



02577462

Oil and Gas Leasehold Information

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental survey information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGGC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b).

| | |
|---|---------------------------------|
| 1. OGGC Operator Number: 97730 | 4. Contact Name: David Wyman |
| 2. Name of Operator: Louis Wyman | Phone: 970-701-9388 |
| 3. Address: 4609 E Hwy 40 | Fax: |
| City: Craig | State: CO |
| Zip: 81625 | |
| 5. API Number: 05-08106670 | OGGC Facility ID Number: 223306 |
| 6. Well/Facility Name: WECO-UPRC Klettz | Well/Facility Number: 23-29 |
| 8. Location (On/Off, Sec, Twp, Rng, Meridian): NESW 29 7N 92W 6 | |
| 9. County: Moffat | 10. Field Name: |
| 11. Federal, Indian or State Lease Number: 36915 | |

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| Survey Plat | |
| Directional Survey | |
| Surface Egnpt Diagram | |
| Technical Info Page | |
| Other | |

OF 00002

General Notice

| | | |
|---|------------------------|---|
| <input type="checkbox"/> CHANGE OF LOCATION: | Attach New Survey Plat | (a change of surface offset is substantive and requires a new permit) |
| Change of Surface Footage from Exterior Section Lines: | | |
| Change of Surface Footage to Exterior Section Lines: | | |
| Change of Bottomhole Footage from Exterior Section Lines: | | |
| Change of Bottomhole Footage to Exterior Section Lines: | | |
| Bottomhole location On/Off, Sec, Twp, Rng, Mer | | |
| Latitude | | |
| Longitude | | |
| Ground Elevation | | |
| Distance to nearest property line | | |
| Distance to nearest lease line | | |
| Distance to nearest well same formation | | |
| Surface owner consultation date: | | |

| | | |
|---------------------|--------------|----------------------------|
| GPS DATA: | PDOP Reading | Instrument Operator's Name |
| Date of Measurement | | |

| | | | | |
|--|----------------|--------------|--------------------|---|
| <input type="checkbox"/> CHANGE SPACING UNIT | Formation Code | Unit Acreage | Unit configuration | <input type="checkbox"/> Remove from surface bond |
| Formation | | | | Signed surface use agreement attached |

| | | |
|---|---|--------|
| <input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling): | <input type="checkbox"/> CHANGE WELL NAME | NUMBER |
| Effective Date: | From: | |
| Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual | To: | |
| | Effective Date: | |

| | |
|--|---|
| <input type="checkbox"/> ABANDONED LOCATION: | <input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS |
| Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No | Date well shut in or temporarily abandoned: |
| Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No | Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Date Ready for Inspection: | MI required if shut in longer than two years. Date of last MI: |

| | |
|---|--|
| <input type="checkbox"/> SPUD DATE: | <input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (to most from state casing log) |
| <input type="checkbox"/> SUBSEQUENT REPORT OF STAGE SQUEEZE OR REMEDIAL CEMENT WORK | *submit cdl and cement job summaries |
| Method used | Cement volume |
| Cementing tool setting/peel depth | Cement top |
| | Cement bottom |
| | Date |

| | |
|--|---|
| <input type="checkbox"/> RECLAMATION: | Attach technical page describing final reclamation procedures per Rule 1004. |
| Final reclamation will commence on approximately | <input type="checkbox"/> Final reclamation is completed and site is ready for inspection. |

Technical Engineering/Environmental Notice

| | |
|---|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Report of Work Done |
| Approximate Start Date: | Date Work Completed: |

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

| | | |
|---|---|--|
| <input type="checkbox"/> Intent to Recomplete (submit form 2) | <input type="checkbox"/> Request to Vent or Flare | <input type="checkbox"/> E&P Waste Disposal |
| <input type="checkbox"/> Change Drilling Plans | <input type="checkbox"/> Repair Well | <input type="checkbox"/> Beneficial Reuse of E&P Waste |
| <input type="checkbox"/> Goos Interval Changed? | <input type="checkbox"/> Rule 502 variance requested | <input type="checkbox"/> Status Update/Change of Remediation Plans |
| <input type="checkbox"/> Casing/Cementing Program Change | <input checked="" type="checkbox"/> Other: VoA finalization | for Spills and Releases |

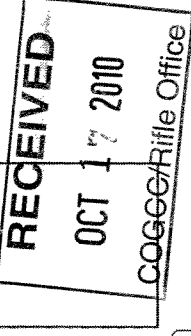
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

| | | |
|--------------------------------|------------------|--------------------------------|
| Signed: | Date: 10/17/2010 | Email: brokenbox6431@yahoo.com |
| Print Name: David Wyman | Title: Manager | |
| OGGC Approved: | Title: EIT 3 | Date: 10/26/2010 |
| CONDITIONS OF APPROVAL IF ANY: | | |

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY



1. OGCC Operator Number: 97730 API Number: 05-08106670
2. Name of Operator: Louis Wyman OGCC Facility ID #: 223306
3. Well/Facility Name: WECO-UPRC Kleitz Well/Facility Number: 23-29
4. Location (Qtr, Sec, Twp, Rng, Meridian): NESW 29 7N 92W 6

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

See previous Sundry submitted 9/13/2010 for details of previous work completed.

- 1) Final completion of work to address VoA dated 8/16/2010 is as follows:

Removal of contaminated soil (14 cu. yds) to a licensed waste facility (Milner Landfill). Reseeding of disturbed area with native grasses. See the attached documentation.

→ 6 scanned support doc'n files
will be added to well-file

[e.g. lab report, chain of custody, etc]