

## STATE OF UTAH

DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

FORM 3

AMENDED REPORT 

## APPLICATION FOR PERMIT TO DRILL

## 2. TYPE OF WORK

DRILL NEW WELL  REENTER P&A WELL  DEEPEN WELL 

## 4. TYPE OF WELL

Gas Well Coalbed Methane Well: NO

## 6. NAME OF OPERATOR

FLATIRONS RESOURCES, LLC

## 8. ADDRESS OF OPERATOR

303 E. 17th Ave, Denver, CO, 80203

10. MINERAL LEASE NUMBER  
(FEDERAL, INDIAN, OR STATE)

UTU87659

## 11. MINERAL OWNERSHIP

FEDERAL  INDIAN  STATE  FEE 

## 13. NAME OF SURFACE OWNER (if box 12 = 'fee')

## 15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')

17. INDIAN ALLOTTEE OR TRIBE NAME  
(if box 12 = 'INDIAN')18. INTEND TO COMMINGLE PRODUCTION FROM  
MULTIPLE FORMATIONSYES  (Submit Commingling Application) NO 

## 20. LOCATION OF WELL

## LOCATION AT SURFACE

## Top of Uppermost Producing Zone

## At Total Depth

## FOOTAGES

## QTR-QTR

## SECTION

## TOWNSHIP

## RANGE

## MERIDIAN

1402 FNL 757 FEL

SENE

4

19.0 S

25.0 E

S

1402 FNL 757 FEL

SENE

4

19.0 S

25.0 E

S

1402 FNL 757 FEL

SENE

4

19.0 S

25.0 E

S

## 21. COUNTY

GRAND

## 22. DISTANCE TO NEAREST LEASE LINE (Feet)

757

## 23. NUMBER OF ACRES IN DRILLING UNIT

320

25. DISTANCE TO NEAREST WELL IN SAME POOL  
(Applied For Drilling or Completed)

1825

## 26. PROPOSED DEPTH

MD: 1100 TVD: 1100

## 27. ELEVATION - GROUND LEVEL

4945

## 28. BOND NUMBER

UTB000511

## 29. SOURCE OF DRILLING WATER /

WATER RIGHTS APPROVAL NUMBER IF APPLICABLE  
municipal

## Hole, Casing, and Cement Information

String	Hole Size	Casing Size	Length	Weight	Grade & Thread	Max Mud Wt.	Cement	Sacks	Yield	Weight
Cond	17	14	0 - 40	55.0	H-40 ST&C	9.0	Class G	35	1.17	15.8
Surf	12.25	9.625	0 - 250	32.3	H-40 ST&C	9.0	Class G	70	1.84	12.8
I1	8.75	7	0 - 860	7.17	H-40 ST&C	9.0	Class G	100	2.02	12.8

## ATTACHMENTS

## VERIFY THE FOLLOWING ARE ATTACHED IN ACCORDANCE WITH THE UTAH OIL AND GAS CONSERVATION GENERAL RULES

<input checked="" type="checkbox"/> WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER	<input checked="" type="checkbox"/> COMPLETE DRILLING PLAN
<input type="checkbox"/> AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)	<input checked="" type="checkbox"/> FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER
<input type="checkbox"/> DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)	<input checked="" type="checkbox"/> TOPOGRAPHICAL MAP

NAME Sharon Wells	TITLE Sr. Engr. Tech	PHONE 303 292-3902
SIGNATURE	DATE 11/12/2012	EMAIL Sharonw@flatironsllc.com
API NUMBER ASSIGNED 43019500290000	APPROVAL	



Permit Manager

## Eight Point Drilling Plan

Flatirons Federal #1-4

September 4, 2012

**Project Summary:** Flatirons Resources LLC, as operator, intends to drill 1100 ft helium well on the crest of Harley Dome. The well location is in the middle of three historical tests on the anticline which provide the gas composition and pressure of the Entrada formation. The location will be accessed by an existing two track road. A trailer mounted rig will be used to drill the well. Forty feet of 14 inch conductor pipe will be set, followed by 250 feet of 9-5/8 inch surface casing, and 860 feet of 7 inch casing to be set above the objective Entrada zone, top setting the zone. Once the cement has been allowed to set for eight hours the well will be drilled into the Entrada. After reaching TD the well will be blown dry and the drill pipe will be tripped out of the well. Once the rig is moved off the well will be flow tested for five days to confirm gas composition and rate. If sufficient quality and quantity of gas is confirmed through flow testing, a flow line will be run to a small pressure swing adsorption helium plant to remove the helium from the other inert gases.

**1. Estimated Formation Tops**

Tops		At surface
Dakota		
Morrison		149'
Top of Salt Wash Sand	566'	Depleted
Base of Salt Wash Sand	595'	
Entrada	860'	Helium Potential
TD (100 feet into Entrada)	960	
Permitted depth	1,100	

**2. Estimated Depth and thickness of formations:**

Name	Depth	Thickness
Salt Wash (1)	566-595	30
Entrada (2)	860-1110	250

Notes: (1) When drilled in the Lansdale Gov #13 well the Salt Wash had 5 psi pressure see DP- 2

(2) Had 155 psi and attached gas analysis when drilled through with the Lansdale Gov. #13 well

**3. Pressure Control Equipment:**

- A. Himes Drilling is providing rotating head/diverter and blooey line for the drilling the surface and down to the top of the Entrada (intermediate hole). It is not expected that this interval will encounter significant gas. When the Lansdale Gov. #13 was drilled the Salt Wash zone was depleted to five psig. In the unlikely event the Salt Wash is not depleted and significant gas is encountered we will be prepared to pump fresh water to kill the zone.

- B. After the 7 inch intermediate casing is set, a full opening valve and annular BOP will be put below the rotating head. The well will then be drilled to TD. Exhibit DP-1 is a diagram of the 7-1/16<sup>th</sup> stack that will be used. By having the full opening valve under the stack this will allow us to drill into the main pay zone and test the flow, trip out with the drill string and shut the valve and the well will be ready to complete
- C. Auxiliary equipment will include a Kelly cock and a full opening TIW valve

**4. Casing and Cementing Program:**

- D. Below is the minimum casing program for the proposed well

String	Size of hole (inches)	Size of casing (inches)	Weight per foot (#/ft)	Grade	Setting Depth (ft)	Sacks Cement	Cement Bottom (ft)	Cement Top (ft)
Conductor	17	14	55	F-25	40	40	40	0
Surface	12.25	9-5/8	29.3	H	250	70	250	0
Intermediate	8.75	7	17	H	860	110	860	0

- E. All casing strings below the conductor pipe will be pressure tested to 0.22 psi per foot of casing string length or 500 psi, whichever is greater, but not to exceed 70 percent of the minimum internal yield. If pressure declines more than 10 percent in 30 minutes, corrective action shall be taken.
- F. Centralizers will be used on the bottom three joints of the surface casing.
- G. Cement program will be as follows:
  - a. Surface : 70 sacks of cement with appropriate additive; the first ten sacks mixed as a lead at 2.38 Ft<sup>3</sup>/sk and 12.3 #/gal, followed 60 sacks mixed to yield 2.11 Ft<sup>3</sup>/sack and 12.8 3/gal
  - b. Intermediate: 110 sacks of cement with appropriate additive; the first ten sacks mixed as a lead at 2.38 Ft<sup>3</sup>/sk and 12.3 #/gal, followed 60 sacks mixed to yield 2.11 Ft<sup>3</sup>/sack and 12.8 #/gal
- H. After cementing, but before commencing any additional drilling or testing, the casing string shall be undisturbed until the cement has reached a compressive strength of at least 500 psi at the shoe. WOC shall be recorded on the driller's log.

**5. Mud Program**

This well will be drilled with air and foam. Offset wells did not have significant water until well below the Entrada. If we are not able to dust because excess water is encountered then we will add water and soap to the air stream to create stable foam to clean the wellbore.

Our blooie line as shown will be 40 feet long and aimed into the pit. We will keep 120 bbls of fresh water on site at all times to kill the well, which is more than twice the volume of the hole at total depth. From the Salt Wash zone to TD we will keep a smudge pot at the end of the blooie line to ignite any combustible gas that is encountered. We will be set up to spray fresh water into the blooie line to suppress any dust that is created.

**6. Testing, Coring, and Logging**

As the well is drilling we will shut down at the indication of any gas entry into the wellbore to measure the flowing rate. If significant gas is encountered we will shut down to measure a flow rate, get a gas sample and shut in pressure.

No cores will be taken. Prior to running intermediate casing a gamma ray and resistivity log will be run.

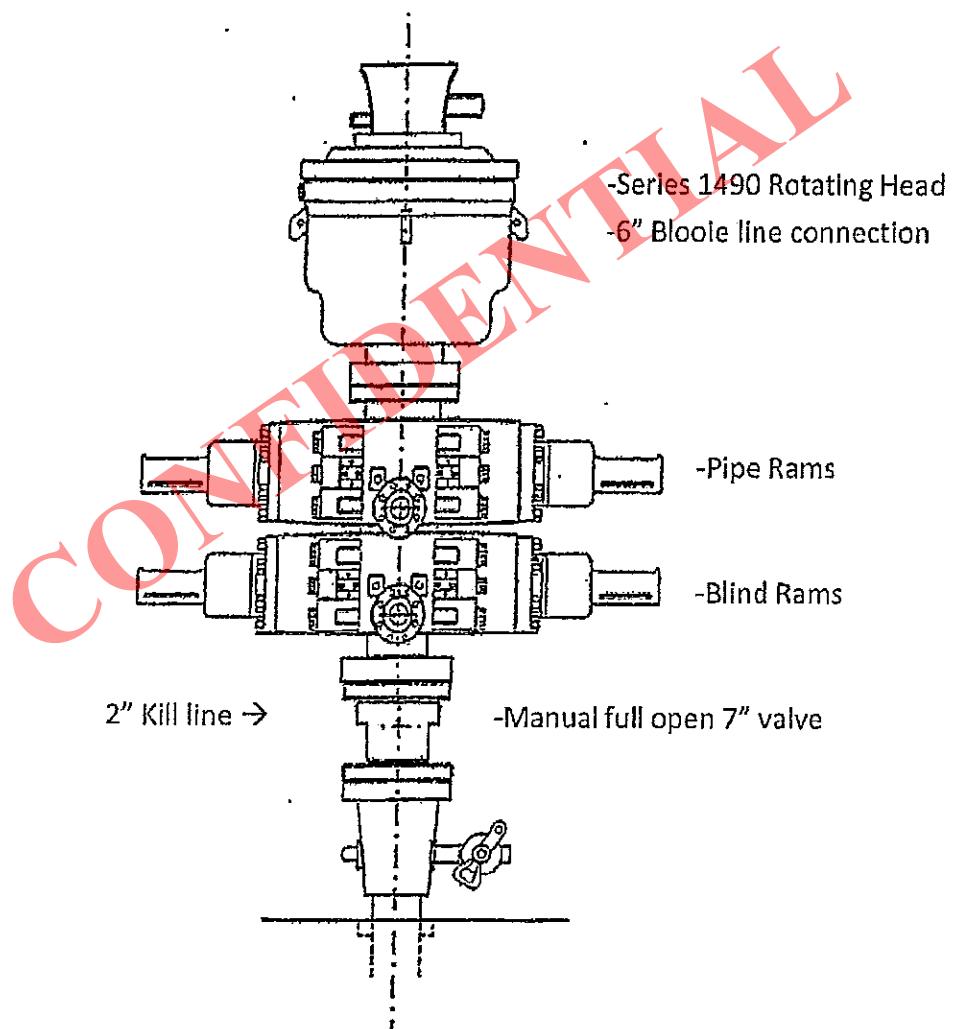
**7. Anticipated Drilling Conditions:**

Based on the Lansdale Gov. #13 well drilled 350 feet east of this location in May of 1968, the Salt Wash zone is depleted to 5 psi and the Entrada is 155 #. Attached as DP-2 are gas analyses for both zones. The Entrada is a non combustible gas mixture with only 8.5 % methane and 6.47% helium, and 83.8% Nitrogen. The Salt Wash zone of the Morrison is similar gas with 14.8% methane and only 2.4% helium.

**8. Operations**

It is anticipated that the well will spud within 60 days of approved permit, it will take a week to ten days to drill. Once the well is drilled it will be ready for the testing. We will run a five day step rated flow test to determine reservoir parameters. Based on the flow testing, the decision will be made to run a flow line and install the helium separation plant or plug and abandon the well. It is estimated that the flowline will take a week to ten days to install and the plant installation will take two weeks. From spud to first production of separated helium is anticipated to be 45-60 days.

## Exhibit DP-1 BOP Diagram



## CHEMICAL &amp; GEOLOGICAL LABORATORIES

P. O. Box 379  
Casper, Wyoming

Exhibit DP-2

## GAS ANALYSIS REPORT

Company A. Lansdale Date May 1, 1968 Job No. 24273-2  
 Well No. Unit No. 13 Location SE NE 4-19B-25E  
 Field Hayley Dome Formation Morrison  
 County Grand Depth 635  
 State Utah Sampling point: Wellhead  Separator  Treater  
 line pressure, psig; Sample pressure 5 psig; Temperature 50 F

Remarks DST sample

Component	Mole % or Volume %	Gallons per MCF
Oxygen	0	
Nitrogen	81.37 N	
Carbon dioxide	0.37	
Hydrogen sulfide	0	
Butane	2.80 H	
Methane	14.82 M	
Ethane	0.48	
Propane	0.09	0.025
Iso-butane	0.04	0.013
N-butane	0.02	0.006
Iso-pentane	0.01	0.004
N-pentane & higher	Trace	
Hexanes		
Total	100.00	0.048

Gross btu/cu. ft. @ 60°F & 14.7 psig (dry basis) 163  
 Specific gravity (calculated from analysis) 0.886  
 Specific gravity (measured) 0.888  
 GPM of pentanes & higher fraction 0.004

Remarks:

## Chemical & Geological Laboratories

P. O. Box 279  
Casper, Wyoming

## **GAS ANALYSIS REPORT**

Company A-1 Lansdale Date May 4, 1968 Job No. 24273-  
 Well No. Unit No. 13 Location SE NE 4-198-25X  
 Field Harley Dome Formation Entrada  
 County Grand Depth 890 - 918  
 State Utah Sampling point:  Wellhead,  Separator,  Treater  
 Remarks Production from open hole. Line pressure, psig; Sample pressure, 155 psig; Temperature

Component	Mole % or Volume %	Gallons per MCF
Oxygen	0	
Hydrogen	83.78 N	827.7053
Carbon dioxide	0.84	
Hydrogen sulfide	0	
Lithium	0.47 N	422.182
Propane	0.53 N	83.1136
Isobutane	0.28	
Butane	0.03	0.008
Isobutene	0.02	0.007
Pentane	0.01	0.003
Hexane	0.01	0.004
Heptane	0.01	0.004
Octane & higher	0.02	0.009
Total	100.00	0.035

Gross btu/cu ft @ 60°F & 14.7 psia (dry basis)

**Specific gravity (calculated from analysis)**

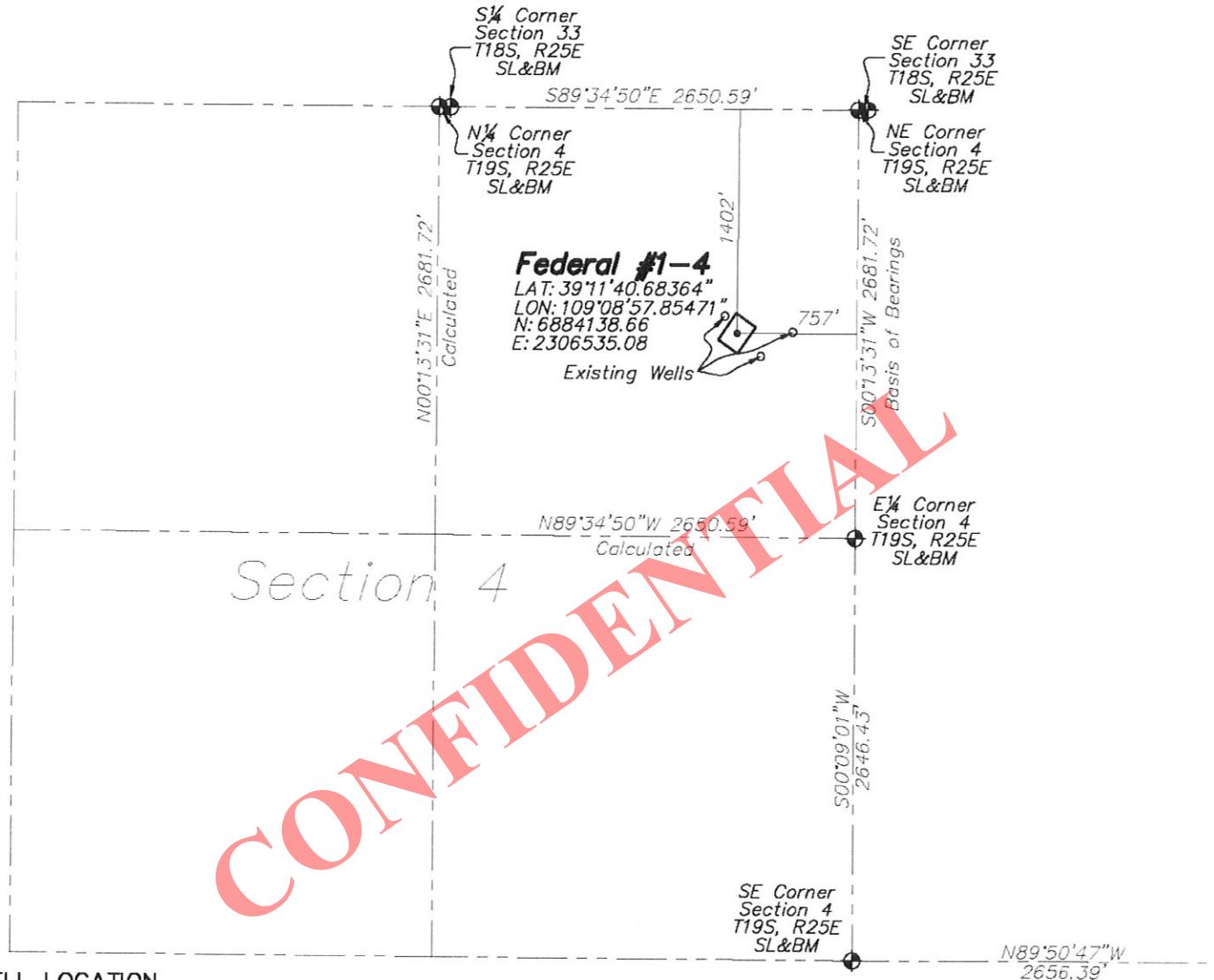
Specific gravity (measured)

### GPM of pentanes & higher fraction

Remarks: THIS ANG14515 WAS FROM 946 WITH 923 F4011  
THE MOTHS ARE 6.35' CORRESPONDING WITH THE LENGTHS 946

67166  
335630  
291478-DF  
19200000

## SECTION 4, T19S, R25E, SLB&amp;M, GRAND COUNTY, UTAH

WELL LOCATION

1. This Well Location Plat was prepared for Flatirons Resources, LLC to show the location Flatirons Federal Well #1-4, located 1402 feet South and 757 feet West of the Northeast corner of Section 4, T19S, R25E, SLB&M, Grand County, Utah, based on the location of the North Quarter corner, the Northeast corner, and the East Quarter corner of said Section 4.
2. Latitude and Longitude are based on NAD 83.
3. Elevations are based on NAVD 88.
4. Well ties are measured at 90° from the referenced Section Line.
5. Improvements: 2 Track Road at 125 feet East of Well, old composite, and existing closed off well heads.
6. Surface Use: Pac Site, brush, and scrub oak.
7. All information based on GPS observation.

LEGEND

● = SECTION CORNERS LOCATED  
 ● = PROPOSED WELL HEAD

**HIGH DESERT SURVEYING, LLC**

1673 Highway 50 Unit C  
 GRAND JUNCTION, CO. 81503  
 TELE: (970) 254-8649, FAX: (970) 241-0451

SURVEYOR'S STATEMENT

I, Merritt P. Dismant, a Professional Land Surveyor in the State of Utah do hereby certify that this survey was made under my direct supervision, and that this plat represents said Survey.

No. 166642

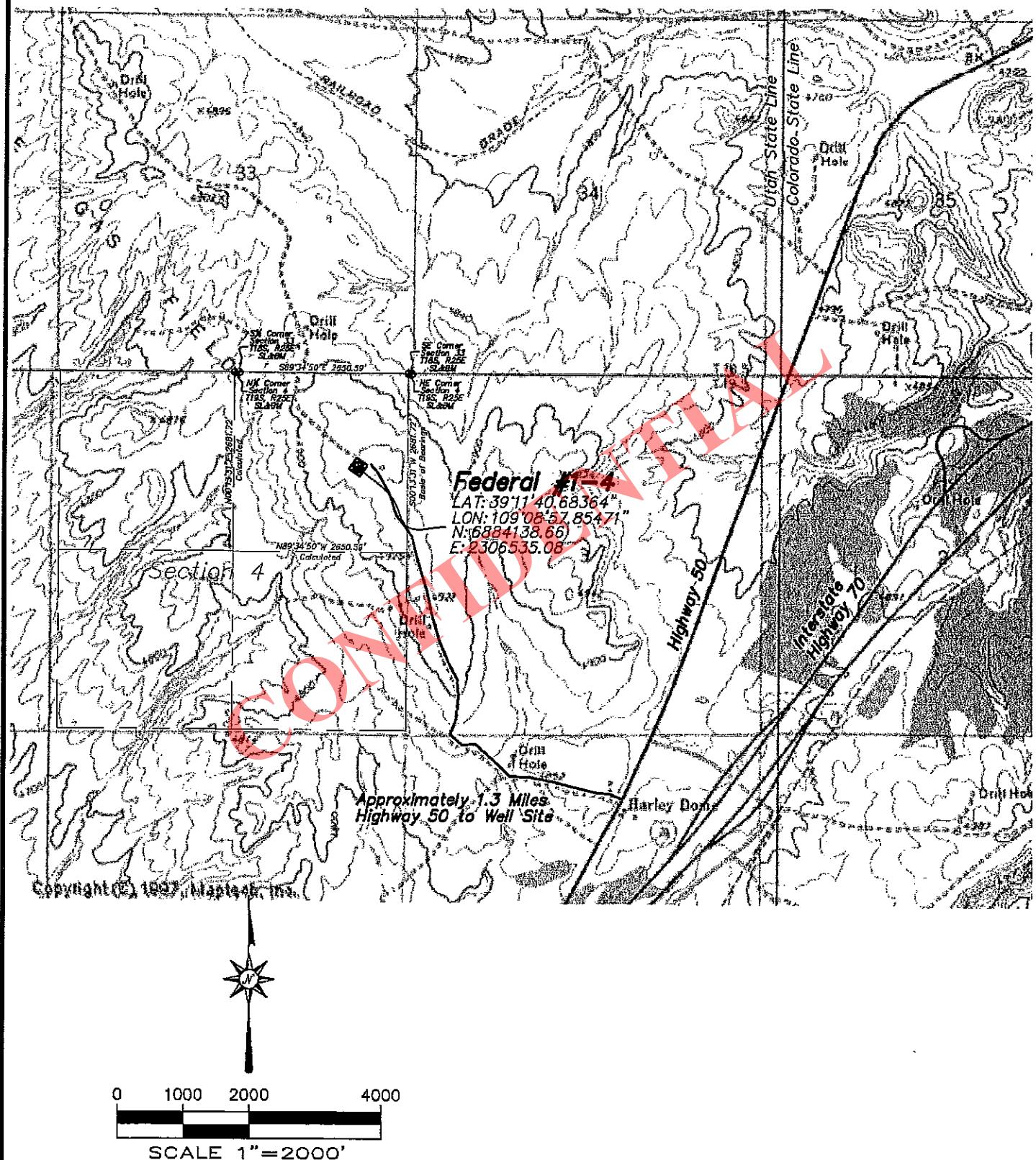
Merritt P. Dismant Utah PLS 166642

*Merritt P. Dismant Oct 19, 2012*

**Well Plat — Plat 1**  
**Flatirons Federal #1-4**  
**Flatirons Resources, LLC**

SURVEY BY: jcf/dj	Survey Date: 5-17-12	Job No. 12-41
DRAWN BY: rsk	Draft Date: 5-21-12	PLAT 1

## SECTION 4, T19S, R25E, SLB&amp;M, GRAND COUNTY, UTAH



Quadrangles Used: 1:24,000 – Harley Dome, Utah

**HIGH DESERT SURVEYING, LLC**1673 Highway 50 Unit C  
GRAND JUNCTION, CO. 81503  
TELE: (970) 254-8649, FAX: (970) 241-0451**Topography & Access – Plat 5**  
**Flatirons Federal #1-4**  
**Flatirons Resources, LLC**

SURVEY BY: jcf/dj	Survey Date: 5-17-12	Job No. 12-41
DRAWN BY: rsk	Draft Date: 5-21-12	PLAT 5

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

**DESIGNATION OF AGENT OR OPERATOR**

The undersigned is, on record, the holder of oil and gas lease

**LEASE NAME:** Flatirons Federal #1-4

**LEASE NUMBER:** UTU 87659

and hereby designates

**NAME:** Jeffery E. Jones

**ADDRESS:** 303 E. 17th Ave #940

city Denver      state CO      zip 80203

as his (check one) agent  / operator , with full authority to act in his behalf in complying with the terms of the lease and regulations applicable thereto and on whom the Division Director or Authorized Agent may serve written or oral instructions in securing compliance with the Oil and Gas Conservation General Rules and Procedural Rules of the Board of Oil, Gas and Mining of the State of Utah with respect to:

(Describe acreage to which this designation is applicable. Identify each oil and gas well by API number and name. Attach additional pages as needed.)

Federal lands 802.31 acres 80 acres dedicated to this well for the spacing unit

It is understood that this designation of agent/operator does not relieve the lessee of responsibility for compliance with the terms of the lease and the Oil and Gas Conservation General Rules and Procedural Rules of the Board of Oil, Gas and Mining of the State of Utah. It is also understood that this designation of agent or operator does not constitute an assignment of any interest in the lease.

In case of default on the part of the designated agent/operator, the lessee will make full and prompt compliance with all rules, lease terms or orders of the Board of Oil, Gas and Mining of the State of Utah or its authorized representative.

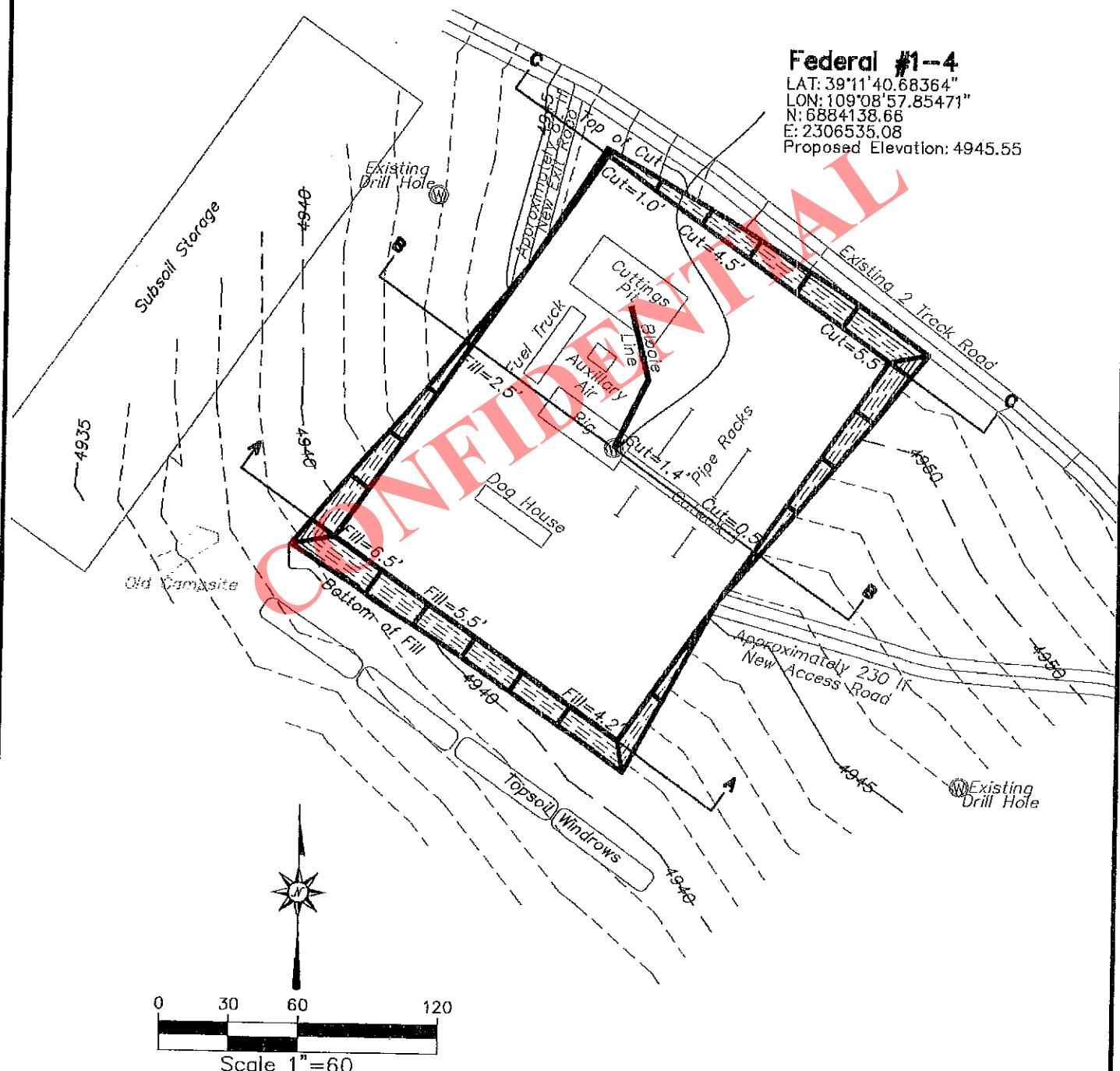
The lessee agrees to promptly notify the Division Director or Authorized Agent of any change in this designation.

**Effective Date of Designation:** \_\_\_\_\_

**BY:** (Name) Jeffery E. Jones  
 (Signature)   
 (Title) Managing Director  
 (Phone) (303) 292-3902

**OF:** (Company) Flatirons Resources LLC  
 (Address) 303 E. 17th Ave Suite 940  
 (city) Denver  
 (state) CO      (zip) 80203

SECTION 4, T19S, R25E, SLB&M, GRAND COUNTY, UTAH

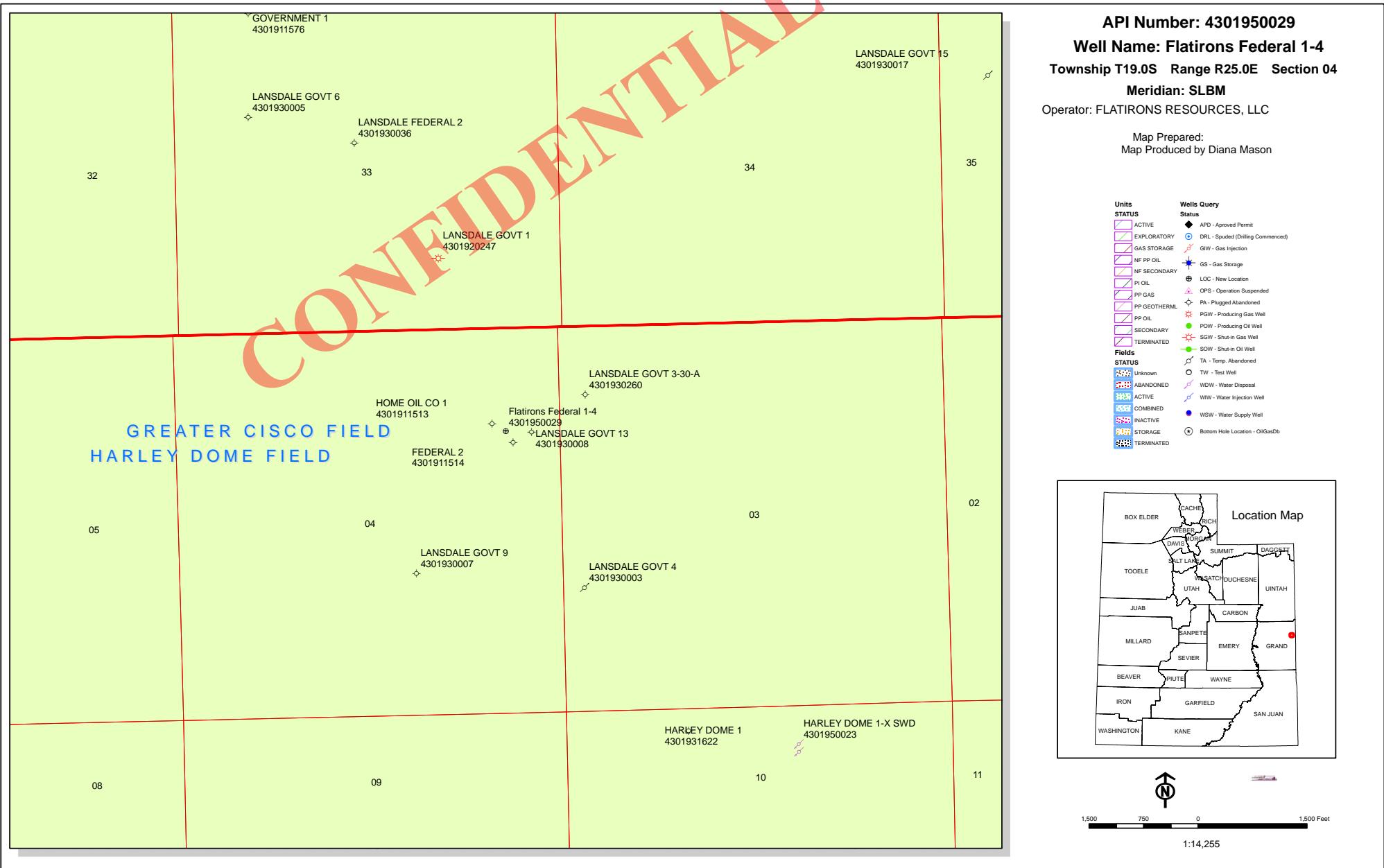


**HIGH DESERT SURVEYING, LLC**

1673 Highway 50 Unit C  
GRAND JUNCTION, CO. 81503  
TELE: (970) 254-8649. FAX: (970) 241-0451

**Pad & Rig Layout – Plat 3**  
**Flatirons Federal #1-4**  
*Flatirons Resources, LLC*

SURVEY BY: jcf/d	Survey Date: 5-17-12	Job No. 12-41
DRAWN BY: rsk	Draft Date: 5-21-12	PLAT 3



# WORKSHEET

## APPLICATION FOR PERMIT TO DRILL

APD RECEIVED: 11/12/2012

API NO. ASSIGNED: 43019500290000

WELL NAME: Flatirons Federal 1-4

OPERATOR: FLATIRONS RESOURCES, LLC (N3915)

PHONE NUMBER: 303 292-3902

CONTACT: Sharon Wells

PROPOSED LOCATION: SENE 04 190S 250E

Permit Tech Review: 

SURFACE: 1402 FNL 0757 FEL

Engineering Review: 

BOTTOM: 1402 FNL 0757 FEL

Geology Review: 

COUNTY: GRAND

LONGITUDE: -109.14789

LATITUDE: 39.18693

NORTHINGS: 4339155.00

UTM SURF EASTINGS: 659960.00

FIELD NAME: GREATER CISCO

LEASE TYPE: 1 - Federal

LEASE NUMBER: UTU87659

PROPOSED PRODUCING FORMATION(S): ENTRADA

SURFACE OWNER: 1 - Federal

COALBED METHANE: NO

## RECEIVED AND/OR REVIEWED:

 PLAT Bond: FEDERAL - UTB000511 Potash Oil Shale 190-5 Oil Shale 190-3 Oil Shale 190-13 Water Permit: municipal RDCC Review: Fee Surface Agreement Intent to Comingle

Commingling Approved

## LOCATION AND SITING:

 R649-2-3.

Unit:

 R649-3-2. General R649-3-3. Exception Drilling Unit

Board Cause No: Cause 102-16(B)

Effective Date: 11/15/1979

Siting: 500' Fr Property Lease line &amp; 200' Fr 1/4 1/4

 R649-3-11. Directional Drill

Comments: Presite Completed

Stipulations: 4 - Federal Approval - bhill



GARY R. HERBERT

*Governor*

GREGORY S. BELL

*Lieutenant Governor*

# State of Utah

## DEPARTMENT OF NATURAL RESOURCES

MICHAEL R. STYLER  
*Executive Director*

### Division of Oil, Gas and Mining

JOHN R. BAZA  
*Division Director*

## Permit To Drill

\*\*\*\*\*

**Well Name:** Flatirons Federal 1-4

**API Well Number:** 43019500290000

**Lease Number:** UTU87659

**Surface Owner:** FEDERAL

**Approval Date:** 11/21/2012

### **Issued to:**

FLATIRONS RESOURCES, LLC, 303 E. 17th Ave, Denver, CO 80203

### **Authority:**

Pursuant to Utah Code Ann. 40-6-1 et seq., and Utah Administrative Code R649-3-1 et seq., the Utah Division of Oil, Gas and Mining issues conditions of approval, and permit to drill the listed well. This permit is issued in accordance with the requirements of Cause 102-16(B). The expected producing formation or pool is the ENTRADA Formation(s), completion into any other zones will require filing a Sundry Notice (Form 9). Completion and commingling of more than one pool will require approval in accordance with R649-3-22.

### **Duration:**

This approval shall expire one year from the above date unless substantial and continuous operation is underway, or a request for extension is made prior to the expiration date

### **General:**

Compliance with the requirements of Utah Admin. R. 649-1 et seq., the Oil and Gas Conservation General Rules, and the applicable terms and provisions of the approved Application for permit to drill.

### **Conditions of Approval:**

State approval of this well does not supercede the required federal approval, which must be obtained prior to drilling.

### **Notification Requirements:**

The operator is required to notify the Division of Oil, Gas and Mining of the following actions during drilling of this well:

• Within 24 hours following the spudding of the well - contact Carol Daniels at 801-538-5284

(please leave a voicemail message if not available)

OR

submit an electronic sundry notice (pre-registration required) via the Utah Oil & Gas website

at <http://oilgas.ogm.utah.gov>

**Reporting Requirements:**

All reports, forms and submittals as required by the Utah Oil and Gas Conservation General Rules will be promptly filed with the Division of Oil, Gas and Mining, including but not limited to:

- Entity Action Form (Form 6) - due within 5 days of spudding the well
- Monthly Status Report (Form 9) - due by 5th day of the following calendar month
- Requests to Change Plans (Form 9) - due prior to implementation
- Written Notice of Emergency Changes (Form 9) - due within 5 days
- Notice of Operations Suspension or Resumption (Form 9) - due prior to implementation
- Report of Water Encountered (Form 7) - due within 30 days after completion
- Well Completion Report (Form 8) - due within 30 days after completion or plugging

**Approved By:**

For John Rogers  
Associate Director, Oil & Gas

CONFIDENTIAL

**DIVISION OF OIL, GAS AND MINING**

***SPUDDING INFORMATION***

Name of Company: FLATIRONS RESOURCES

Well Name: FLATIRONS FEDERAL 1-4

Api No: 43-019-50029 Lease Type FEDERAL

Section 04 Township 19S Range 25E County GRAND

Drilling Contractor HINES DRILLING RIG # 10

**SPUDDED:**

Date 08/06/2013

Time 5:00 PM

How DRY

***Drilling will Commence:*** \_\_\_\_\_

Reported by \_\_\_\_\_

Telephone # (724) 840-7695

Date 07/31/2013 Signed CHD

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

AMENDED REPORT  FORM 8  
 (highlight changes)

5. LEASE DESIGNATION AND SERIAL NUMBER:  
 UTU 87659

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	OTHER <b>helium</b>						
b. TYPE OF WORK:		NEW WELL <input checked="" type="checkbox"/>	HORIZ. LATS. <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	RE-ENTRY <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	OTHER _____				
2. NAME OF OPERATOR: <b>Flatirons Resources LLC</b>											
3. ADDRESS OF OPERATOR: <b>11080 Circle Point Rd #6</b> CITY Westminster STATE CO ZIP 80020					PHONE NUMBER: <b>(303) 292-3902</b>		10 FIELD AND POOL, OR WILDCAT <b>Harley Dome</b>				
4. LOCATION OF WELL (FOOTAGES) AT SURFACE: <b>1402' FNL 757' FEL</b>											
AT TOP PRODUCING INTERVAL REPORTED BELOW: <b>vertical well</b>											
AT TOTAL DEPTH: <b>vertical well</b>											
14. DATE SPUPPED:	8/6/2013	15. DATE T.D. REACHED:	8/12/2013	16. DATE COMPLETED:	8/14/2013	ABANDONED <input type="checkbox"/>	READY TO PRODUCE <input checked="" type="checkbox"/>	17. ELEVATIONS (DF, RKB, RT, GL): <b>4945 GL</b>			
18. TOTAL DEPTH: MD	<b>965</b>	19. PLUG BACK T.D.: MD	TVD	20. IF MULTIPLE COMPLETIONS, HOW MANY? *			21. DEPTH BRIDGE MD PLUG SET: TVD				
22. TYPE ELECTRIC AND OTHER MECHANICAL LOGS RUN (Submit copy of each) <b>Array Induction/Density/ Neutron/Gamma Ray</b>					23. WAS WELL CORED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit analysis) WAS DST RUN? <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit report) DIRECTIONAL SURVEY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit copy)						
24. CASING AND LINER RECORD (Report all strings set in well)											
HOLE SIZE	SIZE/GRADE	WEIGHT (#/ft.)	TOP (MD)	BOTTOM (MD)	STAGE CEMENTER DEPTH	CEMENT TYPE & NO. OF SACKS	SLURRY VOLUME (BBL)	CEMENT TOP **	AMOUNT PULLED		
12 1/4	9 5/8 H-40	32.3	0	264		Class <input checked="" type="checkbox"/> 65	120	0			
8 3/4	7 J-55	26	595	868		Class <input checked="" type="checkbox"/> 81	50				
6			868	965							
25. TUBING RECORD											
SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)			
26. PRODUCING INTERVALS					27. PERFORATION RECORD						
FORMATION NAME	TOP (MD)	BOTTOM (MD)	TOP (TVD)	BOTTOM (TVD)	INTERVAL (Top/Bot - MD)	SIZE	NO. HOLES	PERFORATION STATUS			
(A) Entrada	868	965						Open <input checked="" type="checkbox"/> Squeezed <input type="checkbox"/>			
(B)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>			
(C)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>			
(D)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>			
28. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC.											
WAS WELL HYDRAULICALLY FRACTURED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF YES - DATE FRACTURED: _____											
DEPTH INTERVAL		AMOUNT AND TYPE OF MATERIAL									
29. ENCLOSED ATTACHMENTS:											
<input checked="" type="checkbox"/> ELECTRICAL/MECHANICAL LOGS <input type="checkbox"/> SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION					<input type="checkbox"/> GEOLOGIC REPORT <input type="checkbox"/> CORE ANALYSIS					<input type="checkbox"/> DST REPORT <input type="checkbox"/> OTHER: _____	
30. WELL STATUS:											

## 31. INITIAL PRODUCTION

## INTERVAL A (As shown in Item #26)

DATE FIRST PRODUCED: 8/12/2013	TEST DATE: 8/14/2013	HOURS TESTED: 3	TEST PRODUCTION RATES: →	OIL - BBL: 0	GAS - MCF: 245	WATER - BBL: 0	PROD. METHOD: vented		
CHOKE SIZE: 129	TBG. PRESS. 129	CSG. PRESS. API GRAVITY	BTU - GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL - BBL: 0	GAS - MCF: 1,964	WATER - BBL: 0	INTERVAL STATUS: SI w/o. gas +

## INTERVAL B (As shown in Item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL - BBL:	GAS - MCF:	WATER - BBL:	PROD. METHOD:			
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU - GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL - BBL:	GAS - MCF:	WATER - BBL:	INTERVAL STATUS:

## INTERVAL C (As shown in Item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL - BBL:	GAS - MCF:	WATER - BBL:	PROD. METHOD:			
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU - GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL - BBL:	GAS - MCF:	WATER - BBL:	INTERVAL STATUS:

## INTERVAL D (As shown in Item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL - BBL:	GAS - MCF:	WATER - BBL:	PROD. METHOD:			
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU - GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL - BBL:	GAS - MCF:	WATER - BBL:	INTERVAL STATUS:

## 32. DISPOSITION OF GAS (Sold, Used for Fuel, Vented, Etc.)

vented waiting on gas connection

## 33. SUMMARY OF POROUS ZONES (Include Aquifers):

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.

## 34. FORMATION (Log) MARKERS:

Formation	Top (MD)	Bottom (MD)	Descriptions, Contents, etc.	Name	Top (Measured Depth)
Dakota	0	140	sandstone fine grain occasional dark gray		
Morrison	140	868	poorly sorted variegated red, green and gray		
Entrada	868		sandstone fine grain light gray		

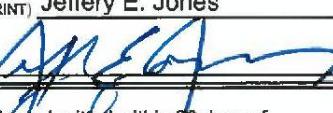
## 35. ADDITIONAL REMARKS (Include plugging procedure)

Morrison Formation 577-580 Flow tested while drilling: 1st flow 1.18 MCFD for 15 min @ 25.5 PSIA 1st SI 15 min built to 88 PSIA

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

NAME (PLEASE PRINT) Jeffery E. Jones

TITLE Managing Director

SIGNATURE 

DATE 9/4/2013

This report must be submitted within 30 days of

- completing or plugging a new well
- drilling horizontal laterals from an existing well bore
- recompleting to a different producing formation
- reentering a previously plugged and abandoned well
- significantly deepening an existing well bore below the previous bottom-hole depth
- drilling hydrocarbon exploratory holes, such as core samples and stratigraphic tests

\* ITEM 20: Show the number of completions if production is measured separately from two or more formations.

\*\* ITEM 24: Cement Top – Show how reported top(s) of cement were determined (circulated (CIR), calculated (CAL), cement bond log (CBL), temperature survey (TS)).

Send to: Utah Division of Oil, Gas and Mining  
1594 West North Temple, Suite 1210  
Box 145801  
Salt Lake City, Utah 84114-5801

Phone: 801-538-5340  
Fax: 801-359-3940

(5/2013)

RECEIVED: Sep. 05, 2013

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL	OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <u>helium</u>	5. LEASE DESIGNATION AND SERIAL NUMBER: <b>UTU 87659</b>	
2. NAME OF OPERATOR:	Flatirons Resources LLC			6. IF INDIAN, ALLOTTEE OR TRIBE NAME:	
3. ADDRESS OF OPERATOR:	11080 Circle Point Road #18	CITY Westminster	STATE CO	ZIP 80020	7. UNIT or CA AGREEMENT NAME:

4. LOCATION OF WELL	FOOTAGES AT SURFACE: 1402' FNL 757' FEL Sec 4, T19S, R25E	8. WELL NAME and NUMBER: <b>Flatirons Federal #1-4</b>
---------------------	---	---

9. API NUMBER: <b>4301950029</b>	10. FIELD AND POOL, OR WILDCAT: <b>Greater Cisco</b>
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SENE 4 19S 25E	COUNTY: <b>Grand County</b>
	STATE: <b>UTAH</b>

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

TYPE OF SUBMISSION	TYPE OF ACTION							
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate)	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION					
Approximate date work will start: <hr/>	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL					
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON					
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR					
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE					
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only)	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL					
Date of work completion: <hr/> 3/23/2015	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF					
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <u>Orifice Plate Change</u>					
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION						

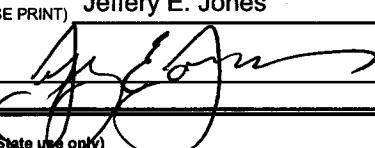
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The orifice plate was changed to increase the differential pressure from 0.750 to 0.625

RECEIVED

APR 06 2015

DIV. OF OIL, GAS & MINING

NAME (PLEASE PRINT)	Jeffery E. Jones	TITLE	Managing Director
SIGNATURE		DATE	3/30/2015
(This space for State use only)			

## INSTRUCTIONS

**This form shall be submitted by the operator to show the intention and/or completion of the following:**

- miscellaneous work projects and actions for which other specific report forms do not exist;
- all other work and events as identified in section 11, Type of Action, or as required by the Utah Oil and Gas Conservation General Rules, including:
  - minor deepening of an existing well bore,
  - plugging back a well,
  - recompleting to a different producing formation within an existing well bore (intent only),
  - reperforating the current producing formation,
  - drilling a sidetrack to repair a well,
  - reporting monthly the status of each drilling well.

**This form is not to be used for proposals to**

- drill new wells,
- reenter previously plugged and abandoned wells,
- significantly deepen existing wells below their current bottom-hole depth,
- drill horizontal laterals from an existing well bore,
- drill hydrocarbon exploratory holes such as core samples and stratigraphic tests.

**Use Form 3, Application for Permit to Drill (APD) for such proposals.**

**NOTICE OF INTENT** - A notice of intention to do work on a well or to change plans previously approved shall be submitted in duplicate and must be received and approved by the division before the work is commenced. The operator is responsible for receipt of the notice by the division in ample time for proper consideration and action. In cases of emergency, the operator may obtain verbal approval to commence work. Within five days after receiving verbal approval, the operator shall submit a Sundry Notice describing the work and acknowledging the verbal approval.

**SUBSEQUENT REPORT** - A subsequent report shall be submitted to the division within 30 days of the completion of the outlined work. Specific details of the work performed should be provided, including dates, well depths, placement of plugs, etc.

**WELL ABANDONMENT** - Proposals to abandon a well and subsequent reports of abandonment should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, and method of parting of any casing, liner, or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

In addition to any Sundry Notice forms submitted, **Form 8, Well Completion or Recompletion Report and Log** must be submitted to the division to report the results of the following operations:

- completing or plugging a new well,
- reentering a previously plugged and abandoned well,
- significantly deepening an existing well bore below the current bottom-hole depth,
- drilling horizontal laterals from an existing well bore,
- drilling hydrocarbon exploratory holes such as core samples and stratigraphic tests,
- recompleting to a different producing formation.

Send to:

Utah Division of Oil, Gas and Mining  
1594 West North Temple, Suite 1210  
Box 145801  
Salt Lake City, Utah 84114-5801

Phone: 801-538-5340

Fax: 801-359-3940



## Production Management Measurement, Analytical, Automation, Well Testing

Office: 970-245-2490 Fax: 970-245-2492 P.O.  
BOX 3866 Grand Junction, CO 81501

**FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT**

LOCATION NO.	100	COUNTY	GRAND		STATE	UTAH		DATE	3/23/2015						
STATION OR CUSTOMER	FEDERAL 1-4			RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000						
GPS LOCATION	LATITUDE N 39 11. 221'0"			LOGITUDE W 109 8.858"			ELEVATION 4955								
LEAK TEST	OK	PASSED	X	NOT PASSED	REPAIRED	NOT REPAIRED	TIME OF TEST 11:00 AM								
TRANSDUCER TYPE	WEATHERFORD CIM MVT				FLOW COMPUTER		0	SERIAL # S7138083JNC							
CALIBRATION EQUIP MODEL#, SERIAL# RECALIB DATE	PRESS	CRYSTAL MODEL IS33 36/3000psi, SERIAL 2262-145413, DUE 7-21-15			TEMP	THERMOPROBE MODEL TL-1W, SERIAL 1-9719, DUE 7-22-15		RTD	PIE, MODEL 211, SERIAL 110010, DUE 7-23-15						
DIFFERENTIAL TEST						STATIC TEST									
ANALOG	0	RANGE	0-400	ZERO UNDER PRESSURE	-0.01	ZERO AT ATMOS PRESSURE	0.00	ANALOG	1	RANGE	0-1500	BASE PRESS	14.73	ATMOS PRESS	12.36
LIVE DIFFERENTIAL FOUND		2.51		LIVE DIFFERENTIAL LEFT		69.30		LIVE STATIC PRESS FOUND		60.30		LIVE STATIC PRESS LEFT		66.30	
AS FOUND				AS LEFT				AS FOUND				AS LEFT			
CRYSTAL	FLOW COMPUTER		% ERROR		FLOW COMPUTER		CRYSTAL		FLOW COMPUTER		% ERROR		FLOW COMPUTER		
0	0.00		0.00%		0		0		0.06		-0.01%		0		
200	200.21		-0.05%		200		250		250.64		-0.13%		250		
400	400.73		-0.18%		400		500		500.39		-0.08%		500		
ORIFICE PLATE						TEMPERATURE TEST									
SIZE	2	X	0.750	BETA RATIO		0.375		ANALOG	3	RANGE		0-150			
PLATE CONDITION						DIRTY SMALL NICK Do not drive RTD if flowing temp. is + or- 0.5 degrees of test thermometer									
EDGES SHARP?	YES		SEAL RING CONDITION		GOOD		AS FOUND				AS LEFT				
BEVELED PLATE?	YES		BEVEL DOWN STREAM?		YES		DEVICE		FLOW COMPUTER		% ERROR		FLOW COMPUTER		
STAMPED OR MEASURED SIZE	0.750		MIC SIZE		NA						#DIV/0!				
ORIFICE FITTING						#DIV/0!									
SIZE	2.067	TYPE	DANIEL		STATIC TAP	US	#DIV/0!								
SERIAL #	13180234		METER TUBE ID		2.067		LINE TEMPERATURE								
REMARKS						AS FOUND		AS FOUND		AS LEFT		AS LEFT			
						THERMOMETER		FLOW COMPUTER		THERMOMETER		FLOW COMPUTER			
						66.8		66.8		Same		Same			
Calibrate meter update onsite meter card and process calibration report. Changed orifice plate from a .750 to a 6.25. filled out an orifice plate change report.															
TECHNICIAN SIGNATURE <i>Sam E. Thornhill</i>															
WITNESS NOTIFICATION										REVIEW					
COMPANY	BLM			CONTACT METHOD	Phone			REVIEWED BY			<i>John C. Malone</i>				
CONTACT	Jeff Brown/Lee Oliver			DATE	3/19/2015			DATE			3/27/2015				
WITNESS SIGNATURE	<i>Jeff Brown/Lee Oliver</i>			WITNESS DATE	3/23/2015										



Production Management  
Measurement, Analytical,  
Automation, Well Testing  
Office: 970-245-2490 Fax: 970-245-2492 P.O.  
BOX 3866 Grand Junction, CO 81501

### FLATIRON RESOURCES LLC - ORIFICE PLATE CHANGE REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	3/23/2015				
STATION OR CUSTOMER	FEDERAL 1-4		RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000			
LEAK TEST	OK	PASSED X	NOT PASSED	REPAIRED	NOT REPAIRED	TIME OF TEST	8:38 AM				
TRANSDUCER TYPE	WEATHERFORD CIM MVT				FLOW COMPUTER	0	SERIAL #	S7138083JNC			
DIFFERENTIAL					STATIC						
ANALOG INPUT #	0	RANGE	0-400	ANALOG INPUT #	1	RANGE	0-1500				
TEMPERATURE					BASE PRESSURE			14.73			
ANALOG IMPUTE #	2	RANGE	0-150	ATMOSPHERIC PRESSURE			12.36				
DIFFERENTIAL PRESSURE BEFOR PLATE CHANGE			2.51 INCHES H2O	DIFFERENTIAL PRESSURE AFTER PLATE CHANGE			69.3 INCHES H2O				
ORIFICE PLATE REMOVED					ORIFICE PLATE INSTALLED						
SIZE	2	X	0.750	BETA RATIO	0.375	SIZE	2.000	X	0.625	BETA RATIO	0.3125
PLATE CONDITION	DIRTY SMALL NICK				PLATE CONDITION	NEW					
EDGES SHARP?	YES	SEAL RING CONDITION	Good		EDGES SHARP?	YES	SEAL RING CONDITION	GOOD			
BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES		BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES			
STAMPED OR MEASURED SIZE	0.750	MIC SIZE	NA		STAMPED OR MEASURED SIZE	0.625	MIC SIZE	NC			
ORIFICE FITTING					ORIFICE FITTING						
SIZE	2.067	TYPE	DANIEL	STATIC TAP	US	SIZE	SAME	TYPE	SAME	TAPS	SAME
SERIAL #	13180234		METER TUBE ID	2.067		SERIAL NO.	SAME		INSIDE DIAMETER	SAME	
REMARKS											
The orifice plate was changed to increase the differential pressure. It was changed from .750 TO .625											
SIGNATURE <i>Sam E. Thornhill</i>											
WITNESS NOTIFICATION							REVIEW				
COMPANY	BLM		CONTACT METHOD	Phone		REVIEWED BY	<i>John C. Malone</i>				
CONTACT	Jeff Brown/Lee Oliver		DATE	3/19/2015		DATE	3/27/2015				
WITNESS SIGNATURE	<i>Jeff Brown/Lee Oliver</i>		WITNESS DATE	3/23/2015							

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL	OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <b>helium</b>	5. LEASE DESIGNATION AND SERIAL NUMBER: <b>UTU 87659</b>	
2. NAME OF OPERATOR:	Flatirons Resources LLC			6. IF INDIAN, ALLOTTEE OR TRIBE NAME:	
3. ADDRESS OF OPERATOR:	11080 Circle Point Road	CITY Westminster	STATE CO	ZIP 80020	7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL	FOOTAGES AT SURFACE: <b>1402' FNL 757' FEL Sec 4, T19S, R25E</b>			8. WELL NAME and NUMBER: <b>Flatirons Federal #1-4</b>	
				9. API NUMBER: <b>4301950029</b>	
				10. FIELD AND POOL, OR WILDCAT: <b>Greater Cisco</b>	
				COUNTY: <b>Grand County</b>	
	QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: <b>SENE 4 19S 25E</b>			STATE: <b>UTAH</b>	
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION	TYPE OF ACTION				
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate)	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION		
Approximate date work will start: <hr/>	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL		
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON		
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR		
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only)	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE		
Date of work completion: <hr/>	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL		
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF		
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <b>Flow Measurement Calibration Report</b>		
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION			

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

Cleaned and inspected the orifice plate and verified RTD, the differential and static pressures were calibrated

DU. OF OIL, GAS & MINING  
JUL 06 2015  
RECEIVED

NAME (PLEASE PRINT) Jeffery E. Jones

TITLE Managing Director

SIGNATURE 

DATE 7/1/2015

(This space for State use only)



Production Management  
Measurement, Analytical,  
Automation, Well Testing  
Office: 970-245-2490 Fax: 970-245-2492 P.O.  
BOX 3866 Grand Junction, CO 81501

FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	6/26/2015	
STATION OR CUSTOMER	Flatirons Federal #1-4		RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000
GPS LOCATION	LATITUDE N 39 11. 221'0"			LOGITUDE W 109 8.858"		ELEVATION 4955		
LEAK TEST	OK	PASSED	X	NOT PASSED	REPAIRED	NOT REPAIRED	TIME OF TEST	1:00 PM
TRANSDUCER TYPE	WEATHERFORD CIM MVT				FLOW COMPUTER	0	SERIAL #	S7138083JNC
CALIBRATION EQUIP MODEL#, SERIAL# RECALIB DATE	PRESS CRYSTAL IS33-36/3000 PSI, S/N 2262-840542, DUE DATE 04/14/2016	TEMP THERMOPROBE TL-1W, S/N 1-5710, DUE DATE 4/14/2016	RTD PIE, MODEL 211, SERIAL 109653, DUE 04/13/2016					
DIFFERENTIAL TEST					STATIC TEST			
ANALOG 0	RANGE 0-400	ZERO UNDER PRESSURE 0.06	ZERO AT ATMOS PRESSURE 0.03	ANALOG 1	RANGE 0-1500	BASE PRESS 14.73	ATMOS PRESS 12.36	
LIVE DIFFERENTIAL FOUND 86.99		LIVE DIFFERENTIAL LEFT 131.16		LIVE STATIC PRESS FOUND 73.51		LIVE STATIC PRESS LEFT 57.97		
AS FOUND			AS LEFT	AS FOUND			AS LEFT	
CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER	CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER	
0	0.03	-0.01%	0	0	0.18	-0.04%	0	
200	200.02	-0.01%	200	250	250.27	-0.05%	250	
400	400.57	-0.14%	400	500	500.31	-0.06%	500	
ORIFICE PLATE					TEMPERATURE TEST			
SIZE 2	X 0.625	BETA RATIO 0.3125		ANALOG 3	RANGE 0-150			
PLATE CONDITION Dirty				Do not drive RTD if flowing temp. is + or- 0.5 degrees of test thermometer				
EDGES SHARP?	YES	SEAL RING CONDITION	GOOD	AS FOUND			AS LEFT	
BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES	DEVICE	FLOW COMPUTER	% ERROR	FLOW COMPUTER	
STAMPED OR MEASURED SIZE	0.625	MIC SIZE	NA			#DIV/0!		
ORIFICE FITTING							#DIV/0!	
SIZE 2.067	TYPE DANIEL	STATIC TAP US				#DIV/0!		
SERIAL # 13180234	METER TUBE ID	2.067		LINE TEMPERATURE				
				AS FOUND	AS FOUND	AS LEFT	AS LEFT	
REMARKS				THERMOMETER	FLOW COMPUTER	THERMOMETER	FLOW COMPUTER	
				94.3	94.3	Same	Same	
Cleaned and inspected the orifice plate and verified the RTD, the differential and static pressures were calibrated.								
6/26/2015								
RECEIVED								
TECHNICIAN SIGNATURE				REVIEW				
WITNESS NOTIFICATION				REVIEW				
COMPANY		CONTACT METHOD		REVIEWED BY		John C. Malone		
CONTACT		DATE		DATE		6/30/2015		
WITNESS SIGNATURE		WITNESS DATE						

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

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1. TYPE OF WELL	OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER <u>helium</u>	5. LEASE DESIGNATION AND SERIAL NUMBER: <b>UTU 87659</b>	
2. NAME OF OPERATOR:	Flatirons Resources LLC			6. IF INDIAN, ALLOTTEE OR TRIBE NAME:	
3. ADDRESS OF OPERATOR:	11080 Circle Point Road #18	CITY Westminster	STATE CO	ZIP 80020	7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL	FOOTAGES AT SURFACE: 1402' FNL 757' FEL			8. WELL NAME and NUMBER: <b>Flatirons Federal #1-4</b>	
				9. API NUMBER: <b>4301950029</b>	
				10. FIELD AND POOL, OR WILDCAT: <b>Greater Cisco</b>	
				COUNTY: Grand	
	QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SENE 4 19S 25E			STATE: <b>UTAH</b>	
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION	TYPE OF ACTION				
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate)	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION		
Approximate date work will start: <hr/>	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL		
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON		
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR		
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only)	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE		
Date of work completion: <hr/> <b>9/30/2015</b>	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL		
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF		
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <u>Calibration Report</u>		
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION			

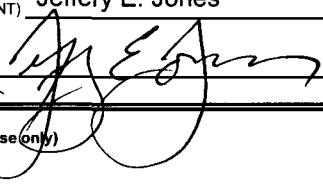
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Cleaned and inspected the orifice plate and verified the RTD, the differential and static pressures were calibrated

**RECEIVED**

OCT 13 2015

DIV. OF OIL, GAS & MINING

NAME (PLEASE PRINT)	<b>Jeffery E. Jones</b>	TITLE	<b>Managing Director</b>
SIGNATURE			
(This space for State use only)		DATE	<b>10/5/2015</b>



Production Management  
Measurement, Analytical,  
Automation, Well Testing

Office: 970-245-2490 Fax: 970-245-2492  
P.O. BOX 3866 Grand Junction, CO 81501

FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	9/30/2015		
STATION OR CUSTOMER	Flatirons Federal #1-4		RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000	
GPS LOCATION	LATITUDE N 39 11. 221'0"			LOGITUDE		W 109 8.858"		ELEVATION 4955	
LEAK TEST	OK	PASSED X	NOT PASSED	REPAIRED	NOT REPAIRED	TIME OF TEST		11:00 AM	
TRANSDUCER TYPE	WEATHERFORD CIM MVT			FLOW COMPUTER	0	SERIAL #		S7138083JNC	
CALIBRATION EQUIP MODEL#, SERIAL# RECALIB DATE	PRESS CRYSTAL IS33-36/3000 PSI, S/N 2262-840542, DUE DATE 04/14/2016	TEMP	THERMOPROBE TL-1W, S/N 1-5710, DUE DATE 4/14/2016		RTD	PIE, MODEL 211, SERIAL 109653, DUE 04/13/2016			
<b>DIFFERENTIAL TEST</b>				<b>STATIC TEST</b>					
ANALOG 0	RANGE 0-400	ZERO UNDER PRESSURE -0.01	ZERO AT ATMOS PRESSURE -0.02	ANALOG 1	RANGE 0-1500	BASE PRESS 14.73	ATMOS PRESS 12.36		
LIVE DIFFERENTIAL FOUND -0.01		LIVE DIFFERENTIAL LEFT 0.00		LIVE STATIC PRESS FOUND 106.82		LIVE STATIC PRESS LEFT 106.70			
<b>AS FOUND</b>			<b>AS LEFT</b>		<b>AS FOUND</b>			<b>AS LEFT</b>	
CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER	CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER		
0	-0.02	0.01%	0	0	-0.06	0.01%	0		
200	199.95	0.01%	200	250	249.94	0.01%	250		
400	399.77	0.06%	400	500	499.86	0.03%	500		
<b>ORIFICE PLATE</b>				<b>TEMPERATURE TEST</b>					
SIZE 2	X 0.625	BETA RATIO 0.3125	ANALOG 3	RANGE 0-150					
PLATE CONDITION			Dirty						Do not drive RTD if flowing temp. is + or- 0.5 degrees of test thermometer
EDGES SHARP?	YES	SEAL RING CONDITION	GOOD	AS FOUND			AS LEFT		
BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES	DEVICE	FLOW COMPUTER	% ERROR	FLOW COMPUTER		
STAMPED OR MEASURED SIZE	0.625	MIC SIZE	NA			#DIV/0!			
<b>ORIFICE FITTING</b>				<b>LINE TEMPERATURE</b>					
SIZE 2.067	TYPE DANIEL	STATIC TAP US		AS FOUND				AS LEFT	
SERIAL # 13180234	METER TUBE ID	2.067		THERMOMETER	FLOW COMPUTER	THERMOMETER	FLOW COMPUTER		
REMARKS				93.6	93.3	Same	Same		
Cleaned and inspected the orifice plate and verified the RTD, the differential and static pressures were calibrated.									
<b>RECEIVED</b> OCT 13 2015									
DIV. OF OIL, GAS & MINING									
TECHNICIAN SIGNATURE <i>Benjamin Thornhill</i>									
<b>WITNESS NOTIFICATION</b>							<b>REVIEW</b>		
COMPANY			CONTACT METHOD			REVIEWED BY	<i>John C. Malone</i>		
CONTACT			DATE			DATE	10/4/2015		
WITNESS SIGNATURE			WITNESS DATE						

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

RECEIVED

DEC 10 2015

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

DIV OF OIL GAS & MINING

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.

1. TYPE OF WELL	OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/> helium	
2. NAME OF OPERATOR:	Flatirons Resources LLC			
3. ADDRESS OF OPERATOR:	11080 Circle Point Road #18	CITY Westminster	STATE CO ZIP 80020	PHONE NUMBER: (303) 292-3902
4. LOCATION OF WELL	FOOTAGES AT SURFACE: 1402' FNL 757' FEL Sec 4, T19S, R25E			COUNTY: Grand

QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SENE 4 19S 25E

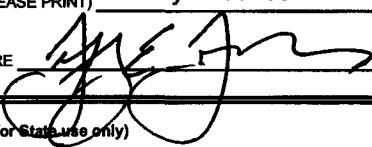
STATE: UTAH

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)	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
Approximate date work will start:  _____	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only)	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
Date of work completion:  12/2/2015	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <u>Electronic Flow Measurement Report</u>
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

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

Cleaned and inspected the orifice plate - it was hydrated and iced over creating a smaller orifice size and high differential. Calibrated the differential and static pressures and verified temperatures.

NAME (PLEASE PRINT)	Jeffery E. Jones	TITLE	Managing Director
SIGNATURE		DATE	12/9/2015
(This space for State use only)			



Production Management  
Measurement, Analytical,  
Automation, Well Testing

Office: 970-245-2490 Fax: 970-245-2492 P.O.  
BOX 3866 Grand Junction, CO 81501

RECEIVED  
DEC 10 2015

FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	12/2/2015
STATION OR CUSTOMER	Flatirons Federal #1-4	RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000
GPS LOCATION	LATITUDE N 39 11. 221'0"			LOGITUDE	W 109 8.858"		ELEVATION 4955
LEAK TEST	OK	PASSED	X	NOT PASSED	REPAIRED	NOT REPAIRED	TIME OF TEST 11:00 AM
TRANSDUCER TYPE	WEATHERFORD CIM MVT				FLOW COMPUTER	0	SERIAL # S7138083JNC
CALIBRATION EQUIP MODEL#, SERIAL#, RECALIB DATE	PRESS CRYSTAL MODEL IS33 16/3000psi, SERIAL 2564-144532 DUE 6-17-16	TEMP	THERMOPROBE MODEL TL-1W, SERIAL 1-5802, DUE 6-18-16			RTD ALETK SERIES 11, SERIAL 161092 DUE 6-17-16	
DIFFERENTIAL TEST					STATIC TEST		
ANALOG 0	RANGE 0-400	ZERO UNDER PRESSURE -0.01	ZERO AT ATMOS PRESSURE 0.06	ANALOG 1	RANGE 0-1500	BASE PRESS 14.73	ATMOS PRESS 12.36
LIVE DIFFERENTIAL FOUND 236.60	LIVE DIFFERENTIAL LEFT 169.40	LIVE STATIC PRESS FOUND 34.10			LIVE STATIC PRESS LEFT 30.60		
AS FOUND			AS LEFT	AS FOUND			AS LEFT
CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER	CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER
0	0.06	-0.02%	0	0	0.00	0.00%	0
200	199.88	0.03%	200	250	249.85	0.03%	250
400	399.67	0.08%	400	500	499.55	0.09%	500
ORIFICE PLATE					TEMPERATURE TEST		
SIZE 2	X 0.625	BETA RATIO 0.3125	ANALOG 3			RANGE 0-150	
PLATE CONDITION	Hydrates on plate			Do not drive RTD if flowing temp. is + or- 0.5 degrees of test thermometer			
EDGES SHARP?	YES	SEAL RING CONDITION	GOOD	AS FOUND			AS LEFT
BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES	DEVICE	FLOW COMPUTER	% ERROR	FLOW COMPUTER
STAMPED OR MEASURED SIZE	0.625	MIC SIZE	NA			#DIV/0!	
ORIFICE FITTING						#DIV/0!	
SIZE 2.067	TYPE DANIEL	STATIC TAP US				#DIV/0!	
SERIAL # 13180234	METER TUBE ID	2.067	LINE TEMPERATURE				
			AS FOUND	AS FOUND	AS LEFT	AS LEFT	
REMARKS			THERMOMETER	FLOW COMPUTER	THERMOMETER	FLOW COMPUTER	
			30.4	30.5	Same	Same	
Cleaned and inspected the orifice plate it was hydrated and iced over creating a smaller orifice size and high differential. Calibrated the differential and static pressures and verified temperature.							
TECHNICIAN SIGNATURE <i>Sam E. Thonhill</i>							
WITNESS NOTIFICATION							
COMPANY	BLM	CONTACT METHOD	Phone message		REVIEWED BY	<i>John C. Malone</i>	
CONTACT	Jeff Brown	DATE	11/30/2015		DATE	12/7/2015	
WITNESS SIGNATURE			WITNESS DATE				

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL	OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <u>helium</u>	5. LEASE DESIGNATION AND SERIAL NUMBER: <b>UTU 87659</b>	
2. NAME OF OPERATOR:	Flatirons Resources LLC			6. IF INDIAN, ALLOTTEE OR TRIBE NAME:	
3. ADDRESS OF OPERATOR:	11080 Circle Point Rd #180	CITY <u>Westminster</u>	STATE <u>CO</u>	ZIP <u>80020</u>	7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL	FOOTAGES AT SURFACE: <b>1402 FNL 757 FEL Sec 4, T19S, R25E</b>			8. WELL NAME and NUMBER: <b>Flatirons Federal #1-4</b>	
	QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: <b>SENE 4 19S 25E</b>			9. API NUMBER: <b>4301950029</b>	
				10. FIELD AND POOL, OR WILDCAT: <b>Greater Cisco</b>	
				COUNTY: <b>Grand County</b>	
				STATE: <b>UTAH</b>	

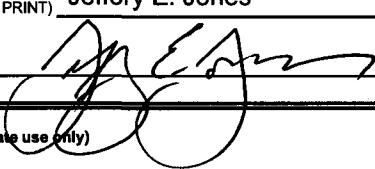
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate)	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> DEEPEN <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> ALTER CASING <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> PLUG BACK <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> PRODUCTION (START/RESUME) <input type="checkbox"/> WATER SHUT-OFF <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> RECLAMATION OF WELL SITE <input checked="" type="checkbox"/> OTHER: <u>Calibration</u> <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION
Approximate date work will start:  _____  <input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only)	
Date of work completion:  <u>6/13/2016</u>	

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

Cleaned and inspected orifice plate. Calibrated the differential and static pressures and verified temperature.

RECEIVED  
JUN 23  
DIV. OF OIL, GAS, & MINING

NAME (PLEASE PRINT)	<u>Jeffery E. Jones</u>	TITLE	<u>Managing Director</u>
SIGNATURE		DATE	<u>6/14/2016</u>
(This space for State use only)			



Production Management  
Measurement, Analytical,  
Automation, Well Testing  
Office: 970-245-2490 Fax: 970-245-2492 P.O.  
BOX 3866 Grand Junction, CO 81501

FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	6/13/2016
STATION OR CUSTOMER	Flatirons Federal #1-4	RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000
GPS LOCATION	LATITUDE N 39 11. 221'0"			LOGITUDE	W 109 8.858"		ELEVATION 4955
LEAK TEST	OK	PASSED	X	NOT PASSED	REPAIRED	NOT REPAIRED	TIME OF TEST 1:30 PM
TRANSDUCER TYPE	WEATHERFORD CIM MVT			FLOW COMPUTER	0		SERIAL # S7138083JNC
CALIBRATION EQUIP MODEL#, SERIAL# RECALIB DATE	PRESS	CRYSTAL MODEL IS33 16/3000psi, SERIAL 2564-144532 DUE 6-17-16	TEMP	THERMOPROBE MODEL TL-1W, SERIAL 1-5802, DUE 6-18-16		RTD	ALETK SERIES 11, SERIAL 161092 DUE 6-17-16
DIFFERENTIAL TEST				STATIC TEST			
ANALOG 0	RANGE 0-400	ZERO UNDER PRESSURE -0.01	ZERO AT ATMOS PRESSURE -0.04	ANALOG 1	RANGE 0-1500	BASE PRESS 14.73	ATMOS PRESS 12.36
LIVE DIFFERENTIAL FOUND 105.40	LIVE DIFFERENTIAL LEFT 0.06		LIVE STATIC PRESS FOUND 19.80		LIVE STATIC PRESS LEFT 83.20		
AS FOUND			AS LEFT	AS FOUND			AS LEFT
CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER	CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER
0	-0.04	0.01%	0.01	0	-0.04	0.01%	0
200	200.12	-0.03%	200	250	250.64	-0.13%	250
400	400.93	-0.23%	400.02	500	500.48	-0.10%	500.03
ORIFICE PLATE				TEMPERATURE TEST			
SIZE 2	X 0.625	BETA RATIO 0.3125		ANALOG 3		RANGE 0-150	
PLATE CONDITION	White greasy substance on plate			Do not drive RTD if flowing temp. is + or - 0.5 degrees of test thermometer			
EDGES SHARP?	YES	SEAL RING CONDITION	GOOD	AS FOUND			AS LEFT
BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES	DEVICE	FLOW COMPUTER	% ERROR	FLOW COMPUTER
STAMPED OR MEASURED SIZE:	0.625	MIC SIZE	NA			#DIV/0!	
ORIFICE FITTING						#DIV/0!	
SIZE 2.067	TYPE DANIEL (Flanged Taps)	STATIC TAP	US			#DIV/0!	
SERIAL # 13180234	METER TUBE ID	2.067		LINE TEMPERATURE			
				AS FOUND	AS FOUND	AS LEFT	AS LEFT
				THERMOMETER	FLOW COMPUTER	THERMOMETER	FLOW COMPUTER
REMARKS				77.8	77.9	Same	Same
IP address 166.142.167.183. Cleaned and inspected the orifice plate it was coated in a white greasy substance not hydrates creating a smaller orifice size and high differential. Calibrated the differential and static pressures and verified temperature. Compressor went down durring calibration increased pressure and lowered flow differential.							
TECHNICIAN SIGNATURE <i>Sam E. Thornhill</i>							
WITNESS NOTIFICATION							
COMPANY	BLM	CONTACT METHOD	Phone message		REVIEWED BY	<i>Cathy Theobald</i>	
CONTACT	Jeff Brown	DATE	6/13/2016		DATE	6/14/2016	
WITNESS SIGNATURE		WITNESS DATE					

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL	OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <u>helium</u>	5. LEASE DESIGNATION AND SERIAL NUMBER: <b>UTU 87659</b>
2. NAME OF OPERATOR: <b>Flatirons Resources LLC</b>				6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
3. ADDRESS OF OPERATOR: 11080 Circle Point Road #18	CITY <u>Westminster</u>	STATE <u>CO</u>	ZIP <u>80020</u>	7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL				8. WELL NAME and NUMBER: <b>Flatirons Federal 1-4</b>
FOOTAGES AT SURFACE: <b>1402' FNL 757' FEL Sec 4, T19S, R25E</b>				9. API NUMBER: <b>4301950029</b>
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: <b>SENE 4 19S 25E</b>				10. FIELD AND POOL, OR WILDCAT: <b>Greater Cisco</b>
STATEMENT: <b>Grand County</b>				COUNTY: <b>Grand County</b>
STATEMENT: <b>UTAH</b>				STATE: <b>UTAH</b>

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

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate)	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
Approximate date work will start:  _____	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only)	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
Date of work completion: <b>12/15/2016</b>	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <u>Calibration Report</u>
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

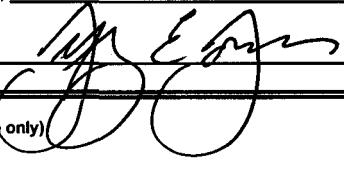
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Calibrated the differential and static pressure and verified temperature. Cleaned and inspected the orifice plate. Updated meter card, saved configuration and process report.

**RECEIVED**

**JAN 09 2017**

**DIV. OF OIL, GAS & MINING**

NAME (PLEASE PRINT)	<b>Jeffery E. Jones</b>	TITLE	<b>Managing Director</b>
SIGNATURE		DATE	<b>1/5/2017</b>
(This space for State use only)			



Production Management  
Measurement, Analytical,  
Automation, Well Testing

Office: 970-245-2490 Fax: 970-245-2492  
P.O. BOX 3866 Grand Junction, CO 81501

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JAN 09 2017

DIV. OF OIL, GAS & MINING

FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	12/14/2016
STATION OR CUSTOMER	Flatirons Federal #1-4	RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000
GPS LOCATION	N 39 11. 221'.0"			LOGITUDE	W 109 8.858"		ELEVATION 4955
LEAK TEST	OK	PASSED X	NOT PASSED	REPAIRED	NOT REPAIRED	TIME OF TEST	11:30 AM
TRANSDUCER TYPE	WEATHERFORD CIM MVT			FLOW COMPUTER	0	SERIAL #	S7138083JNC
CALIBRATION EQUIP MODEL#, SERIAL# RECALIB DATE	PRESS CRYSTAL MODEL IS33 36/3000psi, SERIAL 2262-637684 DUE 4-27-17	TEMP	THERMOPROBE MODEL TL-1W, SERIAL 1-5710, DUE 4-27-17			RTD	PIE 211 SERIAL 109653 DUE 4-27-17

DIFFERENTIAL TEST

STATIC TEST

ANALOG 0	RANGE 0-400	ZERO UNDER PRESSURE 0.06	ZERO AT ATMOS PRESSURE 0.07	ANALOG 1	RANGE 0-1500	BASE PRESS 14.73	ATMOS PRESS 12.36
LIVE DIFFERENTIAL FOUND 176.90	LIVE DIFFERENTIAL LEFT 306.20	LIVE STATIC PRESS FOUND 18.20	LIVE STATIC PRESS LEFT 44.60				
AS FOUND		AS LEFT		AS FOUND		AS LEFT	
CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER	CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER
0	0.07	-0.02%	0	0	-0.07	0.01%	0
200	200.04	-0.01%	200.01	250	249.53	0.09%	250.01
400	399.41	0.15%	400	500	499.82	0.04%	500.02

ORIFICE PLATE

TEMPERATURE TEST

SIZE 2	X 0.625	BETA RATIO 0.3125	ANALOG 3	RANGE 0-150
PLATE CONDITION	Good dirty			
EDGES SHARP?	YES	SEAL RING CONDITION GOOD	AS FOUND	AS LEFT
BEVELED PLATE?	YES	BEVEL DOWN STREAM? YES	DEVICE	FLOW COMPUTER
STAMPED OR MEASURED SIZE	0.625	MIC SIZE NA		#DIV/0!
ORIFICE FITTING				#DIV/0!
SIZE 2.067	TYPE DANIEL (Flanged Taps)	STATIC TAP US		#DIV/0!
SERIAL # 13180234	METER TUBE ID 2.067		LINE TEMPERATURE	
			AS FOUND	AS FOUND
			THERMOMETER	FLOW COMPUTER
REMARKS		42.5	42.5	Same
#DIV/0!				

Calibrated the differential and static pressure and verified the temperature. Cleaned and inspected the orifice plate. Updated meter card, saved configuration and process report. Confirmed communications to Scada Lynks. Meter was showing 0 differential and no flow. Tied back into the RTU and preformed and MVT reset and recalibrated differential. The readings came back in. Confirmed communications back to Scada Lynks.

TECHNICIAN SIGNATURE	Sam E. Thornhill		
WITNESS NOTIFICATION		REVIEW	
COMPANY	CONTACT METHOD	REVIEWED BY	Cathy Theobald
CONTACT	DATE	DATE	12/15/2016
WITNESS SIGNATURE	WITNESS DATE		

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL	OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <u>helium</u>	5. LEASE DESIGNATION AND SERIAL NUMBER: <b>UTU 87659</b>	
2. NAME OF OPERATOR:	Flatirons Resources LLC			6. IF INDIAN, ALLOTTEE OR TRIBE NAME:	
3. ADDRESS OF OPERATOR:	11080 Circle Point Road #18	CITY <u>Westminster</u>	STATE <u>CO</u>	ZIP <u>80020</u>	7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL	FOOTAGES AT SURFACE: <b>1402'FNL 757' FEL Sec4,T19S,R25E</b>			8. WELL NAME and NUMBER: <b>Flatirons Federal #1-4</b>	
				9. API NUMBER: <b>4301950029</b>	
				10. FIELD AND POOL, OR WILDCAT: <b>Greater Cisco</b>	
				COUNTY: <b>Grand County</b>	
	QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: <b>SENE 4 19S 25E</b>			STATE: <b>UTAH</b>	

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

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate)	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
Approximate date work will start: <hr/>	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only)	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
Date of work completion: <hr/> <b>3/17/2017</b>	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: <u>Calibration Report</u>
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

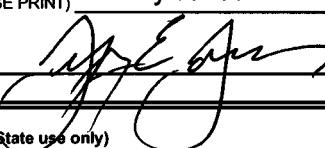
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Calibrated the differential and static pressure and verified the temperature. Cleaned and inspected the orifice plate. Updated meter card. Confirmed communications to Scada Link after calibration.

**RECEIVED**

**MAR 24 2017**

**DIV. OF OIL, GAS & MINING**

NAME (PLEASE PRINT)	<u>Jeffery Jones</u>	TITLE	<u>Managing Director</u>
SIGNATURE		DATE	<u>3/21/2017</u>
(This space for State use only)			



Production Management  
Measurement, Analytical,  
Automation, Well Testing  
Office: 970-245-2490 Fax: 970-245-2492  
P.O. BOX 3866 Grand Junction, CO 81501

## FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	3/16/2017
STATION OR CUSTOMER	Flatirons Federal #1-4	RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000
GPS LOCATION	LATITUDE N 39 11. 221'0"			LOGITUDE	W 109 8.858"		ELEVATION 4955
LEAK TEST	OK	PASSED X	NOT PASSED	REPAIRED	NOT REPAIRED	TIME OF TEST	11:00 AM
TRANSDUCER TYPE	WEATHERFORD CIM MVT			FLOW COMPUTER	0	SERIAL #	S7138083JNC
CALIBRATION EQUIP MODEL#, SERIAL# RECALIB DATE	PRESS CRYSTAL MODEL IS33 36/3000psi, SERIAL 2262-637684 DUE 4-27-17	TEMP	THERMOPROBE MODEL TL-1W, SERIAL 1-5710, DUE 4-27-17			RTD PIE 211 SERIAL 109653 DUE 4-27-17	
DIFFERENTIAL TEST				STATIC TEST			
ANALOG 0	RANGE 0-400	ZERO UNDER PRESSURE 0.01	ZERO AT ATMOS PRESSURE 0.00	ANALOG 1	RANGE 0-1500	BASE PRESS 14.73	ATMOS PRESS 12.36
LIVE DIFFERENTIAL FOUND 203.60		LIVE DIFFERENTIAL LEFT 201.50		LIVE STATIC PRESS FOUND 30.00		LIVE STATIC PRESS LEFT 30.00	
AS FOUND			AS LEFT	AS FOUND			AS LEFT
CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER	CRYSTAL	FLOW COMPUTER	% ERROR	FLOW COMPUTER
0	0.00	0.00%	0.03	0	0.04	-0.01%	0
200	200.06	-0.02%	200.04	250	250.38	-0.08%	250
400	400.37	-0.09%	400.02	500	500.22	-0.04%	500.01
ORIFICE PLATE				TEMPERATURE TEST			
SIZE 2	X 0.625	BETA RATIO 0.3125		ANALOG 3		RANGE 0-150	
PLATE CONDITION Good dirty				Do not drive RTD if flowing temp. is + or - 0.5 degrees of test thermometer			
EDGES SHARP?	YES	SEAL RING CONDITION	GOOD	AS FOUND			AS LEFT
BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES	DEVICE	FLOW COMPUTER	% ERROR	FLOW COMPUTER
STAMPED OR MEASURED SIZE	0.625	MIC SIZE	NA			#DIV/0!	
ORIFICE FITTING						#DIV/0!	
SIZE 2.067	TYPE DANIEL (Flanged Taps)	STATIC TAP US				#DIV/0!	
SERIAL # 13180234	METER TUBE ID	2.067	LINE TEMPERATURE				
			AS FOUND	AS FOUND	AS LEFT	AS LEFT	
REMARKS			THERMOMETER	FLOW COMPUTER	THERMOMETER	FLOW COMPUTER	
			62.7	62.7	Same	Same	
Calibrated the differential and static pressure and verified the temperature. Cleaned and inspected the orifice plate. Updated meter card, saved configuration and process report. Confirmed communications to Scada Lynks.							
TECHNICIAN SIGNATURE				<i>Sam E. Thornhill</i>			
WITNESS NOTIFICATION						REVIEW	
COMPANY		CONTACT METHOD		REVIEWED BY		<i>Cathy Theobald</i>	
CONTACT		DATE		DATE		3/17/2017	
WITNESS SIGNATURE		WITNESS DATE					

<b>STATE OF UTAH</b> DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9	
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b>		<b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b> UTU87659	
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b>	
<b>1. TYPE OF WELL</b>		<b>8. WELL NAME and NUMBER:</b> Flatirons Federal 1-4	
<b>2. NAME OF OPERATOR:</b> FLATIRONS RESOURCES, LLC		<b>9. API NUMBER:</b> 43019500290000	
<b>3. ADDRESS OF OPERATOR:</b> 11080 CIRCLE POINT ROAD, SUITE 180 , WESTMINSTER, CO, 800202771		<b>4. LOCATION OF WELL</b> FOOTAGES AT SURFACE: 1402 FNL 757 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SENE Section: 4 Township: 19S Range: 25E Meridian: S	<b>PHONE NUMBER:</b> 303-292-3900 <b>9. FIELD and POOL or WILDCAT:</b> GREATER CISCO
			<b>COUNTY:</b> GRAND
			<b>STATE:</b> UTAH
<b>11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA</b>			
<b>TYPE OF SUBMISSION</b>	<b>TYPE OF ACTION</b>		
<input type="checkbox"/> <b>NOTICE OF INTENT</b> Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text" value="calibration report"/>
<input checked="" type="checkbox"/> <b>SUBSEQUENT REPORT</b> Date of Work Completion: 6/21/2017			
<input type="checkbox"/> <b>SPUD REPORT</b> Date of Spud:			
<input type="checkbox"/> <b>DRILLING REPORT</b> Report Date:			
<b>12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS.</b> Clearly show all pertinent details including dates, depths, volumes, etc.			
Use of new on shore order number 5 compliance report. Calibrated the differential and verified the static pressure and temperature. Inspected and cleaned orifice plate			
<i>Accepted by the</i> <b>Utah Division of</b> <b>Oil, Gas and Mining</b> <b>FOR RECORD ONLY</b> July 20, 2017			
<b>NAME (PLEASE PRINT)</b> Sharon Wells	<b>PHONE NUMBER</b> 303 292-3902	<b>TITLE</b> Sr. Engr. Tech	
<b>SIGNATURE</b> N/A		<b>DATE</b> 6/23/2017	



**Production Management  
Measurement, Analytical,  
Automation, Well Testing**

Office: 970-245-2490 Fax: 970-245-2492 P.O.  
BOX 3866 Grand Junction, CO 81501

## FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	6/21/2017					
STATION OR CUSTOMER	Flatirons Federal #1-4		RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000				
GPS LOCATION	N 39° 11. 221'0"		W 109° 8.858"	ELEVATION	4955	LAST CAL DATE	3/16/2017	TIME OF TEST	11:30 AM			
FLOW COMPUTER	WEATHERFORD		MAKE	K500	CALCULATION METHOD	LEAK TEST	OK	PASS	X	NO PASS	FIXED	NOT FIXED
TRANSDUCER TYPE	WEATHERFORD CIM		MODEL NUMBER	KA7233-15P	SERIAL NUMBER	S7138083JNC	ACCY MVT SPAN DP/SP	0.025%	TEMP deg F	1.00	MVT FC #	1
ATMOS DEVICE	MONARK MODEL 5696-0321-Cal SER# 40000252, CAL DATE 1-19-17		PRESS DEVICE	CRYSTAL MODEL IS336/3000, SER# 2262-637684, CAL DATE 4-27-16	TEMP DEVICE	THERMOPROBE TL-1W, SER# 1-9574, CAL DATE 10-24-16	RTD DEVICE	PIE 211 SER# 109653, CAL DATE 4-27-16				
PRESS RANGE	4.4 TO 17.4 PSI	ACCY ACCY 0.003	PRESS RANGE	0-3000 PSI 0.996.5" H2O	ACCY IN PSI 1.5 0.05% IN H2O	ACCY IN 0.218 0.10% DEG F	OHMS RANGE	10-2000 Ohms 0.025%	ACCY IN DEG F	0.19		
DIFFERENTIAL TEST						STATIC TEST						
AI # 0	DEVICE RANGE 0" H2O 400	ZERO UNDER PRESSURE	AS Found 0.01	AS LEFT 0.01	AI # 1	DEVICE RANGE 0 PSIA 1500	BASE PRESS	14.73	ATMOS PRESS	12.36		
	CALIB RANGE 0" H2O 400					CALIB RANGE 0 PSIG 500						
MVT ACCY OF CAL RANGE in INCH H2O 0.10	LIVE DIFF READING	AS Found 176.60	AS LEFT 2.70	MVT ACCY OF CAL RANGE in PSI 0.13	LIVE STATIC READING	AS Found 17.90	AS LEFT	50.80				
AS FOUND			ALLOWABLE THRESHOLD 0.510	AS LEFT	AS FOUND			ALLOWABLE THRESHOLD 1.505	AS LEFT			
TEST DEVICE	FLOW COMPUTER	DIFFERENCE	FLOW COMPUTER	TEST DEVICE (PSIG)	FLOW COMPUTER (PSIG)	DIFFERENCE	FLOW COMPUTER (PSIG)					
ZERO ATOMOS 0	0.010	-0.010	0.00	ZERO 0	0.050	-0.050	Same					
AVG DP 180	180.000	0.000	180.00	AVG SP 30	30.090	-0.090	Same					
FULL RANGE 400	400.550	-0.550	400.04	FULL RANGE 500	500.290	-0.290	Same					
ORIFICE PLATE						TEMPERATURE TEST						
SIZE 2	X 0.625	BETA RATIO 0.3125	AI # 2	DEVICE RANGE	-50° to +250° F		CALIB RANGE	0° to +150° F				
PLATE CONDITION	Good Coated with soda ash material			Do not Test if flowing temp. is ± 0.5° F of test thermometer								
EDGES SHARP?	YES	SEAL RING CONDITION	GOOD	AS FOUND			ALLOWABLE THRESHOLD 1.018	AS LEFT				
BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES	DEVICE	FLOW COMPUTER	DIFFERENCE	FLOW COMPUTER					
STAMPED SIZE 0.6250	SURFACE CONDITION	GOOD	ZERO			0.000						
ORIFICE PLATE FITTING						AVG TEMP		0.000				
MAKE Daniel	TYPE FLANGED TAPS	STATIC TAP	UP STREAM	FULL RANGE			0.000					
SERIAL # 13180234	METER TUBE ID	2.067	LINE TEMPERATURE									
BASE CALC INFORMATION	ATMOS PRESS 14.73	TEMPERATURE 60° F	SPECIFIC GRAVITY 1.0	AS FOUND	AS FOUND	AS LEFT	AS LEFT					
SPECIFIC GRAVITY 0.8838	SELLER	Flatiron Resources LLC		THERMOMETER	FLOW COMPUTER	THERMOMETER	FLOW COMPUTER					
REMARKS	PURCHASER	IACX Energy, LLC		96.20	96.20	Same	Same					
Gather information and build a new on shore order number 5 compliance report. Calibrated the differential and verified the static and temperature. Inspected orifice plate it had a thick coating of a white soda ash material on the upstream and downstream sides of the plate. I was able to clean and inspect plate and put back into service. It appeared the production plant quit pulling gas from the wells during calibration causing the static pressure to increase on the as left readings. Updated meter card, saved configuration and process report. Confirmed communications to Scada Lynks.												
TECHNICIAN SIGNATURE <i>Sam E. Thornhill</i>												
WITNESS NOTIFICATION						REVIEW						
COMPANY			CONTACT METHOD			REVIEWED BY						
CONTACT			DATE			DATE						
WITNESS SIGNATURE			WITNESS DATE									

<b>STATE OF UTAH</b> DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9	
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b>		<b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b> UTU87659	
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b>  <b>7. UNIT or CA AGREEMENT NAME:</b>  <b>8. WELL NAME and NUMBER:</b> Flatirons Federal 1-4	
<b>1. TYPE OF WELL</b>		<b>9. API NUMBER:</b> 43019500290000	
<b>2. NAME OF OPERATOR:</b> FLATIRONS RESOURCES, LLC		<b>9. FIELD and POOL or WILDCAT:</b> 2 GREATER CISCO	
<b>3. ADDRESS OF OPERATOR:</b> 11080 CIRCLE POINT ROAD, SUITE 180 , WESTMINSTER, CO, 800202771		<b>PHONE NUMBER:</b> 303-292-3902	
<b>4. LOCATION OF WELL</b> FOOTAGES AT SURFACE: 1402 FNL 757 FEL <b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b> Qtr/Qtr: SENE Section: 4 Township: 19S Range: 25E Meridian: S		<b>COUNTY:</b> GRAND	
		<b>STATE:</b> UTAH	
<b>11.</b> CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
<b>TYPE OF SUBMISSION</b>	<b>TYPE OF ACTION</b>		
<input checked="" type="checkbox"/> <b>NOTICE OF INTENT</b> Approximate date work will start: 9/8/2017	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input checked="" type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION <b>OTHER:</b> <input type="text" value="Calibration Report"/>
<input type="checkbox"/> <b>SUBSEQUENT REPORT</b> Date of Work Completion:			
<input type="checkbox"/> <b>SPUD REPORT</b> Date of Spud:			
<input type="checkbox"/> <b>DRILLING REPORT</b> Report Date:			
<b>12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS.</b> Clearly show all pertinent details including dates, depths, volumes, etc. calibration on static, differential and temperature. Inspected and cleaned orifice plate. Updated meter card, saved configuration and process report. Confirmed communications to Scada Lynx IP 166.142.167.183.			
			Accepted by the Utah Division of Oil, Gas and Mining <b>FOR RECORD ONLY</b> September 28, 2017
<b>NAME (PLEASE PRINT)</b> Sharon Wells		<b>PHONE NUMBER</b> 720-636-9630	<b>TITLE</b> Sr. Engr. Tech
<b>SIGNATURE</b> N/A		<b>DATE</b> 9/8/2017	



**Production Management  
Measurement, Analytical,  
Automation, Well Testing**

Office: 970-245-2490 Fax: 970-245-2492  
P.O. BOX 3866 Grand Junction, CO 81501

## FLATIRON RESOURCES LLC - ELECTRONIC FLOW MEASUREMENT CALIBRATION REPORT

LOCATION NO.	100	COUNTY	GRAND	STATE	UTAH	DATE	9/7/2017				
STATION OR CUSTOMER	Flatirons Federal #1-4	RTU ADDRESS	100	RTU GROUP	21	FEDERAL LEASE #	UTU87659 API 430-195-002-90000				
GPS LOCATION	N 39° 11. 221'0"	W 109° 8.858"	ELEVATION	4955	LAST CAL DATE	6/21/2017	TIME OF TEST	11:30 AM			
FLOW COMPUTER	WEATHERFORD	MAKE	K500	CALCULATION METHOD	AGA 3 1992, AGA 8 DETAIL	LEAK TEST	OK	PASS X	NO PASS	FIXED	NOT FIXED
TRANSDUCER TYPE	WEATHERFORD CIM	MODEL NUMBER	KA7233-15P	SERIAL NUMBER	S7138083JNC	ACCY MVT SPAN DP/SP	0.025%	TEMP deg F	1.00	MVT FC #	1
ATMOS DEVICE	MONARK MODEL 5696-0321-Cal SER# 40000252, CAL DATE 1-19-17	PRESS DEVICE	CRYSTAL MODEL IS336/3000, SER# 2262-637684, CAL DATE 4-27-16	TEMP DEVICE	THERMOPROBE TL-1W, SER# 1-9574, CAL DATE 10-24-16	RTD DEVICE	PIE 211 SER# 109653, CAL DATE 4-27-16				
PRESS RANGE	4.4 TO 17.4 ACCY 0.02% IN PSI	PRESS RANGE	0-3000 PSI ACCY 0.05% IN PSI	TEMP RANGE	32°-250° F ACCY 0.10% IN DEG F	OHMS RANGE	10-2000 Ohms ACCY 0.025% IN DEG F				
DIFFERENTIAL TEST				STATIC TEST							
AI # 0	DEVICE RANGE 0° H2O 400 CALIB RANGE 0° H2O 400	ZERO UNDER PRESSURE	AS Found -0.01	AS LEFT -0.02	AI # 1	DEVICE RANGE 0 PSIA 1500 CALIB RANGE 0 PSIG 500	BASE PRESS	14.73	ATMOS PRESS	12.36	
MVT ACCY OF CAL RANGE in INCH H2O	0.10	LIVE DIFF READING	AS Found 103.30	AS LEFT 102.90	MVT ACCY OF CAL RANGE in PSI	0.13	LIVE STATIC READING	AS Found 23.40	AS LEFT 23.80		
AS FOUND		ALLOWABLE THRESHOLD 0.510	AS LEFT		AS FOUND			ALLOWABLE THRESHOLD 1.505	AS LEFT		
TEST DEVICE	FLOW COMPUTER	DIFFERENCE	FLOW COMPUTER	TEST DEVICE (PSIG)	FLOW COMPUTER (PSIG)	DIFFERENCE	FLOW COMPUTER (PSIG)				
ZERO ATOMOS	0	-0.030	0.030	Same	ZERO 0	-0.020	0.020	Same			
AVG DP	100	99.910	0.090	Same	AVG SP 14	13.990	0.010	Same			
FULL RANGE	400	399.840	0.160	Same	FULL RANGE 500	500.030	-0.030	Same			
ORIFICE PLATE					TEMPERATURE TEST						
SIZE 2	X 0.625	BETA RATIO 0.3125	AI # 2	DEVICE RANGE	-50° to +250° F		CALIB RANGE	0° to +150° F			
PLATE CONDITION	Good Coated with soda ash material			Do not Test if flowing temp. is ± 0.5° F of test thermometer							
EDGES SHARP?	YES	SEAL RING CONDITION	GOOD	AS FOUND			ALLOWABLE THRESHOLD	1.018	AS LEFT		
BEVELED PLATE?	YES	BEVEL DOWN STREAM?	YES	DEVICE	FLOW COMPUTER	DIFFERENCE	FLOW COMPUTER				
STAMPED SIZE	0.6250	SURFACE CONDITION	GOOD	ZERO		0.000					
ORIFICE PLATE FITTING				AVG TEMP		0.000					
MAKE Daniel	TYPE FLANGED TAPS	STATIC TAP	UP STREAM	FULL RANGE		0.000					
SERIAL # 13180234	METER TUBE ID	2.067	LINE TEMPERATURE								
BASE CALC INFORMATION	ATMOS PRESS 14.73	TEMPERATURE 60° F	SPECIFIC GRAVITY 1.0	AS FOUND	AS FOUND	AS LEFT	AS LEFT				
SPECIFIC GRAVITY	0.8838	SELLER	Flatiron Resources LLC	THERMOMETER	FLOW COMPUTER	THERMOMETER	FLOW COMPUTER				
REMARKS	PURCHASER	IACX Energy, LLC	91.60	91.50	Same	Same					
Verified calibration on static, differential and temperature. Inspected and cleaned orifice plate. Updated meter card, saved configuration and process report. Confirmed communications to Scada Lynx IP 166.142.167.183.											
TECHNICIAN SIGNATURE <i>Sam E. Thornhill</i>											
WITNESS NOTIFICATION								REVIEW			
COMPANY		CONTACT METHOD			REVIEWED BY	<i>Cathy Theobald</i>					
CONTACT		DATE			DATE	9/8/2017					
WITNESS SIGNATURE		WITNESS DATE									

<b>STATE OF UTAH</b> DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		<b>FORM 9</b>	
		<b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b> UTU87659	
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b>		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b>	
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		<b>7. UNIT or CA AGREEMENT NAME:</b>	
<b>1. TYPE OF WELL</b>		<b>8. WELL NAME and NUMBER:</b> Flatirons Federal 1-4	
<b>2. NAME OF OPERATOR:</b> FLATIRONS RESOURCES, LLC		<b>9. API NUMBER:</b> 43019500290000	
<b>3. ADDRESS OF OPERATOR:</b> 11080 CIRCLE POINT ROAD, SUITE 180, WESTMINSTER, CO, 800202771		<b>9. FIELD and POOL or WILDCAT:</b> 3902 GREATER CISCO	
<b>4. LOCATION OF WELL</b> <b>FOOTAGES AT SURFACE:</b> 1402 FNL 757 FEL <b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b> Qtr/Qtr: SENE Section: 4 Township: 19S Range: 25E Meridian: S		<b>COUNTY:</b> GRAND  <b>STATE:</b> UTAH	
<b>11.</b> CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
<b>TYPE OF SUBMISSION</b>	<b>TYPE OF ACTION</b>		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input checked="" type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input type="text"/>
<b>12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS.</b> Clearly show all pertinent details including dates, depths, volumes, etc. This well was shut-in March 31st as a result of uneconomic production caused by a net drop in Helium price effective January 1st, 2018. Currently there appears to be a tightening in the Helium market and we are optimistic that the net price of Helium will return to last year's levels within the next 6 months. If that occurs the processor has indicated they be ready to restart the processing plant and the well will be put back into production.			
<i>Accepted by the</i> <b>Utah Division of</b> <b>Oil, Gas and Mining</b> <b>FOR RECORD ONLY</b> September 05, 2018			
<b>NAME (PLEASE PRINT)</b> Jeffery E. Jones		<b>PHONE NUMBER</b> 303 292-3902	<b>TITLE</b> Managing Director
<b>SIGNATURE</b> N/A		<b>DATE</b> 5/10/2018	

<b>STATE OF UTAH</b> DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		<b>FORM 9</b>
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b>		<b>5. LEASE DESIGNATION AND SERIAL NUMBER:</b> UTU87659
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b>  <b>7. UNIT or CA AGREEMENT NAME:</b>  <b>8. WELL NAME and NUMBER:</b> Flatirons Federal 1-4
<b>2. NAME OF OPERATOR:</b> FLATIRONS RESOURCES, LLC		<b>9. API NUMBER:</b> 43019500290000
<b>3. ADDRESS OF OPERATOR:</b> 11080 CIRCLE POINT ROAD, SUITE 180 , WESTMINSTER, CO, 800202771		<b>303-292-3902</b> <b>9. FIELD and POOL or WILDCAT:</b> GREATER CISCO
<b>4. LOCATION OF WELL</b> <b>FOOTAGES AT SURFACE:</b>  1402 FNL 757 FEL <b>QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:</b>  Qtr/Qtr: SENE Section: 4 Township: 19S Range: 25E Meridian: S		<b>COUNTY:</b> GRAND  <b>STATE:</b> UTAH
<b>11.</b> CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
<b>TYPE OF SUBMISSION</b>		<b>TYPE OF ACTION</b>
<input checked="" type="checkbox"/> <b>NOTICE OF INTENT</b> Approximate date work will start: <b>10/25/2018</b>		<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"/> SUBSEQUENT REPORT <input type="checkbox"/> DEEPEN <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION Date of Work Completion:  <input type="checkbox"/> SPUD REPORT <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK Date of Spud:  <input type="checkbox"/> DRILLING REPORT <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION Report Date:  <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARY ABANDON  <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> WATER DISPOSAL  <input type="checkbox"/> WILDCAT WELL DETERMINATION <input type="checkbox"/> OTHER <input type="checkbox"/> APD EXTENSION  OTHER: <input type="text"/>
<b>12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS.</b> Clearly show all pertinent details including dates, depths, volumes, etc. Attached is the approved Federal Sundry with plugging procedures for the well.		
<b>Approved by the</b> <b>Utah Division of</b> <b>Oil, Gas and Mining</b>		
<b>Date:</b> <u>September 27, 2018</u> <b>By:</b> <u>David Dunt</u>		
<b>NAME (PLEASE PRINT)</b> Jeffery E. Jones		<b>PHONE NUMBER</b> 303 292-3902
<b>TITLE</b> Managing Director		
<b>SIGNATURE</b> N/A		<b>DATE</b> 9/6/2018

Form 3160-5  
(June 2013)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTSUNDRY NOTICES AND REPORTS ON WELLS  
Do not use this form for proposals to drill or to re-enter an  
abandoned well. Use Form 3160-3 (APD) for such proposals.FORM APPROVED  
OMB No 1004-0137  
Expires January 31, 20185 Lease Serial No  
UTU 67659

6 If Indian, Allottee or Tribe Name

SUBMIT INTRIPLICATE - Other instructions on page 2			7 If Unit of CA/Agreement, Name and/or No
1 Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other			8 Well Name and No Flatirons Federal #1-4
2 Name of Operator Flatirons Resources LLC			9 API Well No 43019500290000
3a Address 11080 Circle PI, Road, Suite 180 Westminster CO 80020	3b Phone No (include area code) (720) 536-9624	10 Field and Pool or Exploratory Area Greater Cisco	
4 Location of Well (Footage Sec T R M or Survey Description) 1402' FNL, 757' FEL Section 4, T19S, R25E NWSW			11 County or Parish, State Grand County

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

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

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

## Additional well information:

- 1 Casing size 26 #/Ft - 7"
- 2 PBTD - 954 based on wireline tag 12/6/2017
- 3 Perforated(Open Hole) Interval, 866-954'
- 4 Top of Entrada -866Ft; top Sulfurwash 577 Ft
- 5 Shut in well head pressure - 60 PSI
- 6 Cubic feet to 60 casing from PBTD to surface with 15% excess 238 Ft^3 or 42 Bbls

This well will be plugged as follows:

- a. Pump 10 Bbls water down casing to kill well
- b. Running in the hole with tubing to 30 feet above the top of Entrada
- c. Pump sufficient cement to place a balanced plug inside the bottom 500 feet of casing
- d. Trip out of hole to top of cement and pump/circulate sufficient to completely fill hole with cement
- e. Trip out of hole let cement set over night
- f. Place dry hole marker in top of casing and top off cement
- g. Reclaim surface to original contours and reseed with the following seed mix Indian Rice Grass 1 Lb/acre, Curley Grass 1 Lb/acre, Globe Mallow Forbs 1 Lb/acre, and shrubs consisting of Hadscale and Winter Fat 1 Lb/acre

Work will commence in October 2018

## CONDITIONS OF APPROVAL ATTACHED

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed)

Jeffery E. Jones

Managing Director

Title

Signature

Date

08/15/2018

Engr- RK 9/4/18

## THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title	Acting Field Manager	Date	9-4-18
Office	Moab Field Office		

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

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Instructions on page 2)

Approved w/conditions: mm: 9/4/18

## **CONDITIONS OF APPROVAL FOR WELL ABANDONMENT**

Company      Flatirons Resources  
Lease No.      UTU-87659  
Location:      Sec 4, T19S, R25E  
Well No.      Lansdale-Govt #1-4  
API No.      43-019-50029

**GOVERNMENT CONTACTS**  
**BUREAU OF LAND MANAGEMENT - MOAB FIELD OFFICE**  
**82 Dogwood Ave, Moab, Utah 84532 (435) 259-2100**

Petroleum Engineer: Rachel Knell      Cell: 776-6755      Office: 781-4419  
I&E Inspector: Jeff Brown      Cell: 459-4886      Office: 587-1525

**A COPY OF THESE CONDITIONS SHALL BE GIVEN TO  
YOUR FIELD REPRESENTATIVE TO ENSURE COMPLIANCE**

### **SITE SPECIFIC DOWNHOLE CONDITIONS OF APPROVAL**

1. After setting the first 500' plug, please tag.
2. Set the second portion of the plug as proposed.
3. Bring the cement in the annulus between the 8 1/4" hole and 7" casing up to the surface.

### **STANDARD SURFACE CONDITION OF APPROVAL**

1. Within 30 days after plugging the well, a Sundry Subsequent Report will be submitted for approval detailing the plugging operations.

### **STANDARD CONDITIONS OF APPROVAL**

**You must initiate plugging operations within 1 year after the approval of this Notice of Intent to Abandon. This approval will expire at that time.**

1. Notify the BLM sufficiently in advance of actual plugging work so that a representative may have an opportunity to witness the operation. Notify **Jeff Brown** on a regular working day (Monday through Friday) at least 24 hours in advance of rigging up.
2. Unless otherwise directed, prior to setting any plugs or perforating, you will perform a bit and scraper run. After the perforations are sealed, you will perform a hot oil treatment, paraffin removal operation, or whatever well cleanout operations are deemed necessary. You will circulate the well surface to the surface.
3. Prior to perforating any casing string, you will open up the bradenhead and install and secure adequate BOPs, lubricators, and controls.

4. All cement used for plugging shall be Class "G". Cement samples will be taken to determine appropriate waiting time.
5. All perforations must be covered with cement unless they are isolated by a CIBP or a CICR. The BLM will determine which plugs must be tagged.
6. After the perforations are isolated, the well will be pressure-tested to 500 psi with no more than a 50 psi loss allowed. If the well fails the pressure test, you must find the holes in the casing and isolate them.
7. Cased hole spacer fluid will include corrosion inhibitor and biocide to be compatible with the cement. Fresh water spacers will be run between the cement and the inhibitor/biocide.
8. If you cannot circulate cement from the perforations 50' below the surface casing shoe, you will propose a revised procedure to ensure there is cement to the surface in the annulus as well as in the casing.
9. Cement will be topped off as needed.
10. A GPS re-verification and certification of the abandoned well location shall be made for the Latitude and Longitude coordinates with accuracy to the sixth decimal place. This well location re-verification shall be noted on the Subsequent Sundry Notice of Abandonment.
11. Wait on Cement for a minimum of 24 hours following the approved plugging program before installing the dry hole marker in accordance with 43 CFR 3162.6(b). The site will be cleaned up by removing equipment and debris.
12. Unless otherwise directed by the Surface Management Entity, the marker shall be a flat plate (with a weep hole) not less than 1/4 inch in thickness and large enough to contain all of the information identified below and shall be buried a minimum of three (3) foot below re-contoured surface level. Pits must be fenced unless otherwise approved by the authorized officer.
13. The following minimum information will be permanently and legibly placed on the marker with a plate, cap or welded bead:
  - A. Name of the operator.
  - B. Lease serial number.
  - C. Well number.
  - D. Surveyed description of the well; section, township and range and either footages or quarter-quarter section.
14. Within 30 days after well bore plugging operations have been completed, Form 3160-5 (formerly Form 9-331), Subsequent Report of Abandonment, shall be submitted to this office. The report must show the location of all plugs or any mechanical setting device, quantity and type of cement and additives in each plug, amount of casing or any tubulars left in the hole, methods used to test plugs and test results, and the status of the surface restoration. If a temporary delay in

the removal of equipment or surface cleanup is deemed necessary, so justify in your report. This abandonment report will be approved by this office with surface stipulations. Liability for the well shall not be released until the surface management agency approves the actual site rehabilitation.

15. If not previously filed, submit in duplicate, Form 3160-4 (formerly Form 9-330), Well completion or Recompletion Report and Log, well history, electric logs, any other surveys, and, if taken, core analysis. This completion report must be filed within 30 days after the culmination of downhole plugging operations.

Flatrons Resources | Flatrons Federal #14 | API: 43-019-50029  
Spud: 8/6/13

12<sup>1</sup>/<sub>4</sub>" hole  
9<sup>5</sup>/<sub>8</sub>" csg  
H-40, 32.3#/ft  
set to 264'

8<sup>3</sup>/<sub>4</sub>" hole  
7" csg  
J-55, 26#/ft  
Set to 868'

Entrada Top ~868'

\*open hole completion

6" hole to 965'

TD 965'

## WELLBORE DIAGRAM

Well: Flatirons Federal #1-4

County/State: Grand County, UTAH

Formation: Entrada

Field: Harley Dome

Location: Sec 4-T19S-R25E  
1402 FNL, 757 FEL

Date: August 13, 2013

API No. - 43019500290000

Lease Serial No. UTU87659

**Flow test for the Morrison 577'-595'**  
 (note- a slight leaked in the rotating head  
 may have influenced the shut ins)

1<sup>st</sup> shut in 15 mins—well built to 88 lbs, and  
 still building

Opened well for 15 mins @ 95% flowed at  
 70lbs with a rate of 350 MCFPD

2<sup>nd</sup> Shut in 15 mins—well built to 89.1  
 and still building

Opened well for 15 mins and flowed at  
 51.3 pounds at a rate of 700 MCFPD

3<sup>rd</sup> Shut in for 15 mins—well built to 89.6  
 and still building

Opened well to free flow well built to  
 1.2 MMCFPD @ 19 PSI

Conductor Pipe@50', 14", 55#, R2, F-25  
 butt weld CSG / Hole size =17  $\frac{1}{2}$ "

263'

9 5/8", 32.3#, R-3,LTC,H-40 surface casing  
 @ 263.66' Cement with 65 sacks of Class G  
 with Celloflake, Extender and anti-foam  
 additive . 5 bbl circulated to surface

7", 26#, STC,LTC, J-55 casing @ 866' with  
 81 sacks of Class G cement with Celloflake,  
 Extender and anti-foam additive . 5 bbl  
 circulated to surface

866'

6 "Open hole below 7" casing

TD = 965'

## Entrada Flow Tests while Drilling

875' - 905'	750 mcf	SI/52 <sup>+</sup>
875' - 920'	2400 mcf	SI/52 <sup>+</sup>
875' - 935'	2954 mcf	163
875' - 950'	3985 mcf	161 <sup>+</sup>
875' - 965'	4155 mcf	161 <sup>+</sup>



Flatirons Resources LLC

Division of Oil, Gas and Mining  
Operator Change/Name Change Worksheet-for State use only

Effective Date: 3/1/2019

FORMER OPERATOR:	NEW OPERATOR:
Flatirons Resources, LLC	IACX Energy LLC
Groups: None	

**WELL INFORMATION:**

Well Name	API Number	Town	Dir	Range	Dir	Sec	Entity Number	Type	Status
Lansdale Govt 1	4301920247	18	S	25	E	33	10091	Helium Well	Temporarily-abandoned
Lansdale Govt 4	4301930003	19	S	25	E	3	10093	Helium Well	Temporarily-abandoned
Lansdale Govt 15	4301930017	18	S	25	E	35	10092	Helium Well	Temporarily-abandoned
Flatirons Federal 1-4	4301950029	19	S	25	E	4	19131	Helium Well	Temporarily-abandoned

**OPERATOR CHANGES DOCUMENTATION:**

1. Sundry or legal documentation was received from the **FORMER** operator on: 4/1/2019
2. Sundry or legal documentation was received from the **NEW** operator on: 4/1/2019
3. New operator Division of Corporations Business Number: 9687155-0161

**REVIEW:**

Receipt of Acceptance of Drilling Procedures for APD on:	NA
Reports current for Production/Disposition & Sundries:	4/9/2019
OPS/SI/TA well(s) reviewed for full cost bonding: Approved by Dustin	NA
UIC5 on all disposal/injection/storage well(s) Approved on: Approved by Dayne	NA
Surface Facility(s) included in operator change:	None

**NEW OPERATOR BOND VERIFICATION:**

State/fee well(s) covered by Bond Number(s):	NA
--	----

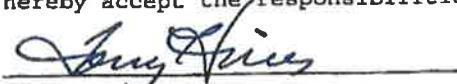
**DATA ENTRY:**

Well(s) update in the RBDMS on:	4/9/2019
Group(s) update in RDBMS on:	NA
Surface Facilities update in RBDMS on:	NA
Entities Updated in RBDMS on:	4/9/2019

**COMMENTS:**

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

FORM 9

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p>Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.</p>		<p><b>8. LEASE DESIGNATION AND SERIAL NUMBER:</b> UTU-69726</p>						
<p><b>1. TYPE OF WELL</b></p>		<p><b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME:</b></p>						
<p><b>2. NAME OF OPERATOR:</b> Flatirons Resources, LLC</p>		<p><b>7. UNIT or CA AGREEMENT NAME:</b></p>						
<p><b>3. ADDRESS OF OPERATOR:</b> 11080 Circle Point Road, Suite 180, Westminster, CO, 80020-2771</p>		<p><b>8. WELL NAME and NUMBER:</b> LANSDALE GOVT 1</p>						
<p><b>4. LOCATION OF WELL</b> FOOTAGES AT SURFACE: 990 FSL 1650 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SWSE Section: 33 Township: 18S Range: 25E Meridian: S</p>		<p><b>9. API NUMBER:</b> 43019202470000</p>						
		<p><b>9. FIELD and POOL or WILDCAT:</b> GREATER CISCO</p>						
		<p><b>COUNTY:</b> GRAND</p>						
		<p><b>STATE:</b> UTAH</p>						
<p><b>11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA</b></p> <table border="1"> <thead> <tr> <th>TYPE OF SUBMISSION</th> <th>TYPE OF ACTION</th> </tr> </thead> <tbody> <tr> <td> <p><input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start:</p> <p><input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:</p> <p><input type="checkbox"/> SPUD REPORT Date of Spud:</p> <p><input type="checkbox"/> DRILLING REPORT Report Date:</p> </td> <td> <p><input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION</p> <p><input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SITE STATUS EXTENSION <input type="checkbox"/> OTHER</p> <p><input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> API EXTENSION</p> </td> </tr> <tr> <td></td> <td> <p>OTHER: <input type="text"/></p> </td> </tr> </tbody> </table>			TYPE OF SUBMISSION	TYPE OF ACTION	<p><input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start:</p> <p><input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:</p> <p><input type="checkbox"/> SPUD REPORT Date of Spud:</p> <p><input type="checkbox"/> DRILLING REPORT Report Date:</p>	<p><input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION</p> <p><input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SITE STATUS EXTENSION <input type="checkbox"/> OTHER</p> <p><input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> API EXTENSION</p>		<p>OTHER: <input type="text"/></p>
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<p><input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start:</p> <p><input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:</p> <p><input type="checkbox"/> SPUD REPORT Date of Spud:</p> <p><input type="checkbox"/> DRILLING REPORT Report Date:</p>	<p><input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION</p> <p><input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SITE STATUS EXTENSION <input type="checkbox"/> OTHER</p> <p><input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> API EXTENSION</p>							
	<p>OTHER: <input type="text"/></p>							
<p><b>12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS.</b> Clearly show all pertinent details including dates, depths, volumes, etc.</p> <p>Flatirons Resources LLC is resigning as Operator, the new Operator is: IACX Energy, LLC 5001 LBJ Freeway, Suite 300 Dallas TX 75244</p> <p>• • •</p> <p>IACX Energy, LLC does hereby accept the responsibilities of Operatorship of the above referenced well :</p> <p> Tony Lee Hines Senior Vice President of Operations</p>								
NAME (PLEASE PRINT) Jeffery E. Jones	PHONE NUMBER 303 292-3902	TITLE Managing Director						
SIGNATURE N/A 	DATE 3/14/2019							
<p><b>APPROVED</b></p> <p>APR 09 2019</p> <p>DIY OIL GAS &amp; MINING BY: </p>								

Received 4/1/19

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL	5. LEASE DESIGNATION AND SERIAL NUMBER: UTU-70176
2. NAME OF OPERATOR: Flatirons Resources, LLC	6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
3. ADDRESS OF OPERATOR: 11080 Circle Point Road, Suite 180, Westminster, CO, 80020-2771	7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1650 FSL 320 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 3 Township: 19S Range: 25E Meridian: S	8. WELL NAME and NUMBER: LANSDALE GOVT 4
	9. API NUMBER: 43019300030000
	9. FIELD and POOL or WILDCAT: GREATER CISCO
	10. COUNTY: GRAND
	11. STATE: UTAH

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

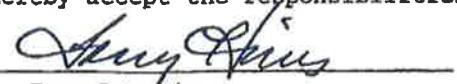
TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SITA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APP EXTENSION <input type="checkbox"/> OTHER: _____
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 03/01/2019			
<input type="checkbox"/> SPUD REPORT Date of Spuds:			
<input type="checkbox"/> DRILLING REPORT Report Date:			

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

Flatirons Resources LLC is resigning as Operator, the new Operator is:

IACK Energy, LLC  
5001 LBJ Freeway, Suite 300  
Dallas TX 75244

IACK Energy, LLC does hereby accept the responsibilities of Operatorship of the above referenced well :

  
Tony Lee Hines  
Senior Vice President of Operations

NAME (PLEASE PRINT) Jeffery E. Jones	PHONE NUMBER 303 292-3902	TITLE Managing Director
SIGNATURE N/A 		DATE 3/28/2019

APPROVED

Received 4/1/19

APR 09 2019

Rachelle Meeks

RM. OIL GAS & MINING

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

**1. TYPE OF WELL**

**2. NAME OF OPERATOR:**  
 Flatirons Resources, LLC

**3. ADDRESS OF OPERATOR:**  
 11080 Circle Point Road, Suite 180, Westminster, CO, 80020-2771

PHONE NUMBER:  
 303-292-3902

**4. LOCATION OF WELL  
 FOOTAGES AT SURFACE:**

2000 FNL 660 FWL  
 QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:  
 Qtr/Qtr: SWNW Section: 35 Township: 18S Range: 25E Meridian: S

**5. LEASE DESIGNATION AND SERIAL NUMBER:**  
 UTU-69726

**6. IF INDIAN, ALLOTTEE OR TRIBE NAME:**

**7. UNIT or CA AGREEMENT NAME:**

**8. WELL NAME and NUMBER:**  
 LANSDALE GOVT 1S

**9. API NUMBER:**  
 43019300170000

**9. FIELD and POOL or WILDCAT:**  
 GREATER CISCO

**COUNTY:**  
 GRAND

**STATE:**  
 UTAH

**11.**

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

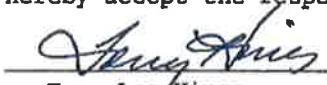
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> Casing repair <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE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

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

Flatirons Resources LLC is resigning as Operator, the new Operator is:

IACK Energy, LLC  
 5001 LBJ Freeway, Suite 300  
 Dallas TX 75244

IACK Energy, LLC does hereby accept the responsibilities of Operatorship of the above referenced well :

  
 Tony Lee Hines  
 Senior Vice President of Operations

NAME (PLEASE PRINT) Jeffery E. Jones	PHONE NUMBER 303 292-3902	TITLE Managing Director
SIGNATURE N/A		DATE 3/28/2019

  
**APPROVED**

APR 09 2019

DIY OIL GAS & MINING  
 BY: 

Received 4/1/19

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

FORM 9

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL	5. LEASE DESIGNATION AND SERIAL NUMBER: UTU87659
2. NAME OF OPERATOR: Flatirons Resources, LLC	6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
3. ADDRESS OF OPERATOR: 11080 Circle Point Road, Suite 180, Westminster, CO, 80020-2771	7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1402 FNL 757 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SENE Section: 4 Township: 19S Range: 25E Meridian: S	8. WELL NAME and NUMBER: Flatirons Federal 1-4
	9. API NUMBER: 43019500290000
	9. FIELD and POOL or WILDCAT: GREATER CISCO
	COUNTY: GRAND
	STATE: UTAH

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

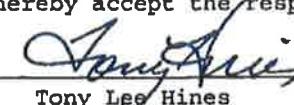
TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> CASING REPAIR
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 3/1/2019	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> CHANGE WELL NAME
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> COMMENCE PRODUCING FORMATIONS	<input type="checkbox"/> CONVERT WELL TYPE
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> NEW CONSTRUCTION
	<input checked="" type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> PLUG BACK
	<input type="checkbox"/> PRODUCTION START OR RESUME	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	<input type="checkbox"/> TEMPORARY ABANDON
	<input type="checkbox"/> TUBING REPAIR	<input type="checkbox"/> VENT OR FLARE	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> WATER SHUTOFF	<input type="checkbox"/> SITA STATUS EXTENSION	<input type="checkbox"/> API EXTENSION
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> OTHER	OTHER: <input type="text"/>

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

Flatirons Resources LLC is resigning as Operator, the new Operator is:

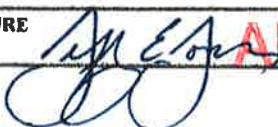
IACX Energy, LLC  
5001 LBJ Freeway, Suite 300  
Dallas TX 75244

IACX Energy, LLC does hereby accept the responsibilities of Operatorship of the above referenced well :

  
Tony Lee Hines

Senior Vice President of Operations

NAME (PLEASE PRINT) Jeffery E. Jones	PHONE NUMBER 303 292-3902	TITLE Managing Director
SIGNATURE N/A	DATE 3/28/2019	

 APPROVED

Received 4/1/19

APR 09 2019

DIV. OIL GAS & MINING  
BY: 

<b>STATE OF UTAH</b> DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9																																								
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1. TYPE OF WELL		8. WELL NAME and NUMBER: Flatirons Federal 1-4																																								
2. NAME OF OPERATOR: IACX Energy LLC		9. API NUMBER: 43019500290000																																								
3. ADDRESS OF OPERATOR: 5001 LBJ Freeway, Suite 300, Dallas, TX, 75244		PHONE NUMBER: 972-807-6450																																								
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1402 FNL 757 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SENE Section: 4 Township: 19S Range: 25E Meridian: S		9. FIELD and POOL or WILDCAT: GREATER CISCO																																								
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<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: center;">TYPE OF SUBMISSION</th> <th colspan="3" style="text-align: center;">TYPE OF ACTION</th> </tr> </thead> <tbody> <tr> <td rowspan="10"> <input checked="" type="checkbox"/> NOTICE OF INTENT          Approximate date work will start:          8/1/2024       </td> <td><input type="checkbox"/> ACIDIZE</td> <td><input type="checkbox"/> ALTER CASING</td> <td><input type="checkbox"/> CASING REPAIR</td> </tr> <tr> <td><input type="checkbox"/> CHANGE TO PREVIOUS PLANS</td> <td><input type="checkbox"/> CHANGE TUBING</td> <td><input type="checkbox"/> CHANGE WELL NAME</td> </tr> <tr> <td><input type="checkbox"/> CHANGE WELL STATUS</td> <td><input checked="" type="checkbox"/> COMMINGLE PRODUCING FORMATIONS</td> <td><input type="checkbox"/> CONVERT WELL TYPE</td> </tr> <tr> <td><input type="checkbox"/> DEEPEN</td> <td><input type="checkbox"/> FRACTURE TREAT</td> <td><input type="checkbox"/> NEW CONSTRUCTION</td> </tr> <tr> <td><input type="checkbox"/> OPERATOR CHANGE</td> <td><input type="checkbox"/> PLUG AND ABANDON</td> <td><input type="checkbox"/> PLUG BACK</td> </tr> <tr> <td><input type="checkbox"/> SPUD REPORT Date of Spud:</td> <td><input type="checkbox"/> PRODUCTION START OR RESUME</td> <td><input type="checkbox"/> RECLAMATION OF WELL SITE</td> <td><input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION</td> </tr> <tr> <td></td> <td><input type="checkbox"/> REPERFORATE CURRENT FORMATION</td> <td><input type="checkbox"/> SIDETRACK TO REPAIR WELL</td> <td><input type="checkbox"/> TEMPORARY ABANDON</td> </tr> <tr> <td></td> <td><input type="checkbox"/> TUBING REPAIR</td> <td><input type="checkbox"/> VENT OR FLARE</td> <td><input type="checkbox"/> WATER DISPOSAL</td> </tr> <tr> <td></td> <td><input type="checkbox"/> WATER SHUTOFF</td> <td><input type="checkbox"/> SI TA STATUS EXTENSION</td> <td><input type="checkbox"/> APP EXTENSION</td> </tr> <tr> <td></td> <td><input type="checkbox"/> WILDCAT WELL DETERMINATION</td> <td><input type="checkbox"/> OTHER</td> <td>OTHER: <input type="text"/></td> </tr> </tbody> </table>			TYPE OF SUBMISSION	TYPE OF ACTION			<input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 8/1/2024	<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 checked="" 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"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> PRODUCTION START OR RESUME	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION		<input type="checkbox"/> REPERFORATE CURRENT FORMATION	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	<input type="checkbox"/> TEMPORARY ABANDON		<input type="checkbox"/> TUBING REPAIR	<input type="checkbox"/> VENT OR FLARE	<input type="checkbox"/> WATER DISPOSAL		<input type="checkbox"/> WATER SHUTOFF	<input type="checkbox"/> SI TA STATUS EXTENSION	<input type="checkbox"/> APP EXTENSION		<input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> OTHER	OTHER: <input type="text"/>
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12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Attached is the approved Federal NOI sundry to perforate the Morrison (Salt wash) formation and commingle with the Entrada formation subsurface. Subsequent report to follow.																																										
<b>Approved by the</b> <b>Utah Division of</b> <b>Oil, Gas and Mining</b>																																										
<b>Date:</b> <u>May 21, 2025</u>																																										
<b>By:</b> <u>Colton Goodrich</u>																																										
NAME (PLEASE PRINT) joeldoperto		PHONE NUMBER 575-416-3243																																								
SIGNATURE N/A		TITLE Production Technician																																								
		DATE 11/12/2024																																								

Form 3160-5  
(June 2019)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB No. 1004-0137  
Expires: October 31, 2021**SUNDRY NOTICES AND REPORTS ON WELLS*****Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.******SUBMIT IN TRIPPLICATE - Other instructions on page 2***

1. Type of Well

 Oil Well     Gas Well     Other

5. Lease Serial No.

2. Name of Operator

6. If Indian, Allottee or Tribe Name

3a. Address

3b. Phone No. (include area code)

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

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

8. Well Name and No.

9. API Well No.

10. Field and Pool or Exploratory Area

11. Country or Parish, State

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

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

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

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Title

Signature

Date

**THE SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

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

Office

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

## GENERAL INSTRUCTIONS

This form is designed for submitting proposals to perform certain well operations and reports of such operations when completed as indicated on Federal and Indian lands pursuant to applicable Federal law 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, are either shown below, will be issued by or may be obtained from the local Federal office.

## SPECIFIC INSTRUCTIONS

*Item 4* - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

*Item 13*: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to the top of any tubing left in the hole; method of closing top of well and date well site conditioned for final inspection looking for approval of the abandonment. If the proposal will involve **hydraulic fracturing operations**, you must comply with 43 CFR 3162.3-3, including providing information about the protection of usable water. Operators should provide the best available information about all formations containing water and their depths. This information could include data and interpretation of resistivity logs run on nearby wells. Information may also be obtained from state or tribal regulatory agencies and from local BLM offices.

## NOTICES

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

EFFECT OF NOT PROVIDING THE INFORMATION: Filing of this notice and report and disclosure of the information is mandatory for those subsequent well operations specified in 43 CFR 3162.3-2, 3162.3-3, 3162.3-4.

The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

**BURDEN HOURS STATEMENT:** Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240

## **Additional Information**

### **Location of Well**

0. SHL: SENE / 1402 FNL / 757 FEL / TWSP: 19S / RANGE: 25E / SECTION: 4 / LAT: 39.0 / LONG: -109.0 ( TVD: 0 feet, MD: 0 feet )

PPP: SENE / 1402 FNL / 757 FEL / TWSP: 19S / RANGE: 25E / SECTION: 4 / LAT: 39.0 / LONG: -109.0 ( TVD: 0 feet, MD: 0 feet )

BHL: SENE / 1402 FNL / 757 FEL / TWSP: 19S / RANGE: 25E / SECTION: 4 / LAT: 39.0 / LONG: -109.0 ( TVD: 0 feet, MD: 0 feet )