



Idaho Department of Land				S. W	/ell Permit Number
SUNDRY NOTICES AND REPORTS ON WELLS				08-002	
				6. If Indian, Allottee or Tribe Name	
				N/A	
1. Type of Well				7. If Unit or CA/Agreement, Name and/or No.	
Oil Well x Gas Well Other				N/A	
2. Name of Operator Alta Mesa Services, LP				8, Well Name and No.	
3a. Address	3b. Phone No. (inch	ide area code)	State (Hamilton) #1-17		
			30-0991	11-075-20-005	
4. Location of Well (Footage, Sec,. T., R., M., or Survey Description)			,50-0551	10. Field and Pool, or Exploratory Area	
				.03	Hamilton
\$17 T7N R4W, 405.9' FNL 2388.1' FWL				11 .County or Parrish, State	
				Payette, Idaho	
CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTIC				, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION TYPE OF ACTI				ON	
Notice of Intent	Acidize New Construction			Stimulation Treat	
Subsequent Report	Alter Casing		Abandon	H	
Final Abandonment	Casing Repair	[]			Temporarily Abandon
		Plug Baci		-	Water Disposal
Notice	Change Plans		on (Start/Resume)	_	Water Shut-Off
	Convert to Injection	Reclamat	•	_	Well Integrity
	Deepen	Recompl		<u>1 y</u>	Other Slickline survey - pressure / PBTD
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 IDL. Required subsequent reports shall be filed within 30 days following completion of the involved operations. Final Abandonment Notices shall be filed only after					
operations. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has					
determined that the site is ready for final inspection.)					
Notify community within 1 mile of planned wellhead work; move in slickline wireline unit with a crane and set electronic memory pressure gauges in the well. Move out the slickline unit and move in well flow testing equipment. Flow test the well for three (3)					
					e out all well testing equipment and
properly dispose of the produced water. Sell or dispose of the produced condensate. Leave the well shut in with gauges in the					
well. Move in a slickline wireline unit with a crane and retrieve the electronic memory pressure gauges from the well after the test					
has been completed. Move out the stickline unit.					
14. I hereby certify that the fore	going is true and correct		1		
Name (Printed/Typed)	Dale R. Hay	es	Title	Vice	President - Operations
		10.07	CONTRACTOR TO THE		
Signature	an,		Date	12/2	/an-a
Sale R. Kayar				12/3	/2012
THE CHACE FOR FERDING OF STATE OFFICE HER					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by					
A T	77 /		- C - C - C - C - C - C - C - C - C - C		
Title	- A		/2/7/ 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.

RECEIVED

DEC 0 6 2012 Idaho Dept. of L. SWI