

NOTIFICATION OF WELL SPUD

OKLAHOMA CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
P. O. BOX 52000
OKLAHOMA CITY, OKLAHOMA 73152-2000
(RULE NO. 165: 10-3-2)



OTC/OCC Operator Number: 04147-0

API Number: 061-21863

DATE: 06/12/2003

Date of Well Spud/Re-Entry: 7/6/03

Name of
Operator: QUESTAR EXPLORATION & PROD. CO
Address: 180 E 100 S
SALT LAKE CITY UT 84111

Phone: (801) 324-2600

WELL LOCATION

Lease Name: MONKS

Well Number: 4-33

Location: 33-09N-18E
NW4 NE4 NE4 SW4
HASKELL

Surface Casing Cement by (If Job Completed)

Name: _____

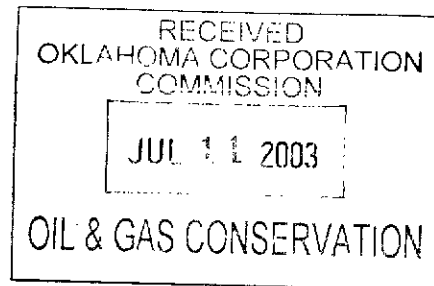
Address: _____

City: _____ State: _____

Zip Code: _____

INSTRUCTIONS (PLEASE FOLLOW)PLEASE TYPE OR USE BLACK INK

- 1) This report must be completed in duplicate and mailed within fourteen (14) days, after spudding, to the Corporation Commission at the above address.
- 2) State the exact date the well was spudded.



I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.

[Signature]
Name

[Signature]
Title

TEST: ☒ INITIAL
☐ ANNUAL
☐ RETEST

BACK PRESSURE TEST FOR NATURAL GAS WELLS

OAC 165:10-17-6

Form 1016
 Rev 2000

Please type or print using black ink

DATE OF TEST

9/22/2003

DATE OF 1ST SALES

9/19/2003

Operator Questar Exploration and Production Company		Operator No. 4147	Phone No. 918/488-8962	
Address 6120 S. Yale, Suite 1300		OTC Lease No. 061-111467 111357-0		
City Tulsa	State OK	Zip 74137	API No. 061-21863	
Gas Meterer/Meas.		Meas. No.	Well Name/No. Monks #4-33	
Location within Sec. NW4 NE4 NE4 SW4 315' FNL & 345' FEL		Bottom hole location (if different from surface) SE4 SW4 NE4 2102' FNL & 1878' FEL		Sec 33
Producing Zone Hartshorne		County Haskell		Twp 9N
Field Russellville	Allocated Pool No.	Unallocated <input checked="" type="checkbox"/>	Spacing Unit Size 160 acres	

COMPLETION: ☒ Single ☐ Multiple Zone ☐ Commingled ☐ Recompletion Date of Completion 9/19/2003

Total Depth 2856'	Plug Back Depth WT 32.2#	Packer Set Depth Depth Set 288'	Elevation 824'
Csg Size 9 5/8"	WT 4.7#	Depth Set 1845'	Perfs. Open hole
Tbg Size 2 3/8"	WT 4.7#	Depth Set 1845'	Perfs.
Prod. Thru Tbg	Res. Temp. F @	Mean Grd. Temp. F	Atm. Press. PSIA
L	H	G _g	%CO ₂
%N ₂	H ₂ S(ppm)	Prover	Meter Run
FLOW DATA (PROVER)		TUBING DATA	
(LINE) X ORIFICE	DIFF. (INCHES)	TEMP. F	TEMP. F
NO. SIZE	PSIG	PSIG	PSIG
Shut-In Pressure	10 psig		
1			
2			
3			
4			

RATE OF FLOW CALCULATIONS

NO.	COEFFICIENT (24 HOUR)	$\sqrt{h_w P_m}$	PRESSURE P _m	FLOW TEMP. FACTOR F _t	GRAVITY FACTOR F _g	SUPER COMPRESS FACTOR F _{pv}	RATE OF FLOW (Q) MCFD
1							
2							
3							
4							

NO.	P _r	TEMP. R	T _r	Z	Gas/Liquid Hydrocarbon Ratio	MCF/BBL
					PI Gravity of Liquid Hydrocarbons	Deg.
					Specific Gravity Separator Gas	
					Specific Gravity Flowing Fluid	
					Initial Pressure PSIA	PSIA
					Initial Temperature R	R

P_c 24.4 P_c²

NO.	P _w	P _w ²	P _c ² - P _w ²
1			
2			
3			
4			

[1] $\frac{P_c^2 - P_w^2}{P_c^2} = \frac{P_c^2 - P_w^2}{P_c^2}$ (Not to exceed 5.263) [2] $\frac{P_c^2 - P_w^2}{P_c^2} = \frac{P_c^2 - P_w^2}{P_c^2}$

WHAOF=Q $\frac{P_c^2 - P_w^2}{P_c^2 - P_w^2} = \frac{P_c^2 - P_w^2}{P_c^2 - P_w^2}$

Calculated wellbore	
Minimum Well	
Approved by Commission: 10-6-03	Conducted by:
Calculated by:	Checked by:

(over)

IF THE ALLOWABLE FOR THIS WELL HAS BEEN ADJUSTED BY COMMISSION ORDER, PLEASE GIVE THE ORDER NUMBER(S) IN ONE OR MORE OF THE CATEGORIES BELOW:

INCREASED DENSITY 477367 5 LOCATION EXCEPTION 476849 NP *

COMMINGLING _____ MULTIPLE ZONE _____

SEPARATE OR SPECIAL ALLOWABLE _____ *

OTHER PENALTY ORDER(S) _____ *

*FOR THESE ORDER TYPES, PLEASE DESCRIBE ALLOWABLES AND/OR PENALTIES:

I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.


SIGNATURE

Regulatory Affairs Tech
TITLE

Questar Exploration and Production Company
COMPANY

9/29/2003
DATE

(918) 488-8962
PHONE NO.

- Pc SHUT-IN PRESSURE, PSIA (LENGTH OF SHUT-IN MINIMUM OF 24 HOURS).
- Pw STATIC COLUMN WELLHEAD PRESSURE CORRESPONDING TO THE FLOWING WELLHEAD PRESSURE, PSIA (TO BE RECORDED AT END OF EACH FLOW RATE.) THE VALUE OF Pw SHOULD NOT EXCEED 90% OF Pc.
- Gg SPECIFIC GRAVITY OF SEPARATOR GAS (AIR = 1.000).
- L LENGTH OF THE FLOW STRING FROM THE MIDDLE OF THE PRODUCING FORMATION TO THE PRESSURE POINT AT WELLHEAD, FEET.
- H VERTICAL DEPTH CORRESPONDING TO L, FEET.
- Q 24 HOUR RATE OF FLOW, MCF/D.
- d INSIDE DIAMETER, INCHES.
- R DEGREES, RANKINE (DEGREES FAHRENHEIT ABSOLUTE).
- Pr REDUCED PRESSURE, DIMENSIONLESS.
- Tr REDUCED TEMPERATURE, DIMENSIONLESS.
- Z COMPRESSIBILITY FACTOR, DIMENSIONLESS.

Date: 05/19/2005 TIME: 14:25

NOTATION: INSIDE THE PROPERTY BOUNDARY

Payor: QUESTAR

Check 5031787
Intent to Drill

INTENT TO DRILL CHECKLIST

A. SURFACE CASING
1. Insufficient amount, Requires _____ feet
2. Insufficient Alternate Casing Program
3. No Affidavit Submitted for Alternative Casing Program
4. Reentry requires _____ feet, only
B. UNSPACED: Less than 2500 ft (165') More than 2500 ft (330')
C. SPACED: SPACING ORDER No. _____
1. Square Pattern: 2.5, 10, 40, 160, 640
2. Rectangular pattern: 5, 20, 80, 320
NW/SE or NE/SW
3. Rectangular slot pattern: 5, 20, 80, 320
Prior to 1971 (Y, N) S/L/D

D. LOCATION EXCEPTION:
1. Surface Hole Location different
2. Bottom Hole Location different
E. PENDING APPLICATION: Spacing/Location Exception
F. OPERATOR NAME DIFFERENT in order No. _____
H.O.M. DATE: _____
C.D. No.: _____
Name on order: _____
Location Exception/Increased Density/Pooling
G. Increased Density/Location Exception EXPIRED
Order Expired Date: _____
H. Outline Lease or Property Boundary

Surface 2325 FSLT 2295 FWL
Sec 33. 9N-18E
BHL
no closer than 330 ft from boundary
47269/160 Horizontal
ext for Hartshorne local
44464
no closer than 330 ft from boundary
I.O. 476822/ 6-12-03
confirms 47269
2003032590/
I.O. 476822/ 6-12-03
still in effect
2003032079/ Questar Exploratory
I.O. 476822/ 6-12-03
X to 47269 Hartshorne local
Loc 2325 FSLT 2295 FWL
Sec 33. 9N-18E
no closer than 330 ft from boundary

INTENT TO DRILL CHECKLIST

A. NONE filed
B. EXPIRED Date _____
C. OUTSTANDING COMPLETION ORDER

7. INTENTS
A. NONE filed
B. EXPIRED Date _____
C. OUTSTANDING COMPLETION ORDER

8. SPACING
A. NONE filed
B. EXPIRED Date _____
C. OUTSTANDING COMPLETION ORDER

9. GEOLOGY
A. NONE filed
B. EXPIRED Date _____
C. OUTSTANDING COMPLETION ORDER

31. AFFIDAVIT FOR ALTERNATIVE CASING PROGRAM

1. This well () WILL () WILL NOT () penetrate any known lost circulation zones
2. During the drilling of this well, withdrawals from any water well within 1/4 mile () WILL () WILL NOT () exceed 50 gallons per minute
3. List the following for all water wells within 1/4 mile of this well (Information concerning some water wells may be obtained from the OKLAHOMA WATER RESOURCES BOARD, P.O. Box 150, Oklahoma City, OK 73101-0150). If no water wells are found, so state:
Name of Owner/Operator _____ Address of Owner/Operator _____ Location (Nearest 1/4 1/4 1/4)
Deepest producing interval _____

30. Bottom Hole Location for Horizontal Hole (DRAINHOLES)

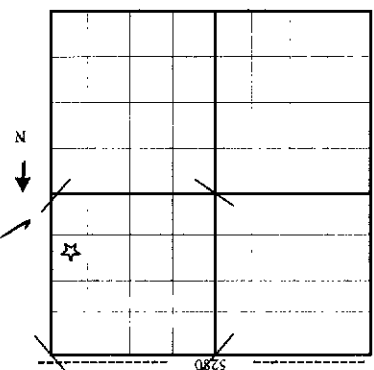
Measured Total Depth	True Vertical Depth	Radius of turn	Direction	Section Lines	Spot Location
1005'	1705'	700'	N65E	from SOUTH LINE	330'
Depth of Deviation	True Vertical Depth	Radius of turn	Direction	Section Lines	Spot Location
1005'	1705'	700'	N65E	from SOUTH LINE	330'
Depth of Deviation	True Vertical Depth	Radius of turn	Direction	Section Lines	Spot Location
1005'	1705'	700'	N65E	from SOUTH LINE	330'

29. Bottom Hole Location

Measured Total Depth	True Vertical Depth	Radius of turn	Direction	Section Lines	Spot Location
1005'	1705'	700'	N65E	from SOUTH LINE	330'
Depth of Deviation <td>True Vertical Depth<td>Radius of turn<td>Direction<td>Section Lines<td>Spot Location</td></td></td></td></td>	True Vertical Depth <td>Radius of turn<td>Direction<td>Section Lines<td>Spot Location</td></td></td></td>	Radius of turn <td>Direction<td>Section Lines<td>Spot Location</td></td></td>	Direction <td>Section Lines<td>Spot Location</td></td>	Section Lines <td>Spot Location</td>	Spot Location
1005'	1705'	700'	N65E	from SOUTH LINE	330'

28. OCC USE ONLY

A. Category: 1A 1B 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100



25. PIT INFORMATION - PIT #2

A. Type of mud system: WATER BASED OIL BASED GAS BASED (AIR DRILL)
B. Expected mud/chloride content: maximum _____ ppm
C. Type of Pit System: on-site off-site closed: If off-site, specify location _____
D. Is depth to top of ground water greater than 10 ft below base of pit? Y N
E. Within 1 mile of municipal water well? Y N
F. Wellhead Protection Area: Y N
G. Special new or field rule: _____
H. Soil or Geomembrane Liner Required? Y N
I. Deep SCA? Y N
J. Backlog Aquifer: Other HSA Non-HSA
K. Yield > 50 20 mil 30 mil

PIT #2

- A. Type of mud system: WATER BASED OIL BASED GAS BASED (AIR DRILL)
- B. Expected mud chloride content: maximum ppm; average ppm
- C. Type of Pit System: on-site; off-site; closed; If off-site, specify location:
- D. Is depth to top of ground water greater than 10 ft below base of pit? Y N
- E. Within 1 mile of municipal water well? Y N
- F. Wellhead Protection Area Y N

OFFSITE PIT #

26.2. OCC USE ONLY

A. Category 1A 1B 2 3 4 5m

B. Pit Location: Alluvial Plain/Terrace Deposit Bedrock Aquifer Other HSA Non-HSA

C. Special area or field rule? Deep SCA? Y N Yield > 50

E. SOIL or GEOMEMBRANE LINER REQUIRED? Y N; GEOMEMBRANE LINER REQUIRED? Y N 20 mil. 30 mil.

29. Bottom Hole Location

SEC TWP RGE COUNTY

SPOT LOCATION: 1/4 1/4 1/4 1/4

SECTION LINES: from SOUTH LINE from WEST LINE

Measured Total Depth True Vertical Depth BHL from Lease, Unit, or Property Line:

30. Bottom Hole Location for Horizontal Hole: (DRAINHOLES)

DRAIN HOLE #1: 33 SEC 9N TWP 18E RGE COUNTY Haskell

SPOT LOCATION: NW 1/4 SE 1/4 SW 1/4 NE 1/4

FEET FROM QUARTER SECTION LINES: from North LINE 2102' from East LINE 1878'

Depth of Deviation 1149' Radius of turn 600' Direction 49 Total Length 164'

Measured Total Depth 2856' True Vertical Depth 1749' End point location from lease, unit or property line: 522'

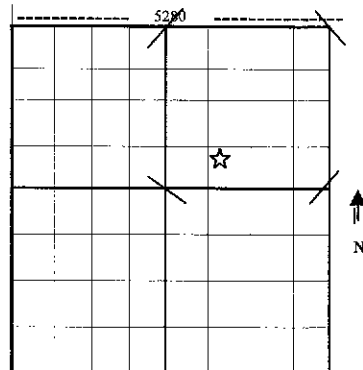
DRAIN HOLE #2: SEC TWP RGE COUNTY

SPOT LOCATION: 1/4 1/4 1/4 1/4

SECTION LINES: from SOUTH LINE from WEST LINE

Depth of Deviation Radius of turn Direction Total Length

Measured Total Depth True Vertical Depth End point location from lease, unit or property line:



1. If more than two drainholes are proposed, attach separate sheet indicating the necessary information
2. Direction must be stated in degrees azimuth
3. Please note the horizontal drainhole and its end point must be located within the legal boundaries of the lease or spacing unit. Directional surveys are required for all drainholes and directional wells.

31. AFFIDAVIT FOR ALTERNATIVE CASING PROGRAM

(signature on front of this form attests to this affidavit)

1. This well(WILL WILL NOT) penetrate any known lost circulation zones.
2. During the drilling of this well, withdrawals from any water well within 1/4 mile (WILL WILL NOT) exceed 50 gallons per minute.
3. List the following for all water wells within 1/4 mile of this well. (Information concerning some water wells may be obtained from the OKLAHOMA WATER RESOURCES BOARD, P.O. Box 150, Oklahoma City, OK 73101--0150). If no water wells are found, so state: (ATTACH ADDITIONAL SHEET IF NECESSARY)

Name of Owner/Operator Address of Owner/Operator

Location (Nearest 1/4 1/4 1/4)

Deepest producing interval

4. The projected depth of the well IS X IS NOT less than 100 feet from the top of any enhanced recovery project or gas storage facility.
5. A cement bond log is required to be run and submitted from not less than 100 feet below the base of the treatable water-bearing formation to the surface.
6. If casing depth is more than 250 feet deeper than base of the treatable water-bearing formation, operator must submit a letter of request listing reasons and precautions to be taken.

INTENT TO DRILL CHECKLIST

APPROVED

REJECTED

OCC USE ONLY

OCC USE ONLY

OCC USE ONLY

1. SURETY

- A. NONE filed
- B. EXPIRED: Date
- C. OUTSTANDING CONTEMPT ORDER

2. INTENTS

3. SPACING

4. GEOLOGY

A. SURFACE CASING

1. Insufficient amount, Requires feet
2. Insufficient Alternate Casing Program
3. No Affidavit Submitted for Alternative Casing Program
4. Reentry requires feet, only current.
- B. UNSPACED: Less than 2500 ft (165') More than 2500 ft (330')
- Only ft from N/S and ft from E/W line.

C. SPACED: SPACING ORDER No

1. Square Pattern: 2.5, 10, 40, 160, 640
2. Rectangular pattern: 5, 20, 80, 320

NW/SE or NE/SW

3. Rectangular slot pattern: 5, 20, 80, 320
- Prior to 1971 (Y, N) SU/LD

D. LOCATION EXCEPTION:

1. Surface Hole Location different
2. Bottom Hole Location different

E. PENDING APPLICATION: Spacing/Location Exception

C.D. No. H.O.M. DATE: F. OPERATOR NAME DIFFERENT in order No Name on order:

Location Exception/Increased Density/Pooling

G. Increased Density/Location Exception EXPIRED

Order Expired: Date:

H. Outline Lease or Property Boundary

DO NOT WRITE INSIDE THIS BOX

3-8-04
DA6-12-03

447269/160 Horizontal
ext 444964 for Hartshorne Coal
no closer than 330 from
boundary

485507/ reaffirm Horizontal
unit

477367/ Questar Exp. & Prod. Co.
ID 625-03
x10476822 Hartshorne
operator as above

480983/ Questar Exp. & Prod.
LE 9-30-03 Co.

Surf
Loc 23254SLB 229FWL
→ Sec 33-9N-18E

BHL 538FSLB 762FWL
x10 447269 NE 1/4 Sec 33-9N-18E
operator as above

API No.

061-21863

OTC/OCC Operator No.

4147

CEMENTING REPORT
To Accompany Completion ReportForm 1002C
Rev. 1996

OKLAHOMA CORPORATION COMMISSION

Oil & Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000
OAC 165:10-3-4(h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name	Russellville	OCC District	4
*Operator	QUESTAR Expl + Prod Co.	OCC/OTC Operator No.	4147
*Well Name/No.	Monk 4-33	County	Haskell
*Location	NW 1/4 NE 1/4 NE 1/4 SW 1/4	Sec	33
		Twp	8N
		Rge	18E

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date				7/15/03		
*Size of Drill Bit (Inches)				8 3/4"		
*Estimated % wash or hole enlargement used in calculations				20%		
*Size of Casing (inches O.D.)				7"		
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level				2102		
Type of Cement (API Class)				TX1		
In first (lead) or only slurry						
In second slurry						
In third slurry						
Sacks of Cement Used				160		
In first (lead) or only slurry						
In second slurry						
In third slurry				42		
Vol of slurry pumped (Cu ft)(14.X15.)						
In first (lead) or only slurry						
In second slurry						
In third slurry				400'		
Calculated Annular Height of Cement behind Pipe (ft)						
Cement left in pipe (ft)				60'		

*Amount of Surface Casing Required (from Form 1000)

250'

ft.

*Was cement circulated to Ground Surface?

X Yes X

*Was Cement Staging Tool (DV Tool) used?

Yes X No

*Was Cement Bond Log run?

Yes X No (If so, Attach Copy)

*If Yes, at what depth?

ft

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

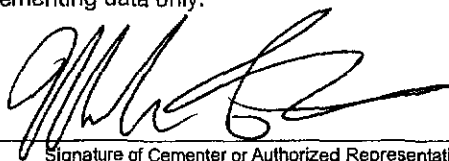
* Designates items to be completed by Operator.
Items not so designated shall be completed by the Cementing Company.

Remarks

*Remarks

CEMENTING COMPANY

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.



Signature of Cementer or Authorized Representative

OPERATOR

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.



Signature of Operator or Authorized Representative

Name & Title Printed or Typed	
MICHAEL IBARRA	
Cementing Company	
Dowell a division of Schlumberger Technology Corporation	
Address	
3221 South Zero St.	
City	
Fort Smith	
State	Zip
Arkansas	72908-6841
Telephone (AC) Number	
(501) 646-5804	
Date	
7/15/03	

*Name & Title Printed or Typed	
Linda Brown, Regulatory Affairs Tech	
*Operator	
Questar Expl & Prod Co	
*Address	
6120 S. Yale, Ste 1300	
*City	
Tulsa	
*State	*Zip
OK	74136
*Telephone (AC) Number	
918/488-8962	
*Date	
9-28-03	

INSTRUCTIONS

- This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.
 - An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
 - The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
- Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
- Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.

API No.
061-21863
OCC/OCC Operator No.
4147

CEMENTING REPORT
To Accompany Completion Report

Form 1002C
Rev. 1996

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000
OAC 165:10-3-4(h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name Russellville	OCC District 4
*Operator Questar	OCC/OCC Operator No. 04147
*Well Name/No. Monks # 4-33	County Haskell
*Location NW 1/4 NE 1/4 NE 1/4 SW 1/4	Sec 33 Twp 8N Rge

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date	7/1/03					
*Size of Drill Bit (Inches)	17 1/2					
*Estimated % wash or hole enlargement used in calculations	10%					
*Size of Casing (Inches O.D.)	14					
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level	38					
Type of Cement (API Class)	95X GROUT					
In first (lead) or only slurry						
In second slurry						
In third slurry						
Sacks of Cement Used	2 1/2 yds					
In first (lead) or only slurry						
In second slurry						
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.)	70					
In first (lead) or only slurry						
In second slurry						
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)	38					
Cement left in pipe (ft)	0					

*Amount of Surface Casing Required (from Form 1000)

ft.

*Was cement circulated to Ground Surface? ☒ Yes ☐ No
*Was Cement Bond Log run? ☐ Yes ☐ No (If so, Attach Copy)

*Was Cement Staging Tool (DV Tool) used? ☐ Yes ☐ No
*If Yes, at what depth? ft

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

* Designates items to be completed by Operator.
Items not so designated shall be completed by the Cementing Company.

Remarks

*Remarks

CEMENTING COMPANY

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.

Bill Milam

Signature of Cementer or Authorized Representative

OPERATOR

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.

Linda Brown

Signature of Operator or Authorized Representative

Name & Title Printed or Typed <i>B. H. Milam</i>	
Cementing Company <i>Allen Rathole</i>	
Address <i>3501 Main St.</i>	
City <i>Arkoma</i>	
State <i>Oklahoma</i>	Zip <i>74901</i>
Telephone (AC) Number <i>918-626-4026</i>	
Date <i>7/1/03</i>	

*Name & Title Printed or Typed <i>Linda Brown, Regulatory Affairs Tech</i>	
*Operator <i>Questar Expl & Prod Co</i>	
*Address <i>6120 S. Yale, Suite 1300</i>	
*City <i>Tulsa</i>	
*State <i>OK</i>	*Zip <i>74136</i>
*Telephone (AC) Number <i>918/488-8962</i>	
*Date <i>9/29/03</i>	

INSTRUCTIONS

- A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.

B) An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.

C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
- Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
- Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.

API No.
061-21863

OTC/OCC Operator No.
04147

CEMENTING REPORT
To Accompany Completion Report

Form 1002C
Rev. 1996

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000
OAC 165:10-3-4(h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name <i>Russellville</i>	OCC District <i>2</i>
*Operator <i>Questar Exploration</i>	OCC/OTC Operator No. <i>04147</i>
*Well Name/No. <i>Monk 4-33</i>	County <i>Haskell</i>
*Location <i>NW 1/4 NE 1/4 NE 1/4 SW 1/4</i>	Sec <i>33</i> Twp <i>8N</i> Rge <i>18E</i>

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date		<i>7-6-03</i>				
*Size of Drill Bit (Inches)						
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (Inches O.D.)		<i>9 5/8</i>				
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level		<i>288'</i>				
Type of Cement (API Class)		<i>H</i>				
In first (lead) or only slurry						
In second slurry						
In third slurry						
Sacks of Cement Used		<i>170</i>				
In first (lead) or only slurry						
In second slurry						
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry		<i>200</i>				
In second slurry						
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)		<i>Surface</i>				
Cement left in pipe (ft)		<i>8</i>				

*Amount of Surface Casing Required (from Form 1000) *250* ft.

*Was cement circulated to Ground Surface? <i>X</i> Yes <i>X</i> No	*Was Cement Staging Tool (DV Tool) used? <i>___</i> Yes <i>X</i> No
*Was Cement Bond Log run? <i>___</i> Yes <i>X</i> No (If so, Attach Copy)	*If Yes, at what depth? <i>___</i> ft

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

* Designates items to be completed by Operator.
Items not so designated shall be completed by the Cementing Company.

Remarks

*Remarks

CEMENTING COMPANY

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.



Signature of Cementer or Authorized Representative

OPERATOR

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.



Signature of Operator or Authorized Representative

Name & Title Printed or Typed	
Mike Gore	
Cementing Company	
Dowell a division of Schlumberger Technology Corporation	
Address	
3221 South Zero St.	
City	
Fort Smith	
State	Zip
Arkansas	72908-6841
Telephone (AC) Number	
(501) 648-5804	
Date	
7-6-03	

*Name & Title Printed or Typed	
Linda Brown, Regulatory Affairs Tech	
*Operator	
Questar Expl & prod Co	
*Address	
6120 S. Yale, Suite 1300	
*City	
Tulsa	
*State	*Zip
OK	74136
*Telephone (AC) Number	
918/488-8962	
*Date	
9-28-03	

INSTRUCTIONS

- This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.
 - An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
 - The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
- Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
- Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.**

PERMIT TO DRILL

OTC/OCC Number: 04147-0

OKLAHOMA CORPORATION COMMISSION

PERMIT TO DRILL

API Number: 061-21863

Approval Date: 06/12/2003

Expiration Date: 12/12/2003

Notice of Intention To: DRILL

Type of Drilling Operation: HORIZONTAL HOLE

Well Type: OIL/GAS

Well Location: Sec: 33 Twp: 09N Rge: 18E

County: HASKELL

Spot Location: NW4 NE4 NE4 SW4

Feet From: NORTH 1/4 Section Line 315 Feet From: EAST 1/4 Section Line 345

Feet from the nearest lease line: 330

Lease Name: MONKS

Well No: 4-33

Operator Name: QUESTAR EXPLORATION & PROD CO.

TELEPHONE: (801) 324-2600

Surface Owner Address

IRENE MONKS

ROUTE 1 BOX 1180

QUINTON OK 74561

Operator Return Address

QUESTAR EXPLORATION & PROD CO.

6120 S YALE, STE 1300

TULSA

OK 74136

Operation to Begin: 00/00/0000

Fresh Water Supply Well Drilled: NO

Surface Water used to Drill: YES

Formation Codes, Names, Depths, (Permit Valid For Listed Formations Only):

(1) 404HNCS HARTSHORNE COAL SEAM

1742

Spacing Order Numbers: 447269 476822

Special Orders:

Pending CD Numbers: Location Exception Orders: Increased Density Orders:

Total	Ground	Surface	Depth to base of Treatable
Depth:	Elevation	Casing:	Water-Bearing FM:
4368	824	250	200

PIT 1 INFORMATION:

Type of Pit System: ON-SITE

Type of Mud System:

AIR BASED (AIR DRILLED)

Pit is not located in a Hydrologically Sensitive Area.

Determination of Hydrologically Sensitive Area

not required.

Category of Pit: 4

Liner not required for Category: 4 PIT

Pit Location is NON-HSA.

Pit Location Formation: BOGGY

Mud System Change to Water-Based or Oil-Based Mud Requires an Amended Intent (Form 1000).

Approved Method for disposal of Drilling Fluids:

Evaporation/Dewater and Backfilling of Reserve Pit.

BOTTOM HOLE LOCATION(S) FOR HORIZONTAL HOLE

DRAIN HOLE #1

Sec 33 Twp 09N Rge 18E County HASKELL
Spot Location of End Point: S2 NE4 SE4 NE4
Feet From: NORTH 1/4 Section Line: 1700
Feet From: EAST 1/4 Section Line: 330
Depth of Deviation: 1005
Radius of Turn: 700
Direction: 65
Total Length: 2900
Measured Total Depth: 5004
True Vertical Depth: 1705
End Point Location from Lease, Unit
or Property Line: 330

This permit does not address the right of entry or settlement of surface damages. The duration of this permit is Six Months, except as otherwise provided by Rule 165: 10-3-1.

Rule 165: 10-3-4 (E)- The Operator shall give 24 Hours notice by telephone to the appropriate District Office of the Conservation Division as to when Surface Casing will be run.

PERMIT TO DRILL

OKLAHOMA CORPORATION COMMISSION

PERMIT TO DRILL

OTC/OCC Number: 04147-0

API Number: 061-21863-A

Approval Date: 06/12/2003
Expiration Date: 12/12/2003

Notice of Intention To: AMEND

Reason Amended: CORRECT BHL

Type of Drilling Operation: HORIZONTAL HOLE

Well Type: OIL/GAS

Well Location: Sec: 33 Twp: 09N Rge: 18E

County: HASKELL

Spot Location: NW4 NE4 NE4 SW4

Feet From: NORTH 1/4 Section Line 315 Feet From: EAST 1/4 Section Line 345

Feet from the nearest lease line: 2295

Lease Name: MONKS

Well No: 4-33

Operator Name: QUESTAR EXPLORATION & PROD.CO

TELEPHONE: (801) 324-2600

Surface Owner Address

IRENE MONKS, ET AL

RT.1, BOX 1180

QUINTON

OK 74561

Operator Return Address

QUESTAR EXPLORATION & PROD.CO

6120 S.YALE, STE. 1300

TULSA

OK 74136

Operation to Begin: 00/00/0000

Fresh Water Supply Well Drilled: NO

Surface Water used to Drill: YES

Formation Codes, Names, Depths, (Permit Valid For Listed Formations Only):

(1) 404HRSR HARTSHORNE

1742

Spacing Order Numbers: 485507

Special Orders:

Pending CD Numbers: Location Exception Orders: Increased Density Orders:
476849 477367

Total	Ground	Surface	Depth to base of Treatable
Depth:	Elevation	Casing:	Water-Bearing FM:
2856	824	250	200

PIT 1 INFORMATION:

Type of Pit System: ON-SITE

Type of Mud System:

AIR BASED (AIR DRILLED)

Pit is not located in a Hydrologically Sensitive Area.Determination of Hydrologically Sensitive Area
not required.

Category of Pit: 4

Liner not required for Category: 4 PIT

Pit Location is NON-HSA.

Pit Location Formation: BOGGY

Mud System Change to Water-Based or Oil-Based Mud Requires an Amended Intent (Form 1000).

Approved Method for disposal of Drilling Fluids:

Evaporation/Dewater and Backfilling of Reserve Pit.

OTC/OCC Number: 04147-0

API Number: 061-21863-AApproval Date: 06/12/2003
Expiration Date: 12/12/2003BOTTOM HOLE LOCATION(S) FOR HORIZONTAL HOLE

DRAIN HOLE #1

Sec 33 Twp 09N Rge 18E County HASKELL
Spot Location of End Point: NW4 SE4 SW4 NE4
Feet From: NORTH 1/4 Section Line: 2102
Feet From: EAST 1/4 Section Line: 1878
Depth of Deviation: 1149
Radius of Turn: 600
Direction: 49
Total Length: 764
Measured Total Depth: 2856
True Vertical Depth: 1749
End Point Location from Lease, Unit
or Property Line: 522

This permit does not address the right of entry or settlement of surface damages. The duration of this permit is Six Months, except as otherwise provided by Rule 165: 10-3-1.

Rule 165: 10-3-4 (E)- The Operator shall give 24 Hours notice by telephone to the appropriate District Office of the Conservation Division as to when Surface Casing will be run.

API NO.	061-21863
OTC PROD. UNIT NO.	061-111407

Rule 165:10-3-25

ORIGINAL

AMENDED

Reason Amended

*Correct legal SHL+BHL*COMPLETION REPORT
OKLAHOMA CORPORATION COMMISSION

Oil & Gas Conservation Division

Post Office Box 52000-2000

Oklahoma City, Oklahoma 73152-2000

310012002

Form 1002A
Rev. 1996

404 HNCS

COMPLETION & TEST DATA BY PRODUCING FORMATION

PLEASE TYPE OR USE BLACK INK ONLY

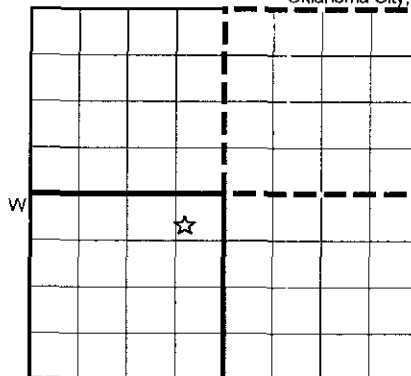
NOTE: Attach copy of original 1002A if recompletion or reentry

TYPE OF DRILLING OPERATION

___ STRAIGHT HOLE ___ DIRECTIONAL HOLE ☒ HORIZONTAL HOLE

If directional or horizontal, see reverse for bottom hole location.

COUNTY	Haskell	SEC	33	TWP	2N	RGE	18E
LEASE NAME	Monks						
SHL: NW4 NE4 SW4	315' FNL & 345' FEL			WELL NO. 4-33			
BHL: SE4 SW4 NE4	2102' FNL & 1878' FEL						
ELEVATION	Derrick Fl			SPUD DATE 7/6/2003			
DRLG FINISHED	Ground 824'			WELL COMPLETION 9/19/2003			
7/17/2003							
1ST PROD DATE	9/19/2003			RECOMP DATE			



LOCATE WELL

OPERATOR NAME	Questar Exploration and Production Company	OTC/OCC OPERATOR NO.	04147
ADDRESS	6120 S. Yale, Suite 1300		
CITY	Tulsa	STATE	OK
		ZIP	74136

COMPLETION TYPE

<input checked="" type="checkbox"/> SINGLE ZONE
<input type="checkbox"/> MULTIPLE ZONE ORDER NO.
<input type="checkbox"/> COMMINGLED ORDER NO.
LOCATION EXCEPTION ORDER NO. 476849
INCREASED DENSITY ORDER NO. 477367
PENALTY

OIL OR GAS ZONES

FORMATIONS	TOP	BOTTOM
Hartshorne	1761'	

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	FILLUP	TOP
Conductor	14"			38'		9 sks grout		
Surface	9 5/8"	32.2#	H-40	288'		17 sks	Surface	Surface
Intermediate								
Production	7"	23#	J-55	2102'		160 sks	Surface	Surface
Liner	3 1/2"	9.4#		2851' (TOL @ 1875')				

PACKER @ _____ BRAND & TYPE _____

TOTAL DEPTH 2856'

PLUG @ _____ TYPE _____

FORMATION	Hartshorne
SPACING & SPACING ORDER NUMBER	47268 485507
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp	Gas
PERFORATED INTERVALS	Open hole
ACID/VOLUME	No
Fracture Treated?	No
Fluids Amounts	

INITIAL TEST DATA

INITIAL TEST DATE	9/22/2003
OIL-BBL/DAY	0
OIL-GRAVITY (API)	
GAS-MCF/DAY	64
GAS-OIL RATIO CU FT/BBL	
WATER-BBL/DAY	3
PUMPING OR FLOWING	Pumping
INITIAL SHUT-IN PRESSURE	180#
CHOKE SIZE	Open
FLOW TUBING PRESSURE	10#

A record of the formations drilled through, and pertinent remarks are presented on the reverse. I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct, and complete to the best of my knowledge and belief.

SIGNATURE

Linda Brown

NAME (PRINT OR TYPE)

6120 S. Yale, Suite 1300

Tulsa

OK

74136

ADDRESS

CITY

STATE

ZIP

9/22/2003

(918) 488-8962

DATE

PHONE NUMBER

PLEASE TYPE OR USE BLACK INK ONLY

FORMATION RECORD

Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

LEASE NAME

Monks

WELL NO.

4-33

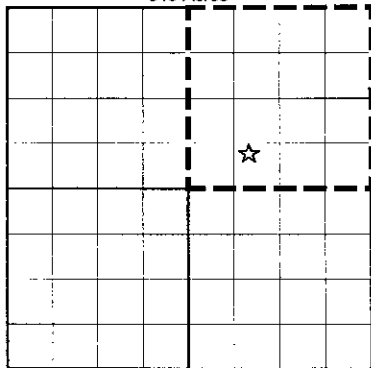
NAMES OF FORMATIONS	TOP	BOTTOM
Hartshorne	1761'	

FOR COMMISSION USE ONLY	
APPROVED <i>GM</i>	DISAPPROVED
1) ITD Section	
a) No Intent to Drill on file	
1) Send warning letter	
2) Recommend for contempt	
2) Reject Codes	

Were open hole logs run?	yes	X	no
Was an electric survey run?	yes	X	no
Was CO2 encountered?	yes	X	no
Was H2S encountered?	yes	X	no
Were unusual drilling circumstances encountered?	yes	X	no
If yes, briefly explain.			

Other remarks:

SECTION 33
640 Acres



BOTTOM HOLE LOCATION

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Measured Total Depth	True Vertical Depth		
Feet From Quarter Section Lines		FSL	FWL
BHL From Lease, Unit, or Property Line:			

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (DRAINHOLES)

DRAINHOLE #1

SEC	TWP	RGE	COUNTY
33	9N	18E	Haskell
Spot Location	SE4 SW4 NE4		
Depth of Deviation	Radius of Turn	Direction	Total Length
1149'	600'	N49E	764'
Measured Total Depth	True Vertical Depth	End Pt Location From Lease, Unit or Property Line:	
2856	1749'	522' FSL of NE 4	

If more than two drainholes are proposed, attach a separate sheet indicating the necessary information.

Direction must be stated in degrees azimuth.

Please note, the horizontal drainhole and its end point must be located within the boundaries of the lease or spacing unit.

Directional surveys are required for all drainholes and directional wells.

DRAINHOLE #2

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn	Direction	Total Length
Measured Total Depth	True Vertical Depth	End Pt Location From Lease, Unit or Property Line:	

TYPE OR USE BLACK INK
SEE REVERSE FOR INSTRUCTIONS

OKLAHOMA CORPORATION COMMISSION

Oil and Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000

501049403

Form 1003/1003C
(Rev 1995)

API NO.	061-21863
OTC PROD. UNIT NO.	061-111407
PLUGGING DATE	II-16-04

PLUGGING RECORD
OAC 165:10-11-7



Well Name/No.	Monks # 4-33		
Location	Sec	Twp	Rge
NW 1/4 NE 1/4 NE 1/4 SW 1/4	33	9N	18 E
FI FSL of 1/4 Sec	2295	FI FWL of 1/4 Sec	County Haskell
Total Depth	2102 ft.	Base of Treatable Water	200'
		Well Classification	GAS

Locate Well on Grid

OPERATOR

Name	Questar Exploration and Production Company	OTC/OCC No.	04147
Address	6120 S. Yale, Suite 1300	Phone	418 488-8962
City	Tulsa	State	OK
		Zip	74136-4210

PIPE RECORD

Size	Run (ft)	Filled (ft)	
	38'	none	Conductor
9 5/8"	288'		Surface
7"	2102'		I.C.
			I.C.
			P.C.
			Lnr.

PERFORATION DEPTHS

Set 1 -	From	To
Set 2 -	From	To
Set 3 -	From	To
Set 4 -	From	To

Plug	Type of Plug	Hole Size or Pipe Size	Depth	No. Sacks Cement	Slurry Volume	Calculated TOC	Measured Top of Plug If Tagged
1	CIBP	7 in.	1874 ft.				
2	Cement	7 in.	1874 ft.	150	165 c.ft.	388 ft.	
3	Cement	9-5/8 in.	388 ft.	150	165 c.ft.	4 ft.	4 ft.
4							
5							

REMARKS

Filled Hole With Mud Before Plugging

Reason for Plugging

CEMENTER CERTIFICATION

I certify that the cement plugs were placed in this well as shown on this report, per O.C.C. instructions. The cementing was performed by me or under my direct supervision. I certify all cementing data is true, correct and complete.

Signature	Date	Name and Title Typed or Printed	Permit No.
	II-20-04	Lindell Sharp, Owner / Cementer	589
Company Name	Sharp Well Cementing, Inc.		Phone
Address	P. O. Box 99		301 996-2500
City	Huntington	State	AR.
		Zip	72940

OPERATOR CERTIFICATION

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented herein, and that data and facts presented are true, correct, and complete to the best of my knowledge. This covers all well data and information presented herein.

Signature	Date	Name and Title Typed or Printed
	12/10/04	LaCretia Toppah Regulatory Affairs Tech Asst

CORPORATION COMMISSION USE ONLY

By signing this form, the District Manager has approved the contents thereof as to form only. Said District Manager does not warrant the facts provided by the operator are true or that the operator has properly plugged the described well.

Signature of District Manager		Field Inspector	
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INSTRUCTIONS

1. Form must be completed in its entirety and mailed to the appropriate District Office within 30 days after plugging is completed.
2. Send original and one (1) copy.
3. Type or use BLACK ink only. This form is for record and must be legible.
4. API No. must be on form. To get an API No. call Petroleum Information at (405) 848-9824.
5. In specifying the type of plug use the following notations:
CIBP - cast iron bridge plug
CEM - cement plug
CIBP + CEM - cast iron bridge plug and cement
Pkr - packer.
If other abbreviations are used, please define.
6. Cement plugs shall be placed in the well bore as required by the Rules of the Commission plus any additional plugs as may be specified by the District Manager or his representative, where unusual local conditions exist. (OAC 165:10-11-6)
7. The minimum amount of cement normally used in each plug in the open hole shall be a slurry volume equal to the amount necessary to fill the calculated volume of 100 feet of the hole in which the plug is placed.
8. A minimum 30 foot cement plug is required to be placed in the top of the well. (OAC 165:10-1-)

DISTRICT I
115 West 6th Street
Post Office Box 779
Bristow, OK 74010
(918) 367-3396

DISTRICT II
101 South 6th Street
Post Office Box 1107
Kingfisher, OK 73750
(405) 375-5570

DISTRICT III
1016 Maple
Post Office Box 1525
Duncan, OK 73533
(405) 255-0103

DISTRICT IV
703 North Broadway
Ada, OK 74820
(405) 332-3441

FOR COMMISSION USE ONLY

Approved	Rejected	Approved	Rejected
_____	_____ 1. API No. invalid.	_____	_____ 10. Record of pipe pulled incomplete.
_____	_____ 2. Legal Description invalid for County.	_____	_____ 11. Well location does not match plat.
_____	_____ 3. Operator No. missing/invalid.	_____	_____ 12. Treatable water depth missing.
_____	_____ 4. Well location missing/invalid.	_____	_____ 13. Perforation depths missing.
_____	_____ 5. Well name missing.	_____	_____ 14. Information on plug - operator.
_____	_____ 6. Well No. missing.	_____	_____ 15. Plugging description missing.
_____	_____ 7. Plugging date invalid.	_____	_____ 16. Plugging contractors name missing.
_____	_____ 8. Well type missing/invalid.	_____	_____ 17. Information on plug-cementing company.
_____	_____ 9. Total depth missing/invalid.	_____	_____ 18. Other: _____



Scientific Drilling International

Survey Completion Report

2nd Wellpath

Company: Questar
Field: Haskell County Oklahoma
Site: Section 33 - ~~N~~ - 19E
Well: Monks #4-33 ^{19N}
Wellpath: OH Original hole

Date: 7/24/2003

Plane of Vertical Section: 64.7 Az.

MD ft	Incl deg	Azim deg	CLen ft	TVD ft	VS ft	N/S ft	E/W ft	DLS deg/100ft
----------	-------------	-------------	------------	-----------	----------	-----------	-----------	------------------

0	0	0	0	0	0	0	0	0
360	1.8	211.9	360	359.9	-5.4	-4.8	-3	0.5
660	1.2	179.5	300	659.8	-11.9	-11.9	-5.5	0.34
764	1.2	146	104	763.8	-12.7	-13.9	-4.8	0.67
797	1.7	139	33	796.8	-12.7	-14.6	-4.3	1.6
827	4.6	81.5	30	826.8	-11.7	-14.7	-2.8	13.2
858	9.5	65.7	31	857.5	-8.1	-13.5	0.7	16.9
888	11	62.6	30	887	-2.9	-11.2	5.5	5.33
900	10.94	59.66	12	898.8	-0.7	-10.1	7.5	4.69
918	10.9	55.2	18	916.5	2.7	-8.2	10.4	4.69
949	9.6	49.7	31	947	8.2	-4.9	14.8	5.24
979	8.3	47.8	30	976.6	12.8	-1.8	18.3	4.44
1009	8	50.9	30	1006.3	17.1	1	21.5	1.77
1039	8.2	58.4	30	1036	21.3	3.4	25	3.58
1070	8.1	60.9	31	1066.7	25.6	5.6	28.7	1.19
1100	7.7	54.8	30	1096.4	29.7	7.8	32.2	3.09
1130	7.5	51.4	30	1126.2	33.7	10.2	35.4	1.64
1160	7.3	49.5	30	1155.9	37.5	12.6	38.4	1.05
1191	7	51.7	31	1186.7	41.4	15.1	41.4	1.31
1222	6.9	54.9	31	1217.5	45.1	17.3	44.4	1.29
1252	6.3	56.7	30	1247.3	48.6	19.3	47.2	2.12
1265	7.35	58.21	13	1260.2	50.1	20.1	48.5	8.16
1283	8.8	59.7	18	1278	52.6	21.4	50.7	8.16
1314	12	58.6	31	1308.5	58.1	24.3	55.5	10.3
1344	14.8	54.6	30	1337.7	65	28.1	61.3	9.83
1375	17.6	51.8	31	1367.4	73.6	33.3	68.2	9.37

Company: Questar
Field: Haskell County Oklahoma
Site: Section 33 - 8N - 19E
Well: Monks #4-33
Wellpath: OH Original hole

Date: 7/24/2003

Plane of Vertical Section: 64.7 Az.

MD ft	Incl deg	Azim deg	CLen ft	TVD ft	VS ft	N/S ft	E/W ft	DLS deg/100ft
1406	21.6	52.6	31	1396.6	84	39.7	76.4	12.9
1437	25.8	54.6	31	1425	96.5	47.1	86.4	13.8
1469	29.8	54.6	32	1453.3	111.3	55.7	98.6	12.5
1501	33.8	54	32	1480.5	128.2	65.5	112.3	12.5
1533	37.4	53.3	32	1506.5	146.7	76.6	127.3	11.3
1563	40.5	52.9	30	1529.8	165.6	87.9	142.4	10.4
1595	41.8	53.9	32	1553.9	186.6	100.5	159.3	4.55
1626	44.7	53.5	31	1576.5	207.8	113	176.4	9.4
1657	48.5	51.6	31	1597.8	230.3	126.7	194.3	13
1720	53.5	50.7	63	1637.4	279.2	157.4	232.4	8.01
1750	56.8	49.8	30	1654.6	303.8	173.2	251.3	11.3
1781	61.5	48.8	31	1670.5	330.4	190.5	271.5	15.4
1812	64.7	48.4	31	1684.5	358.1	208.8	292.2	10.4
1842	68	48.2	30	1696.5	385.5	227.1	312.7	11
1874	70.9	47.6	32	1707.8	415.5	247.2	334.9	9.23
1904	73.9	47.3	30	1716.8	444	266.5	356	10.1
1935	77.4	47.3	31	1724.5	474	286.9	378.1	11.3
1966	80.9	47.5	31	1730.3	504.4	307.5	400.5	11.3
1998	84.3	47.8	32	1734.5	536.1	328.9	423.9	10.7
2030	85.7	48.4	32	1737.3	568	350.2	447.7	4.76
2060	88.5	49.2	30	1738.8	598	369.9	470.2	9.71



Job Number: OKC0803- D116
 Company: Questar
 Lease/Well: Monks #4-33
 Location: Haskell County, Oklahoma
 Rig Name: Key #605
 RKB:
 G.L. or M.S.L.:

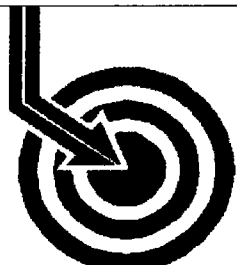
State/Country:
 Declination:
 Grid:
 File name: C:\WINSERVE\JOBS\MONKS433.SVY
 Date/Time: 11-Sep-03 / 10:12
 Curve Name:

Maverick Directional Services, Inc.
 Spring, Texas
 Calculated by: Jose Garza
 jose@maverickdirectional.com
 281-364-1212-Main

WINSERVE SURVEY CALCULATIONS
 Minimum Curvature Method
 Vertical Section Plane 49.66
 Vertical Section Referenced to Wellhead
 Rectangular Coordinates Referenced to Wellhead

Measured Depth FT	Incl Angle Deg	Drift Direction Deg	True Vertical Depth	Vertical Section FT	N-S FT	E-W FT	CLOSURE Distance FT	Direction Deg	Dogleg Severity Deg/100
Tie-into Gyrodata survey									
2101.00	90.71	48.37	1735.30	645.36	407.31	500.78	645.51	50.88	.00
2139.00	90.60	51.00	1734.87	683.36	431.89	529.75	683.50	50.81	6.93
2170.00	89.30	50.00	1734.89	714.35	451.61	553.67	714.49	50.80	5.29
2202.00	86.40	49.00	1736.09	746.33	472.37	577.98	746.46	50.74	9.59
2233.00	87.30	50.00	1737.80	777.28	492.48	601.52	777.41	50.69	4.34
2264.00	87.80	49.00	1739.12	808.25	512.59	625.07	808.37	50.65	3.60
2296.00	90.30	50.00	1739.65	840.24	533.37	649.40	840.36	50.60	8.41
2327.00	92.30	52.00	1738.95	871.22	552.87	673.48	871.34	50.62	9.12
2358.00	91.00	52.00	1738.06	902.18	571.95	697.90	902.32	50.66	4.19
2389.00	87.80	52.00	1738.38	933.15	591.03	722.32	933.31	50.71	10.32
2420.00	88.50	50.00	1739.38	964.13	610.53	746.40	964.29	50.72	6.83
2451.00	89.00	51.00	1740.06	995.11	630.24	770.31	995.28	50.71	3.61
2483.00	88.00	51.00	1740.90	1027.09	650.37	795.17	1027.27	50.72	3.12
2514.00	88.50	51.00	1741.84	1058.07	669.87	819.25	1058.26	50.73	1.61
2544.00	90.20	53.00	1742.18	1088.04	688.34	842.89	1088.24	50.76	8.75
2575.00	89.10	53.00	1742.37	1118.99	706.99	867.65	1119.22	50.83	3.55
2607.00	89.80	53.00	1742.68	1150.93	726.25	893.20	1151.20	50.89	2.19
2638.00	89.30	56.00	1742.92	1181.82	744.25	918.44	1182.13	50.98	9.81
2669.00	89.40	59.00	1743.27	1212.52	760.90	944.58	1212.93	51.15	9.68
2700.00	89.20	59.00	1743.65	1243.11	776.87	971.15	1243.64	51.34	.65

Measured Depth FT	Incl Angle Deg	Drift Direction Deg	True Vertical Depth	Vertical Section FT	N-S FT	E-W FT	CLOSURE		Dogleg Severity Deg/100
							Distance FT	Direction Deg	
2731.00	88.50	60.00	1744.28	1273.65	792.60	997.85	1274.33	51.54	3.94
2762.00	87.50	61.70	1745.36	1304.04	807.69	1024.91	1304.91	51.76	6.36
2793.00	86.60	62.00	1746.95	1334.30	822.29	1052.20	1335.40	51.99	3.06
2824.00	87.60	61.00	1748.52	1364.60	837.07	1079.41	1365.95	52.21	4.56
Projected survey to T.D.									
2856.00	87.60	61.00	1749.86	1395.95	852.57	1107.38	1397.55	52.41	.00



Scientific
Drilling

QUESTAR

Field: HASKELL COUNTY OKLAHOMA
Site: SECTION 33 - 8N- 19E
Well: Monks 4-33
Wellpath: SIDETRACK WELLPATH
Survey: Survey #1

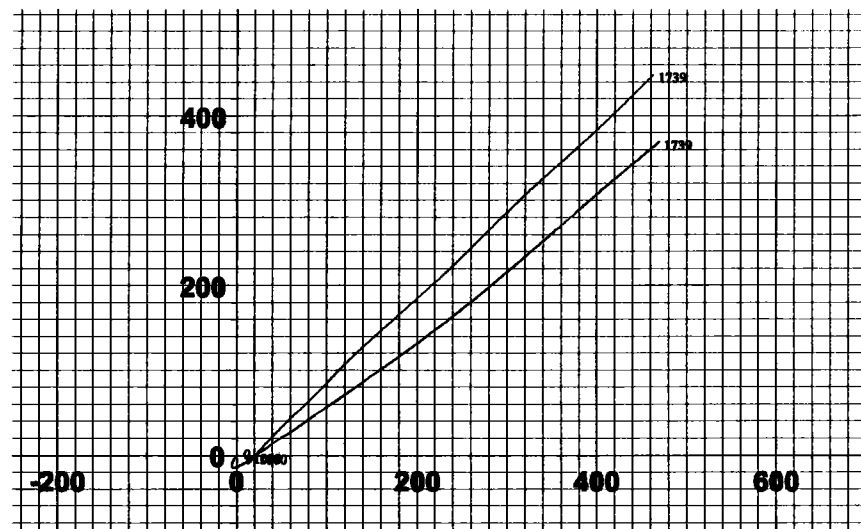
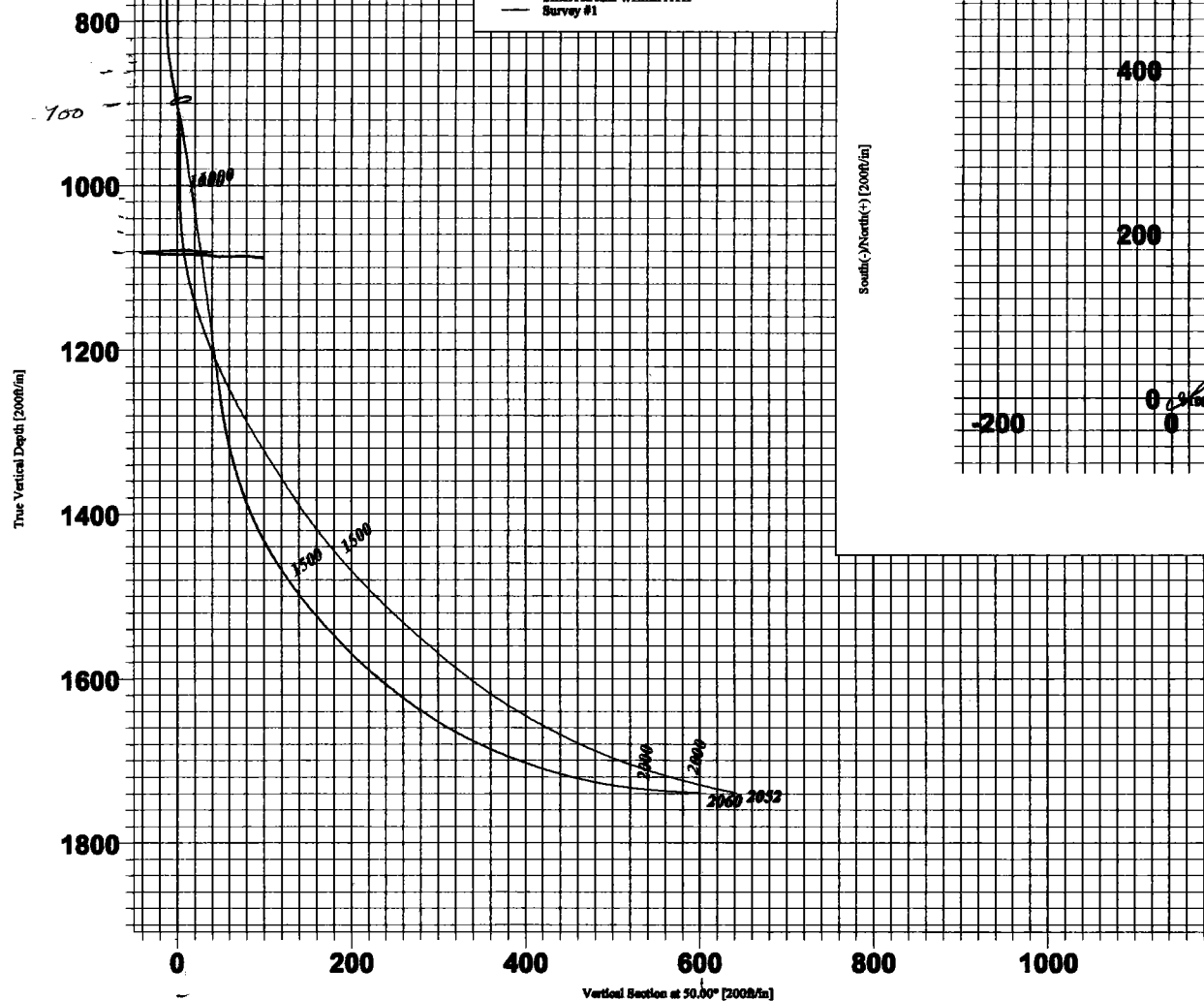


Azimuths to True North
Magnetic North: 4.00°

Magnetic Field
Strength: 52050nT
Dip Angle: 64.41°
Date: 7/9/2003
Model: igr2000

LEGEND

— Monks 4-33 (ORIGINAL WELL PATH)
— SIDETRACK WELLPATH
— Survey #1



Bottom Hole Location 1st Wellpath
1740.5' TVD 439.1' North & 446.9' East
2052' MD 626.5 feet @ 45.5 Azimuth

Bottom Hole Location 2nd Wellpath
1738.8' TVD 369.9' North & 470.2' East
2060' MD 598 feet @ 50 Azimuth

*This survey is correct to the best of my knowledge
and is supported by actual field data.*

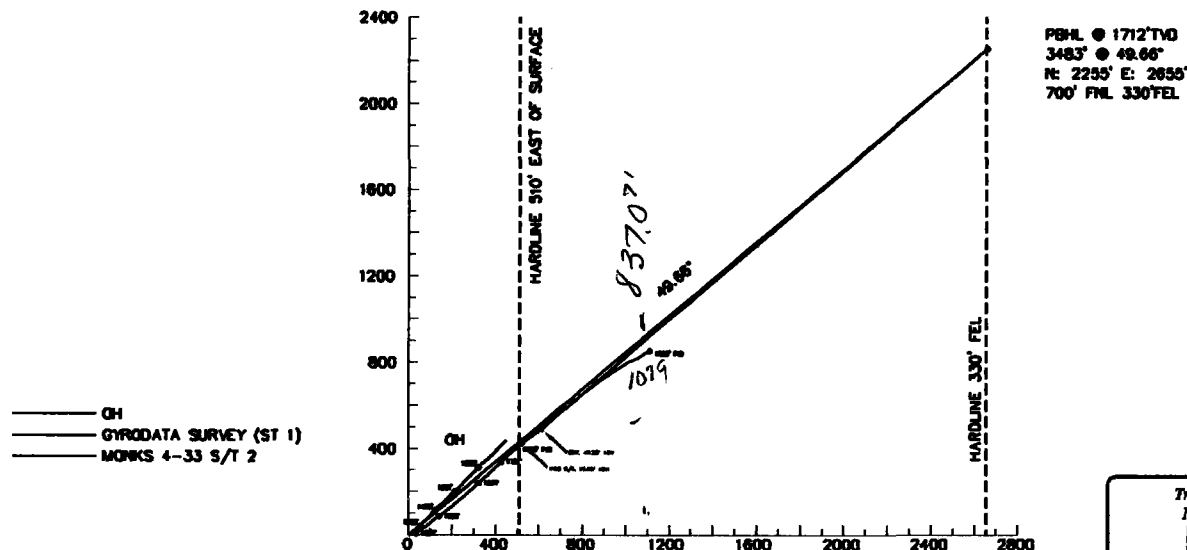
Company Representative

QUESTAR

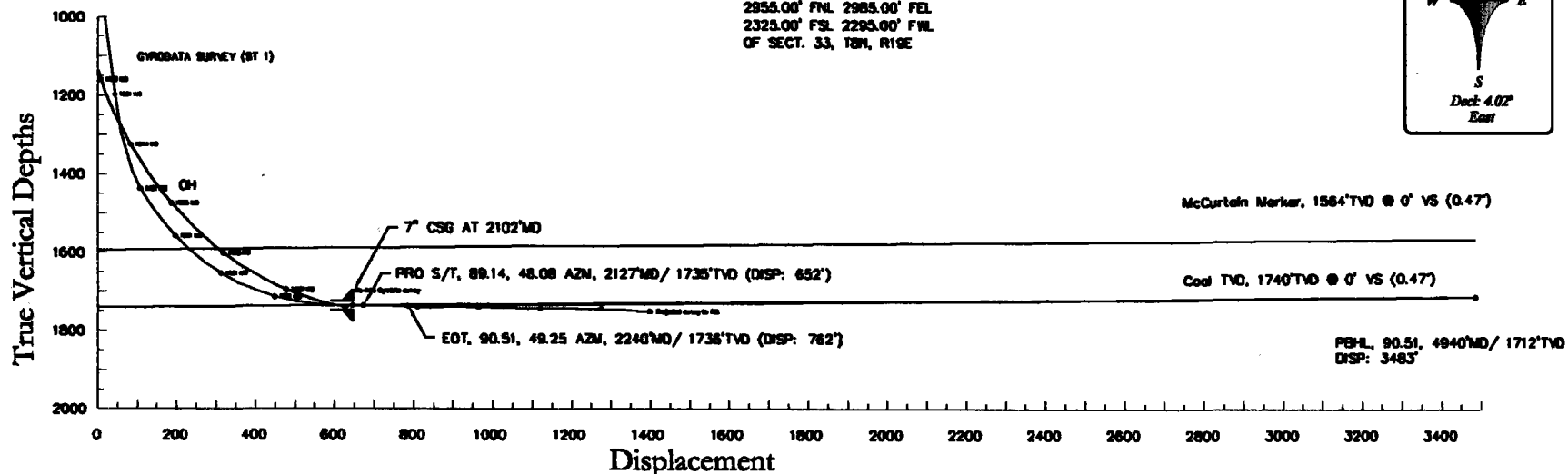
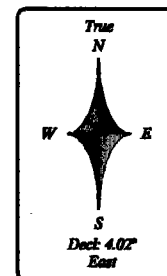
Questar
Monks #4-33 S/T 2
Haskell County, Oklahoma



Plan View
Scale: 1" = 200'



SURFACE LOCATION
2855.00' FHL 2985.00' FEL
2325.00' FSL 2295.00' FHL
OF SECT. 33, T8N, R19E



MAVERICK DIRECTIONAL SERVICES

281-364-1212 866-459-0233

SPRING, TEXAS

Drawn by: Jose Garza

File: MONK433L.dwg

Date: 8/19/2003

Revision: 0

Tool Box: MONK433L.dwg

Approved by:

8-1/2 x 11: MONK433L.dwg

API NO. 061-21863
OTC PROD. UNIT NO. 061-111407

Rule 165:10-3-25
☒ ORIGINAL
☒ AMENDED
Reason Amended

2444

Correct legal SHL+BHL

COMPLETION REPORT
OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000

310012002

Form 1002A
Rev. 1996

PLEASE TYPE OR USE BLACK INK ONLY

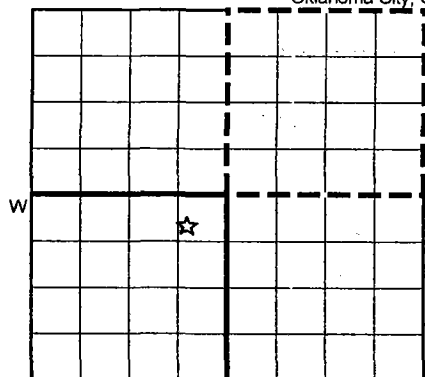
NOTE: Attach copy of original 1002A if recompletion or reentry

TYPE OF DRILLING OPERATION

___ STRAIGHT HOLE ___ DIRECTIONAL HOLE ☒ HORIZONTAL HOLE

If directional or horizontal, see reverse for bottom hole location.

COUNTY Haskell	SEC 33	TWP 3N	RGE 18E
LEASE NAME Monks	WELL NO. 4-33		
SHL: NW4 NE4 NE4 SW4		315' FNL & 345' FEL	
BHL: SE4 SW4 NE4		2102' FNL & 1878' FEL	
ELEVATION Derrick FI	Ground	824'	SPUD DATE 7/6/2003
DRLG FINISHED 7/17/2003	WELL COMPLETION 9/19/2003		
1ST PROD DATE 9/19/2003	RECOMP DATE		



LOCATE WELL

OPERATOR NAME Questar Exploration and Production Company	OTC/OCC OPERATOR NO. 04147
ADDRESS 6120 S. Yale, Suite 1300	
CITY Tulsa	STATE OK
ZIP 74136	

COMPLETION TYPE

<input checked="" type="checkbox"/> SINGLE ZONE
<input type="checkbox"/> MULTIPLE ZONE ORDER NO.
<input type="checkbox"/> COMMINGLED ORDER NO.
LOCATION EXCEPTION ORDER NO. 476849
INCREASED DENSITY ORDER NO. 477367
PENALTY

OIL OR GAS ZONES

FORMATIONS	TOP	BOTTOM
Hartshorne	1761'	

CASING & CEMENT (Form 1002C must be attached)

TYPE	SIZE	WEIGHT	GRADE	FEET	PSI	SAX	FILLUP	TOP
Conductor	14"			38'		9 sks grout		
Surface	9 5/8"	32.2#	H-40	288'		17 sks	Surface	Surface
Intermediate								
Production	7"	23#	J-55	2102'		160 sks	Surface	Surface
Liner	3 1/2"	9.4#		2851' (TOL @ 1875')				

PACKER @ _____ BRAND & TYPE _____ TOTAL DEPTH 2856'

PLUG @ _____ TYPE _____

FORMATION	Hartshorne
SPACING & SPACING ORDER NUMBER	447260 485507 160 acres
CLASS: Oil, Gas, Dry, Inj, Disp, Comm Disp	Gas
PERFORATED INTERVALS	Open hole
ACID/VOLUME	No
Fracture Treated?	No
Fluids Amounts	

INITIAL TEST DATA

INITIAL TEST DATE	9/22/2003
OIL-BBL/DAY	0
OIL-GRAVITY (API)	
GAS-MCF/DAY	64
GAS-OIL RATIO CU FT/BBL	
WATER-BBL/DAY	3
PUMPING OR FLOWING	Pumping
INITIAL SHUT-IN PRESSURE	180#
CHOKE SIZE	Open
FLOW TUBING PRESSURE	10#

A record of the formations drilled through, and pertinent remarks are presented on the reverse. I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct, and complete to the best of my knowledge and belief.

Linda Brown
SIGNATURE

Linda Brown
NAME (PRINT OR TYPE)

6120 S. Yale, Suite 1300 Tulsa OK 74136

ADDRESS CITY STATE ZIP

9/22/2003 (918) 488-8962

DATE PHONE NUMBER

PLEASE TYPE OR USE BLACK INK ONLY

FORMATION RECORD

Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

LEASE NAME

Monks

WELL NO.

4-33

NAMES OF FORMATIONS	TOP	BOTTOM
Hartshorne	1761'	

APPROVED <i>GA</i>	DISAPPROVED	FOR COMMISSION USE ONLY
		1) ITD Section
		a) No Intent to Drill on file
		1) Send warning letter
		2) Recommend for contempt
		2) Reject Codes

Were open hole logs run?	yes	X	no
Was an electric survey run?	yes	X	no
Was CO2 encountered?	yes	X	no
Was H2S encountered?	yes	X	no
Were unusual drilling circumstances encountered?	yes	X	no
If yes, briefly explain.			

Other remarks:

SECTION 33
640 Acres

BOTTOM HOLE LOCATION

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Measured Total Depth	True Vertical Depth	Feet From Quarter Section Lines FSL FWL	
BHL From Lease, Unit, or Property Line:			

BOTTOM HOLE LOCATION FOR HORIZONTAL HOLE: (DRAINHOLES)

DRAINHOLE #1

SEC	TWP	RGE	COUNTY
33	9N	18E	Haskell
Spot Location	SE4 SW4 NE4		Feet From Quarter Section Lines
Depth of Deviation	Radius of Turn	Direction	Total Length
1149'	600'	N49E	764'
Measured Total Depth	True Vertical Depth	End Pt Location From Lease, Unit or Property Line:	
2856	1749'	522' FSL of NE 4	

If more than two drainholes are proposed, attach a separate sheet indicating the necessary information.

Direction must be stated in degrees azimuth.

Please note, the horizontal drainhole and its end point must be located within the boundaries of the lease or spacing unit.

Directional surveys are required for all drainholes and directional wells.

DRAINHOLE #2

SEC	TWP	RGE	COUNTY
Spot Location	1/4	1/4	1/4
Depth of Deviation	Radius of Turn	Direction	Total Length
Measured Total Depth	True Vertical Depth	End Pt Location From Lease, Unit or Property Line:	