township 41 South, Range 12 West, Section 14

SW 1/4 NW 1/4

It is understood that this designation of operator does not relieve the lessee of responsibility for compliance with the terms of the lease and the Operating Regulations. It is also understood that this designation of operator does not constitute an assignment of any interest in the lease.

In case of default on the part of the designated operator, the lessee will make full and prompt compliance with all regulations, lease terms, or orders of the Secretary of the Interior or his representative.

The lessee agrees promptly to notify the supervisor of any change in the designated operator.

Glade Stubbs
Signature of lessee

March 9, 1970
(Date)

5001 Lincoln - Murray, Utah
(Address)

Decker

25

→ Hurricane - Dike Motel

2/20/70 → Glade Stubs

Plan to
deffen
a plug

one in Virgin
one in Logansville - Wayne Wilcox

have lease in Virgin
about 1 mile from productive well
G.K.S.

660 from a productive well

500' from a property or government section line

400 FSL & 300 FWL

↳ NID. req → sec 14 T41S R12W
topog. & need OK from Carter O & G.
Co. in
sec 15

surveying tomorrow

sec 15
M. M. M.

Send:

[Signature]

P.O. Box 33
Virgin -

NID. - Water forms
and density Report of Operation
(small supply)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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
 Glen M. Wasden

3. ADDRESS OF OPERATOR
 50001 Lincoln - Murray, Utah

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
 At surface 279.66 FWL & 22140 FNL
 At proposed prod. zone SWSWNW

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 1.5 miles from Virgin, Utah

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) 279666

16. NO. OF ACRES IN LEASE
 40

17. NO. OF ACRES ASSIGNED TO THIS WELL
 40

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

19. PROPOSED DEPTH
 600'

20. ROTARY OR CABLE TOOLS
 Cable

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
 3850' GR

5. LEASE DESIGNATION AND SERIAL NO.
 U8126

7. UNIT AGREEMENT NAME

6. FARM OR LEASE NAME
 U-Don #1 Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT
 Wildcat

11. SEC., T., R., M., OR BLK., AND SURVEY OR AREA
 Sec. 14, T. 41 S, R. 12 W

12. COUNTY OR PARISH 13. STATE
 Washington Utah

22. APPROX. DATE WORK WILL START*
 April 1, 1970

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
10"	10"	25	90'	to surface

Request for topographical exception, State of Utah, according to Rule-C-3; owns all acreage within a 660' radius of proposed location.

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.

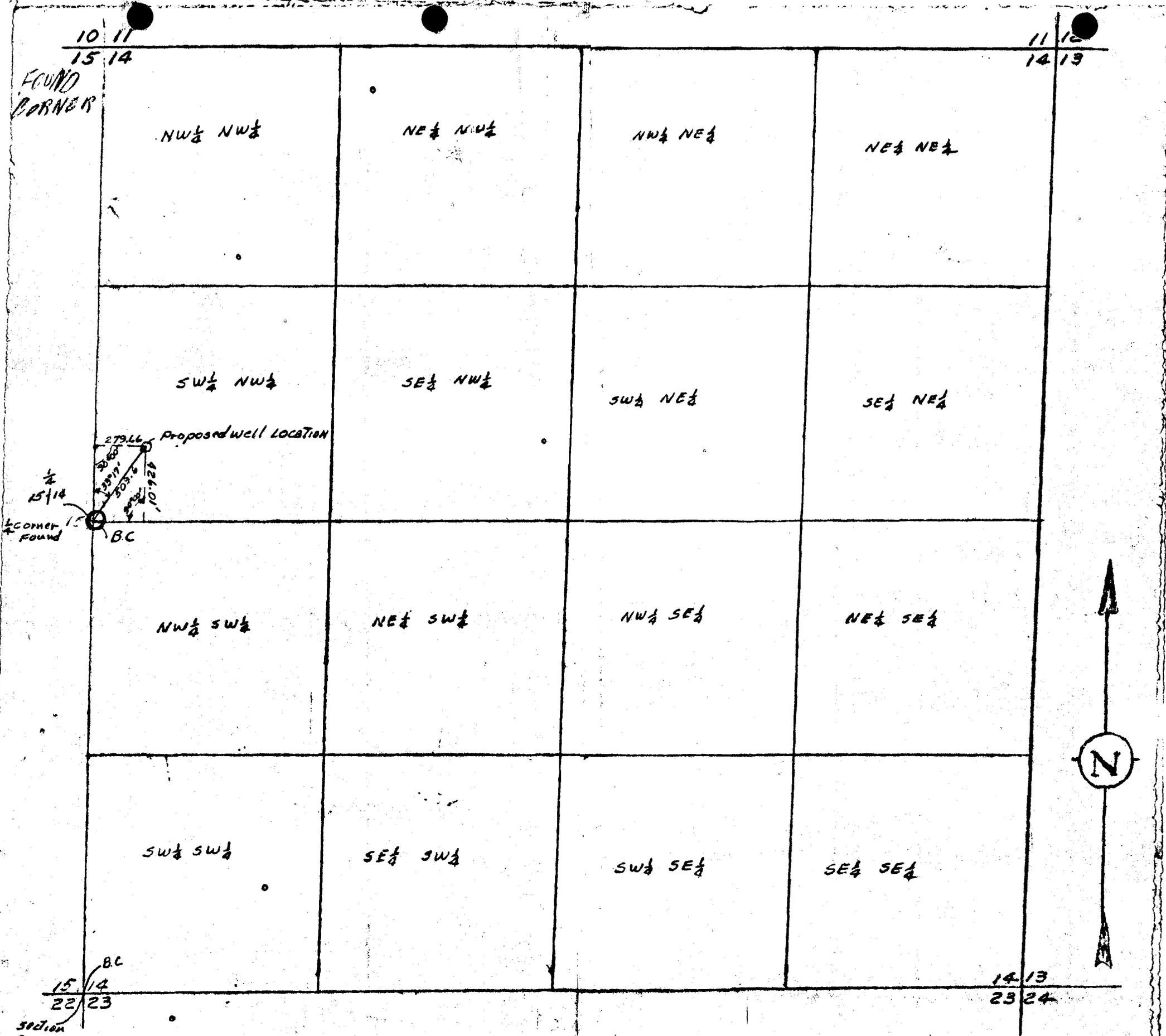
24. SIGNED Glen M. Wasden TITLE Owner DATE 3-9-70

(This space for Federal or State office use)

PERMIT NO. 43 153-31004 APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:



SECTION 14, TOWNSHIP 41 SOUTH, RANGE 12 WEST S.L.B.M.

Drilling site location as staked is in the SW 1/4 NW 1/4 of section 14, T 41 S. R 12 W S10M in Washington County Utah, and is located 426.01' North & 279.66' East of 1/4 corner S14

Surveyed by [Signature]

March 10, 1970

Glen M. Wasden
5001 Lincoln Street
Murray, Utah

Re: Well No. U-Don Federal #1
Sec. 14, T. 41 S, R. 12 W,
Washington County, Utah

Dear Sir:

Insofar as this office is concerned, approval to drill the above mentioned well is hereby granted, in accordance with Rule C-3(c).

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

PAUL W. BURCHELL - Chief Petroleum Engineer
HOME: 277-2890
OFFICE: 328-5771

This approval terminates within 90 days if the well has not been spudded-in within said period.

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

Glen M. Wasden
Page 2

The API number assigned to this well is 43-053-30004 (See Bulletin D-12 published by the American Petroleum Institute).

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

CLEON B. FEIGHT
DIRECTOR

CBF:sd
Enclosures

cc: U.S. Geological Survey

Glade Stubbs

Branch of Oil and Gas Operations
8416 Federal Building
Salt Lake City, Utah, 84111

April 8, 1970

Mr. Glade Stubbs
Box 33
Virgin, Utah

Dear Mr. Stubbs:

I've been advised that you do not have a slush pit or any catchment area for the cuttings and fluid bailed from the well you are drilling in the SW $\frac{1}{4}$ NW $\frac{1}{4}$ sec. 14, T. 41 S., R. 12 W., on lease Utah 8126-A.

Please take the necessary action to construct pits or facilities to hold the fluids and cuttings at the well site and do not run these fluids or build your pits in the drainages.

If you have any questions on this matter, please contact me. I hope to visit your drilling site if time permits.

Sincerely yours,

(ORIG. SGD.) R. A. SMITH

Rodney A. Smith,
District Engineer

cc: Glen M. Wasden
File ✓
✓ Utah Div. of Oil & Gas Conservation

RAS:id

NOTE: 4-3-70 Bob Keyser advised that Jim McFarland, FWPCA, had visited this location and observed no pits and the need for same.

RECEIVED DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.
W 8126-H

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, ALLOTTEE OR TRIBE NAME
Page #87

1. U.S. WELL SURVEY
WELL GAS WELL OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
Glenn Warden - Glade Truck Co

8. TERM OR LEASE NAME
Wilson #1 Fed.

3. ADDRESS OF OPERATOR
P.O. Box 33 Virgin Utah

9. WELL NO.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
279.66 FWL & 2214' FNL (SW NW)

10. FIELD AND FOOT, OR WILCOX
W. District

14. PERMIT NO.

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

11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA
12 W T. 41 S

14. PERMIT NO.

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

12. COUNTY OR PARISH
Washington

13. STATE
Utah

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

NOTICE OF INTENTION TO:

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) <i>Setting casing</i>	

SUBSEQUENT REPORT OF:

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) _____	

(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.)

*Spudded - April 1, 1970
Casing to 90' - 10 inch cemented to top 50 ft
Ruv. Eight inches to 605 ft to shut off water
Not cemented*

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

SIGNED *Glenn Warden* TITLE *Operator*

DATE *July 7, 1970*

(This space for Federal or State office use)
APPROVED BY (ORIG. 9500) *J. V. FINNEGAN* TITLE *ACTING DISTRICT ENGINEER*

CONDITIONS OF APPROVAL, IF ANY:

DATE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

U 8126 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

None

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

U-Don Wasden Federal

9. WELL NO.

No. 1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 14. T. 41. S. R1

S.L.M.

12. COUNTY OR PARISH

13. STATE

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Glade Stubbs

3. ADDRESS OF OPERATOR
P. O. Box 33 Virgin Utah

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface SW 1/4 NW 1/4
279.66 ft. from West Line
221 1/4 ft. from North Line

14. PERMIT NO.
Utah A.P.I. 43-053-30004

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3850 Gr.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Dry Hole

(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.)*

T. D. 680 ft. 10 Sacks Cement

Mud to 275 ft.

275 ft. 30 Sacks Cement

Mud to 95 ft.

95 ft. 10 Sacks Cement

Mud to 10 ft.

Cement to top

Marker set at surface.

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

SIGNED

Glade Stubbs

TITLE

Operator

DATE

June 14, 1971

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

July 31, 1970

Glen M. Wasden
5001 Lincoln Street
Murray, Utah

Re: Well No. U-Don Federal #1
Sec. 14, T. 41 S, R. 12 W,
Washington County, Utah
7-6-70

Dear Mr. Wasden:

Our records indicate that you have not filed a Monthly Report of Operations for the month(s) mentioned above for the subject well. Rule C-22 (1), General Rules and Regulations and Rules of Practice and Procedure, requires that said reports be filed on or before the sixteenth (16) day of the succeeding month. This report may be filed on Form OGC-1b, (U.S. Geological Survey 9-331, "Sundry Notices and Reports on Wells"), or on company forms containing substantially the same information. We are enclosing forms for your convenience.

Your cooperation with respect to this request is greatly appreciated.

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

SCHEREE DeROSE
SECRETARY

:sd
Enclosures

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424

LEASE DESIGNATION AND SERIAL NO.
W 8126-17

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
Wagon Washers

3. ADDRESS OF OPERATOR
P.O. Box 33, Virginia, Utah

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
279.66' FWL and 221' FNL (SW NW)

5. LEASE DESIGNATION AND SERIAL NO.
W 8126-17

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Wagon Washers Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., E., OR BLK. AND SURVEY OR AREA
Sec. 19, T. 41 S, R. 12 W

12. COUNTY OR PARISH; 13. STATE
Washington, Utah

14. PERMIT NO.

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

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 checked="" 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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <i>produce in better well</i>	(Other) <i>produce in better well</i>
(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 - 680 ft SW white member Kachok fine Stone
Plan to pull 8" pipe
plug back to 240 ft with cement
25 sacks in bottom and 340 ft fill plug back 5 ft
+ 5 sacks from 340 to 240
Our plan is to produce water
Well now water casing.*

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION
DATE *Aug 11, 1970*
BY *Paul M. Barbell*

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

SIGNED *State Stubbs* TITLE *Operator* DATE *Aug 11, 1970*

(This space for Federal or State office use)

APPROVED BY *B. M. Gray* TITLE *ACTING DISTRICT ENGINEER* DATE *AUG 11 1970*

CONDITIONS OF APPROVAL, IF ANY:

January 15, 1971

Glen Wasden
5001 Lincoln
Murray, Utah

Re: U-Don Federal #1
Sec. 14, T. 41 S, R. 12 W,
Washington County, Utah

Gentlemen:

Upon checking our files, it is noted that you have not as yet filed the "Well Completion or Recompletion Report and Log", Form OGC-3, for the above referred to well.

In as much as we are in the process of compiling data for our 1970 Well Completion Report, it would be appreciated if you would complete and forward the enclosed forms at your earliest convenience. This information will enable us to expedite the processing of our report and keep it accurate and complete.

Thank you for your cooperation with regard to the above.

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

SCHEREE DeROSE
SUPERVISING STENOGRAPHER

:sd
enclosures

February 24, 1971

Glen Wasden
5001 Lincoln
Murray, Utah

Re: U-Don Federal 1
Sec. 14, T. 41 S, R. 12 W,
Washington County, Utah

Gentlemen:

In reference to our letter of January 15, 1971, please be advised that as of this date we still have not received the "Well Completion or Recompletion Report and Log", Form OGC-3, as well as electric logs, for the above referred to well.

Under Rule C-5, General Rules and Regulations and Rules of Practice and Procedure, the well log along with any electric and/or radioactivity logs run, shall be filed within 90 days after the suspension of operations. Therefore, would you please promptly file said data.

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

SCHEREE DeROSE
SUPERVISING STENOGRAPHER

:sd

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on reverse side)

Form approved.
Budget Bureau No. 42-R333.5.

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
Glade Stubbs

3. ADDRESS OF OPERATOR
P. O. Box 33 Virgin, Utah

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

At top prod. interval reported below

At total depth 680 Ft.

14. PERMIT NO. _____ DATE ISSUED March 1970

12. COUNTY OR PARISH Washington STATE Utah

15. DATE SPUDDED Utah A.P.I. 43-053-30001
APRIL 1970 16. DATE T.D. REACHED AUG, 1970 17. DATE COMPL. (Ready to prod.) _____ 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3850 Gr. 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD 680 21. PLUG, BACK T.D., MD & TVD _____ 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS _____ CABLE TOOLS Cable

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
None 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN None 27. WAS WELL CORED No

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10 Inch	25 lb.	90 foot		50 Sacks to surface	
8 Inch	22 lb.	605 foot		No cement	605 foot

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

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

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 Glade Stubbs TITLE Operator-Driller DATE June 14, 1970

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.)

7. 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.	NAME	MEAS. DEPTH	TOP	TRUB VERT. DEPTH
0 to 215	Middle Red member	215					
15-285	Virgin lime member	285					
85-650	Lower Red member	650					
50 to 680	Upper Red member	680					
TD	Lime	TD					

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

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.)

U 8126 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

None

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

U-Don Wasden Federal

9. WELL NO.

No. 1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 14. T. 41. S. R.

SLM

12. COUNTY OR PARISH 13. STATE

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

Glade Stubbs

3. ADDRESS OF OPERATOR

P. O. Box 33 Virgin Utah

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

At surface SW 1/4 NW 1/4
279.66 ft. from West Line
2214 ft. from North Line

14. PERMIT NO.

Utah A.P.I. 43-053-30004

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

3850 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) Dry Hole

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.)*

T. D. 680 ft. 10 Sacks Cement
Mud to 275 ft.
275 ft. 30 Sacks Cement
Mud to 95 ft.
95 ft. 10 Sacks Cement
Mud to 10 ft.
Cement to top
Marker set at surface.

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

SIGNED Glade Stubbs

TITLE Operator

DATE June 14, 1964

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____