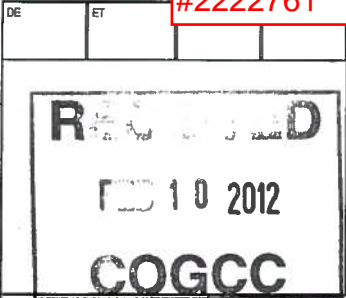




SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry 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 OGCC 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.)



Complete the Attachment Checklist

OP OGCC

1. OGCC Operator Number: 95960	4. Contact Name DEE FINDLAY	
2. Name of Operator: WEXPRO COMPANY	Phone: 307 352-7554	
3. Address: PO BOX 458	Fax: 307 352-7575	
City: ROCK SPRINGS State: WY Zip: 82902		
5. API Number 05- 081-07635	OGCC Facility ID Number 416378	Survey Plat
6. Well/Facility Name: JACKS DRAW	7. Well/Facility Number 18 PAD	Directional Survey
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NE NW SW 28-12N-97W		Surface Eqpmt Diagram
9. County: MOFFAT	10. Field Name: POWDER WASH	Technical Info Page
11. Federal, Indian or State Lease Number: COD-0040867B		Other

General Notice

CHANGE OF LOCATION:

Attach New Survey Plat

(a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines:		FNL/FSL		FEL/FWL	
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 Qtr/Qtr, Sec, Twp, Rng, Mer

Latitude

Distance to nearest property line

Distance to nearest bldg, public rd, utility or RR

Longitude

Distance to nearest lease line

Is location in a High Density Area (rule 603b)? Yes/No

Ground Elevation

Distance to nearest well same formation

Surface owner consultation date:

GPS DATA:

Date of Measurement PDOP Reading Instrument Operator's Name

CHANGE SPACING UNIT

Formation Formation Code Spacing order number Unit Acreage Unit configuration

Remove from surface bond

Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling):

Effective Date:

Plugging Bond: Blanket Individual

CHANGE WELL NAME

NUMBER

From:

To:

Effective Date:

ABANDONED LOCATION:

Was location ever built? Yes No

Is site ready for inspection? Yes No

Date Ready for Inspection:

NOTICE OF CONTINUED SHUT IN STATUS

Date well shut in or temporarily abandoned:

Has Production Equipment been removed from site? Yes No

MIT required if shut in longer than two years. Date of last MIT

SPUD DATE:

REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK

*submit cbl and cement job summaries

Method used Cementing tool setting/perf depth Cement volume Cement top Cement bottom Date

RECLAMATION:

Attach technical page describing final reclamation procedures per Rule 1004.

Final reclamation will commence on approximately

Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

Notice of Intent

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.)

Intent to Recomplete (submit form 2)	Request to Vent or Flare	E&P Waste Disposal
Change Drilling Plans	Repair Well	Beneficial Reuse of E&P Waste
Gross Interval Changed?	Rule 502 variance requested	Status Update/Change of Remediation Plans
Casing/Cementing Program Change	X Other: SOLIDIFY RESERVE PIT	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: Dee Findlay

Date: 2/7/13

Email: dee.findlay@questar.com

Print Name: DEE FINDLAY

Title: PERMIT AGENT

COGCC Approved:

Title

Date:

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number:	95960	API Number:	05- 081-07635
2. Name of Operator:	WEXPRO COMPANY	OGCC Facility ID #	
3. Well/Facility Name:	JACKS DRAW	Well/Facility Number:	18 PAD
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	NE NW SW 28-12N-97W		

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

A third part contactor will backfill the cuttings pit on the above location are this time and the balance of the interim reclamation will take place this summer, after raptor restriction expires. The pit will be closed to prevent any precipitation from entering the pit. Samples of the adjacent undisturbed soil and the final pit materials will be obtained

OGCC
10/1/05
8 101