Form 3160- 5 (June, 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

FORM	APPROVED
1 017191	AL LINOAFD

Budget Bureau No. 1004- 0135

Expires: March 31,	7
Designation and Serial No.	-

SUNDRY NOTICES AND REPORTS ON WELLS	/	SF-078095A
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.		6. If Indian, Allottee, or Tribe Name
Use "APPLICATION FOR PERMIT" for such proposals		7 If-Unit or CA Agreement Designation

SUBMIT IN T	RIPLICATE	2005 SEP 14	7. If Unit or CA. Agreement Designation	_
1. Type of Well Oil Gas		REC	NA FIVED	
Well X Well Other 2. Name of Operator		070 FARM	# Well Name and No. Horton 1D	
Questar Exploration and Production Company 3. Address and Telephone No.	0.0005		9. API Well No. 30-045-33065	_
1050 17th Street, Suite 500, Denver, C 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			10. Field and Pool, or Exploratory Area Blanco MV (Basir	<u>.</u>]
NW /4, SE /4, Sec. Surface 1418' FSL 1267' FEL	7 ,T 31 N, R. 11 V	V .	11. County or Parish, State San Juan , WY	
BHL (0 0 12 CHECK APPROPRIATE BO)		OF NOTICE, RE	PORT OR OTHER DATA	_
TYPE OF SUBMISSION		TYPE OF ACT		-
XX Notice of Intent	Abandonment	=	nge Plans	_
Subsequent Report	Recompletion Plugging Back	Non-	Construction Routine Fracturing	
Final Abandonment Notice	Casing Repair Attering Casing Other Spud Notice	Conv	er Shut- Off version to Injection ose Water	ţ,
; ;			(Note: Report results of multiple completion on Well Completion Report and Log form.)	,

13. DESCRIBE PROPOSED OR COMPLETED OPERATIONS:

Clearly state all pertinent details and give pertinent dates, including estimated date of starting any

proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.

Questar Exploration and Production Company spud the Horton 1D well on September 5, 2005 at 5:00 p.m.

Please call me at 303-672-6970 if you have any questions or need additional information.



14. I hereby certify that the foregoing is trul and correct. Signed	Title Regulatory Affairs Manager	Date	ACCEPTED FOR RECOR
(This space for Federal or State office use) Approved by Conditions of approval, if any:	Title	Date	SEP 1 9 2005
	wingly and willfully to make any department or agency of the United States any faise, fic	titious or fraudulent stater	FARMING I UN FIELD OFFICE RY nents NATIOOD