

McAfee & Taft

A PROFESSIONAL CORPORATION

10TH FLOOR • TWO LEADERSHIP SQUARE
211 NORTH ROBINSON • OKLAHOMA CITY, OK 73102-7103
(405) 235-9621 • FAX (405) 235-0439
www.mcafeetaft.com

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October 20, 2020

FEDERAL EXPRESS

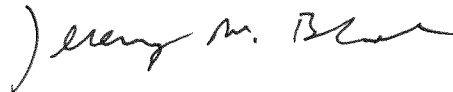
Deb Madison, Minerals Director
Fort Peck Assiniboine and Sioux Tribes
P.O. Box 1027
501 Medicine Bear Rd.
Poplar, MT 59255

Ms. Madison,

Per direction from your attorney, Mr. Gary Brownell with Sonosky, Chambers, Sachse, Endreson & Perry, LLP, I am transmitting to you the enclosed fully-executed originals of (1) the Montana Board of Oil and Gas Conservation – Notice of Intent to Change Operator, and (2) United States Department of the Interior Bureau of Land Management – Sundry Notices and Reports on Wells. Per Mr. Brownell, you will facilitate the submission of these documents to the appropriate parties for processing. When available, please email copies of the approved and processed forms to me at Jeremy.black@mcafeetaft.com.

If you have any questions, feel free to give me a call.

Sincerely,



Jeremy M. Black

JMB/cae
Enclosure

**MONTANA BOARD OF OIL AND GAS CONSERVATION
2535 ST. JOHNS AVENUE BILLINGS, MONTANA 59102**

Notice of Intent to Change Operator

The undersigned Transferor hereby notifies the Board of Oil and Gas Conservation of its intention to transfer ownership and/or operation of the following wells to the undersigned Transferee:

| | |
|---|--|
| Lease Name: Beier, Henry 3-34 | Lease type:(Private, State, Federal, Indian) Private |
|---|--|

| | |
|--------------------------|------------------------------|
| County: Valley | Field name: Lustre |
|--------------------------|------------------------------|

Description of wells: Include API well number, well name and number, and exact location of the well including Township, Range, Section, quarter-quarter and footage measurements, and lease type . (Federal, Indian, Private, State) Attach additional sheets as necessary.

Beier, Henry 3-34 (API #25-105-21273). Section 34-31N-44E SW SW 660 FSL, 660 FWL. Private.
See Attached List.

| | |
|--|---|
| Number of Wells to be Transferred: <u>48</u> | Effective Date of Transfer: <u>10/12/20</u> |
|--|---|

Transferor's Statement:

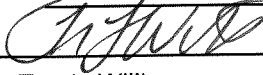
I hereby designate the Transferee named herein as the owner and/or operator of record of the above described well(s). I acknowledge that the Transferor continues to be responsible for said well(s) and all associated equipment and facilities until such time as this transfer is approved by the Montana Board of Oil and Gas Conservation. I certify that the information contained herein is true and correct:

Company Anadarko Minerals, Inc.

Street Address 100 N. Broadway Ave 21st Floor

P.O. Box _____

City, State, ZIP Oklahoma City, OK 73102

Signed 

Print Name Travis Williams

Title VP of Accounting

Telephone (405) 235-6664 ext 32

Date 9/29/2020

Transferee's Statement:

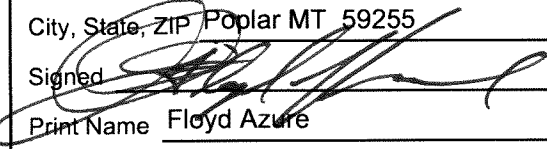
I hereby accept the designation of operator/owner for the above described well(s). I understand that this transfer will not be approved until the Transferee has complied with the Board's bonding requirements. I acknowledge that under Section 82-11-101 MCA, the Transferee herein is responsible for the costs of proper plugging and restoration of the surface of the well(s) described above. I certify that the information contained herein is true and correct:

Company A&S Mineral Development Co., LLC

Street Address 501 Medicine Bear Road

P.O. Box PO Box 1027

City, State, ZIP Poplar MT 59255

Signed 

Print Name Floyd Azure

Title Chairman as Sole Managing Member

Telephone (406) 768-2314

Date 10/12/20

BOARD USE ONLY

Approved _____
Date _____

Name Title

| | | |
|---------------------|-------|---------|
| Field Office Review | Date | Initial |
| Inspection | _____ | _____ |
| Records Review | _____ | _____ |
| Operations | _____ | _____ |

Oper. No. _____ Bond No. _____

Oper. No. _____ Bond No. _____

Instructions for Form 20

This form is used to change the Operator of Record for wells. Complete the front portion of this form as indicated.

To transfer a number of wells please type: "See attached list" in the **Description of Wells** area and include the list of wells as an attachment.

The list of wells should be separated by lease and sorted by Township, Range, and Section. Wells should be identified as **Federal, Indian, Private, or State** under lease type. **Injection/SWD** wells should be identified as such. Plugged and Abandoned wells should not be included for transfer. The list should be in the following format:

| <u>API Number</u> | <u>Lease Name</u> | <u>Well Number</u> | <u>Twp. Rge. Sec.</u> | <u>Qtr Qtr</u> | <u>Footage</u> | <u>Lease Type</u> |
|-------------------|-------------------|--------------------|-----------------------|----------------|----------------|-------------------|
|-------------------|-------------------|--------------------|-----------------------|----------------|----------------|-------------------|

The form must be signed by both the current owner/operator (transferor) and the proposed new owner/operator (transferee). The current operator of record will continue to be responsible for any wells and associated equipment or facilities until the transfer is approved by an authorized agent of the Montana Board of Oil and Gas Conservation.

For large change of operator submissions, if possible, please include a diskette containing the data list.

The Montana Board of Oil and Gas Conservation may withhold approval of the transfer until the well(s) made the subject of this form is (are) in substantial compliance with all applicable Board rules. All production reports, notices, forms, logs, samples, or other information required by Board law, rule, or order must be on file with the Board. The transferee must be in compliance with the Board's bonding requirements, as provided in Rules 36.22.1308 and 1408 ARM, before the transfer can be approved. A copy of the approved or disapproved Form 20 will be returned to each party.

Parties transferring wells are advised that the identity of responsible persons as defined by Section 82-11-101, MCA, will be determined by the Board's records.

If this form relates to a proposed change in the operator of record for a State of Montana oil and gas lease issued by the Montana Board of Land Commissioners, the parties should send a separate copy of this form to the Montana Department of Natural Resources and Conservation, Trust Lands Management Division, Minerals Management Bureau, 1625 Eleventh Avenue, P.O. Box 201601, Helena Montana 59620-1601.

The proposed new operator should have a current copy of the rules and laws of the Montana Board of Oil and Gas Conservation. Copies of the rules and laws may be obtained from any Board office, or are available on the Internet at <http://www.bogc.dnrc.mt.gov>.

NOTICE: False or inaccurate information can void the transfer of a well or wells to another operator's bond. Be sure to verify the accuracy of all well descriptions and other information supplied with this form.

| BOARD USE ONLY | CONDITIONS OF APPROVAL |
|----------------|------------------------|
| | |

| API Number | Lease Name | Well Number | TWP | RGE | SEC | Qtr Qtr | Footage | Footage | Lease Type | BIA Lease | CA/Agreement Number |
|----------------|-----------------------------|-------------|-----|-----|-----|---------|----------|----------|------------|-----------------|---------------------|
| 25105212600000 | BEIER HENRY B | 2 SWD | 30N | 44E | 3 | SW SE | 660 FSL | 1980 FEL | Indian | | |
| 25105212180000 | TIESZEN-TOEWS | 1-3 | 30N | 44E | 3 | NE NW | 660 FNL | 1980 FWL | Private | | |
| 25105212570000 | TIESZEN-TOEWS | 2-3 | 30N | 44E | 3 | SW NE | 1980 FNL | 2080 FEL | Private | | |
| 25105212720000 | TIESZEN-TOEWS | 3-3 | 30N | 44E | 3 | SW NW | 1980 FNL | 710 FWL | Private | | |
| 25105212660000 | REDDIG J. | 1-5 | 30N | 44E | 5 | NE NE | 700 FNL | 530 FEL | Private | | |
| 25105212390000 | TIESZEN W | 1-11 | 30N | 44E | 11 | NW NW | 520 FNL | 860 FWL | Private | | |
| 25105213930000 | DAHL KENNETH | 1-8 SWD | 30N | 45E | 8 | SE SW | 750 FSL | 1400 FWL | Indian | 14-20-0256-4932 | MTM97689X |
| 25105214170000 | DARLENE | 1-15 | 30N | 45E | 15 | SE NW | 1750 FNL | 2400 FWL | Indian | 14-20-0256-4932 | MTM97689X |
| 25105213660000 | GREY BEAR, H HEIRS | 1 INJ | 30N | 45E | 15 | NE NW | 604 FNL | 2113 FWL | Indian | | MTM97689X |
| 25105214230000 | J R | 1-15 INJ | 30N | 45E | 15 | NE SW | 2100 FSL | 2310 FWL | Indian | | MTM97689X |
| 25105214200000 | RUGGLES | 1-15 | 30N | 45E | 15 | SW NE | 2310 FNL | 1649 FEL | Indian | | MTM97689X |
| 25105214260000 | SUZANNE | 1-15 | 30N | 45E | 15 | SW SW | 700 FSL | 860 FWL | Indian | | MTM97689X |
| 25105214130000 | DAHL | 1-16 | 30N | 45E | 16 | E2 NW | 1300 FNL | 1850 FWL | Private | | MTM97689X |
| 25105215740000 | DAHL | 2-16 | 30N | 45E | 16 | NE SE | 2322 FSL | 1033 FEL | Indian | | |
| 25105214900000 | DAHL | 9-16 INJ | 30N | 45E | 16 | NE SE | 1680 FSL | 660 FEL | Indian | | |
| 25105215760000 | DAHL (NISKU) & DAHL (CRLSC) | 3-16A | 30N | 45E | 16 | SW NW | 2100 FNL | 676 FWL | Indian | | MTM97689X |
| 25105214160000 | GARY | 1-16 | 30N | 45E | 16 | NE SW | 1980 FSL | 1980 FWL | Indian | | MTM97689X |
| 25105213780000 | HAWKINS KAT | 1-U | 30N | 45E | 16 | SE NE | 1980 FNL | 660 FEL | Indian | | MTM97689X |
| 25105214320000 | HAWKINS, KATHRYN | 1-16HZ | 30N | 45E | 16 | SE NE | 1637 FNL | 710 FEL | Private | | |
| 25105213070000 | IRON BEAR HEIRS | 2 | 31N | 43E | 13 | SW SE | 660 FSL | 1980 FEL | Indian | 14-20-0256-4802 | |
| 25105213150000 | CAMPBELL MV | 1 | 31N | 43E | 24 | SW SW | 560 FSL | 660 FWL | Private | | |
| 25105213230000 | WILLIAM CLARK | A-3 | 31N | 43E | 25 | SW SE | 690 FSL | 1790 FEL | Indian | 14-20-0256-4573 | |
| 25105212980000 | CRANSTON | 1-35 SWD | 31N | 43E | 35 | SW NE | 1877 FNL | 1808 FEL | Indian | | |
| 25105212770000 | STANDING HEIRS, MARIE | 1 | 31N | 43E | 35 | SW SW | 867 FSL | 573 FWL | Indian | 14-20-0256-4794 | |
| 25105212270000 | KLIEWER A | 1 | 31N | 44E | 27 | SE SE | 660 FSL | 660 FEL | Private | | |
| 25105213100000 | BELLONGER CLARK | 2-28 | 31N | 44E | 28 | NE NW | 660 FNL | 1980 FWL | Indian | 14-20-0256-6387 | |
| 25105214100000 | BELLONGER CLARK | 3-28 | 31N | 44E | 28 | SW NW | 1980 FNL | 660 FWL | Indian | 14-20-0256-6387 | |
| 25105212290000 | UNRAU, KAT | 1 | 31N | 44E | 28 | W2 NE | 1320 FNL | 1980 FEL | Private | | |
| 25105214460000 | BLACK MAGIC | 1-29 | 31N | 44E | 29 | NE NE | 1290 FNL | 466 FEL | Private | | |
| 25105213380000 | OLFERT C. | 1-29H | 31N | 44E | 29 | SW SW | 660 FSL | 660 FWL | Private | | |
| 25105213730000 | OLFERT C. | 2-29 | 31N | 44E | 29 | NE SW | 1980 FSL | 1980 FWL | Private | | |
| 25105213040000 | OLFERT C. | 3-29 | 31N | 44E | 29 | SW SE | 660 FSL | 1980 FEL | Private | | |
| 25105214110000 | OLFERT C. | 4-29 | 31N | 44E | 29 | NE SE | 1980 FSL | 660 FEL | Private | | |
| 25105212820000 | CRAWFORD | A-1 | 31N | 44E | 30 | NE SW | 1788 FSL | 1910 FWL | Private | | |
| 25105214440000 | HURLEY ROBERT | 1-30 | 31N | 44E | 30 | NE NW | 936 FNL | 2389 FWL | Private | | |
| 25105212350000 | REDDIG C. | 2-30 BP | 31N | 44E | 30 | SE SE | 660 FSL | 990 FEL | Private | | |
| 25105213510000 | REDDIG C. | 3-31 | 31N | 44E | 31 | NE NE | 660 FNL | 660 FEL | Private | | |

| API Number | | Lease Name | | Well Number | | | | RGE | | SEC | Qtr Qtr | Footage | Footage | Lease Type | BIA Lease | CA/Agreement Number |
|----------------|--------------|-------------|-----|-------------|-----|---------|----------|----------|------------|-----------------|---------------------|---------|---------|------------|-----------|---------------------|
| API Number | Lease Name | Well Number | TWP | RGE | SEC | Qtr Qtr | Footage | Footage | Lease Type | BIA Lease | CA/Agreement Number | | | | | |
| 25105212890000 | WILDER GE | 2 | 31N | 44E | 31 | NE SE | 1950 FSL | 838 FEL | Indian | 14-20-0256-4578 | | | | | | |
| 25105213830000 | WILDER-CLARK | 1 | 31N | 44E | 31 | SW NW | 2180 FNL | 605 FWL | Indian | 14-20-0256-4578 | | | | | | |
| 25105215790000 | FORT PECK | 6-32 | 31N | 44E | 32 | NW SW | 1802 FSL | 640 FWL | Indian | 14-20-0256-4579 | | | | | | |
| 25105213750000 | REDDIG A. | 1-32 | 31N | 44E | 32 | NW NE | 660 FNL | 1980 FEL | Private | | | | | | | |
| 25105212230000 | REDDIG C. | 1-32 SWD | 31N | 44E | 32 | SE NW | 1888 FNL | 1926 FWL | Indian | | | | | | | |
| 25105213800000 | SUN TRIBAL | 14-32 | 31N | 44E | 32 | SW SW | 660 FSL | 660 FWL | Indian | 14-20-0256-4579 | | | | | | |
| 25105212800000 | SUN TRIBAL | 2 | 31N | 44E | 32 | SW SE | 510 FSL | 1830 FEL | Indian | 14-20-0256-4579 | | | | | | |
| 25105212580000 | OLFERT B. | 1-33 | 31N | 44E | 33 | SW SE | 731 FSL | 2048 FEL | Private | | | | | | | |
| 25105212830000 | OLFERT B. | 2-33 | 31N | 44E | 33 | NE SE | 1350 FSL | 660 FEL | Private | | | | | | | |
| 25105213110000 | OLFERT D. | 2-33 | 31N | 44E | 33 | SW NE | 1980 FNL | 1980 FEL | Private | | | | | | | |
| 25105212730000 | BEIER HENRY | 3-34 | 31N | 44E | 34 | SW SW | 660 FSL | 660 FWL | Private | | | | | | | |

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. FEE
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator A&S MINERAL DEVELOPMENT CO, LLC

3a. Address P.O. Box 1027 Poplar, MT 59255 3b. Phone No. (include area code) 406-768-2314

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
C SW SE Sec. 3-30N-44E 660FSL 660 FWL

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No. Henry Beier B 2 SWD

9. API Well No. 2510521260000

10. Field and Pool or Exploratory Area
Lustre

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

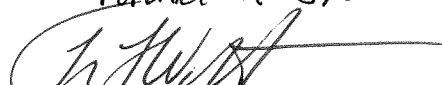
| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by:

A&S MINERAL DEVELOPMENT CO, LLC
P.O. Box 1027
POPULAR, MT 59255


The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____ hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) FLOYD AZURE Title CHAIRMAN OF SOLE MANAGING MEMBER

Signature  Date 10/12/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

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. Office _____

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GENERAL INSTRUCTIONS

This form is designed for submitting proposals to perform certain well operations and reports of such operations when completed as indicated on Federal and Indian lands pursuant to applicable Federal law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area or regional procedures and practices, are either shown below, will be issued by or may be obtained from the local Federal office.

SPECIFIC INSTRUCTIONS

Item 4 - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

Item 13: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to the top of any tubing left in the hole; method of closing top of well and date well site conditioned for final inspection looking for approval of the abandonment. If the proposal will involve **hydraulic fracturing operations**, you must comply with 43 CFR 3162.3-3, including providing information about the protection of usable water. Operators should provide the best available information about all formations containing water and their depths. This information could include data and interpretation of resistivity logs run on nearby wells. Information may also be obtained from state or tribal regulatory agencies and from local BLM offices.

NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

EFFECT OF NOT PROVIDING THE INFORMATION: Filing of this notice and report and disclosure of the information is mandatory for those subsequent well operations specified in 43 CFR 3162.3-2, 3162.3-3, 3162.3-4.

The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

BURDEN HOURS STATEMENT: Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002566387

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well
 Oil Well, Gas Well, Other

8. Well Name and No. Bellonger Clark 2

2. Name of Operator **A&S MINERAL DEVELOPMENT CO, LLC**

9. API Well No. 25105213100000

3a. Address **PO Box 1027, Poplar MT 59255** 3b. Phone No. (include area code) **406 768-2314**

10. Field and Pool or Exploratory Area
Lustre

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
NE NW Sec. 28-31N-44E

11. Country or Parish, State
Valley County, MT

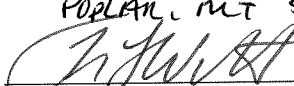
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by: **A&S MINERAL DEVELOPMENT CO, LLC**

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102

**PO Box 1027
Poplar, MT 59255**

Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title **Chairman, OF SOLE MANAGING MEMBER.**

Signature 

Date **10/10/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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.

Office

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GENERAL INSTRUCTIONS

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Item 4 - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

Item 13: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to the top of any tubing left in the hole; method of closing top of well and date well site conditioned for final inspection looking for approval of the abandonment. If the proposal will involve **hydraulic fracturing operations**, you must comply with 43 CFR 3162.3-3, including providing information about the protection of usable water. Operators should provide the best available information about all formations containing water and their depths. This information could include data and interpretation of resistivity logs run on nearby wells. Information may also be obtained from state or tribal regulatory agencies and from local BLM offices.

NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002566387

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No. Bellonger Clark 3

2. Name of Operator **A+S MINERAL DEVELOPMENT CO, LLC**

9. API Well No. 2510521410000

3a. Address **PO Box 1027 Poplar, MT 59255**

3b. Phone No. (include area code) **406 768-2314**

10. Field and Pool or Exploratory Area
Lustre

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW NW Sec. 28-31N-44E 1980 FNL 660 FWL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by: **A+S MINERAL DEVELOPMENT CO, LLC**
PO Box 1027
POPLAR, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title **Chairman of Sole Managing Member**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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.

Office

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **FEE**

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No. **Cranston et al 1 SWD**

2. Name of Operator

A&S MINERAL DEVELOPMENT CO, LLC

9. API Well No. **25105212980000**

3a. Address

PO. Box 1027, Poplar MT 59255

3b. Phone No. (include area code)

406 708 2314

10. Field and Pool or Exploratory Area
Lustre

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

NE SW NE Sec.35-31N-43E 1877 FNL 1808 FEL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by:

A&S MINERAL DEVELOPMENT CO, LLC
PO. Box 1027
POPLAR, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title **CHAIRMAN OF SOLE MANAGING MEMBER.**

Signature

Date

10/12/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **FEE**
6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator **A & S MINERAL DEVELOPMENT CO, LLC**

3a. Address **PO Box 1027, Poplar MT 59255** 3b. Phone No. (include area code) **406 768 2314**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
NE SE Sec. 16-30N-45E 2322 FSL 1033 FEL

7. If Unit of CA/Agreement, Name and/or No.
MTM97689X

8. Well Name and No.
Dahl 2-16

9. API Well No.
25105215740000

10. Field and Pool or Exploratory Area
MidFork

11. Country or Parish, State
Valley County, MT

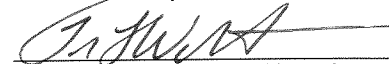
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | | |
|--|---|---|--|---|--|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off | |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity | |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other | |
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Effective Oct 12, 2020, operation of this well will be taken over by: **A & S MINERAL DEVELOPMENT CO, LLC**
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POPLAR, MT 59255

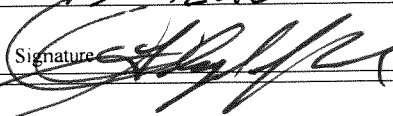
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Travis L. Williams, Vice President - Accounting

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Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
FLOYD AZURE Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature  Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

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FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

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6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.
MTM97689X

8. Well Name and No. **Dahl 3-16A**

2. Name of Operator **A & S MINERAL DEVELOPMENT CO, LLC**

9. API Well No. **25105215760000**

3a. Address **PO. Box 1027, Poplar Mt, 59255** 3b. Phone No. (include area code) **406-768-2314**

10. Field and Pool or Exploratory Area
MidFork

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW NW Sec. 16-30N-45E 2100 FNL 676 FWL


11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by: **A & S MINERAL DEVELOPMENT Co, LLC**

**PO. Box 1027
POPLAR, MT 59255**

Travis L. Williams, Vice President - Accounting

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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Office

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NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **FEE**
6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator **A & S MINERAL DEVELOPMENT CO., LLC**

3a. Address **PO Box 1027 POPLAR MT 59255** 3b. Phone No. (include area code) **406 768 2314**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
NE SE Sec. 16-30N-45E 1680 FSL 660 FEL

7. If Unit of CA/Agreement, Name and/or No.
MTM97689X

8. Well Name and No.
Dahl 9-16

9. API Well No. **25105214900000**

10. Field and Pool or Exploratory Area
MidFork

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
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PO Box 1027
POPALAR, MT 59255


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100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
FLOYD AZURE

Signature 

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Date **10/22/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

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Office _____

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The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **142002564932**

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.
MTM97689X

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No. **Darlene 1-15**

2. Name of Operator
A&S MINERAL DEVELOPMENT CO, LLC

9. API Well No. **25105214170000**

3a. Address
PO Box 1027, Poplar, MT 59255

3b. Phone No. (include area code)
406-768-2314

10. Field and Pool or Exploratory Area
MidFork

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW NW Sec. 15-30N-45E 1750 FNL 2400 FWL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
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Effective Oct 12, 2020, operation of this well will be taken over by: **A&S MINERAL DEVELOPMENT CO, LLC**
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100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Office

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
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5. Lease Serial No. **142002564579**

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

A+S MINERAL DEVELOPMENT Co, LLC

3a. Address

PO Box 1027, Poplar, MT 59255

3b. Phone No. (include area code)

406768-2314

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

NW SW Sec.32-31N-44E 1802 FSL 640 FWL

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No. **Fort Peck 6-32**

9. API Well No. **25105215790000**

10. Field and Pool or Exploratory Area
Lustre

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

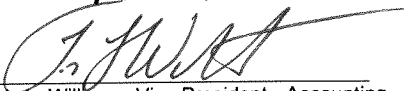
| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
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POPULAR, MT 59255

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100 N Broadway Ave Suite 2110
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FLOYD AZULE

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature

Date

10/12/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **FEE**

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.
MTM97689X

8. Well Name and No. **Gary 1-16**

2. Name of Operator **A&S MINERAL DEVELOPMENT CO, LLC**

9. API Well No. **25105214160000**

3a. Address
PO Box 1027, POPLAR, MT 59255

3b. Phone No. (include area code)
406 768 2314

10. Field and Pool or Exploratory Area
MidFork

4. Location of Well (Footage, Sec., T.R., M., or Survey Description)
NE SW Sec.16-30N-45E 1980 FSL 1980 FWL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

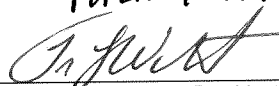
| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by:


A&S MINERAL DEVELOPMENT CO, LLC
PO Box 1027
POPLAR, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
FLOYD AZULE
Title **CHAIRMAN OF SOLE MANAGING MEMBER**
Signature 
Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

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. Office _____

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GENERAL INSTRUCTIONS

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SPECIFIC INSTRUCTIONS

Item 4 - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

Item 13: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to the top of any tubing left in the hole; method of closing top of well and date well site conditioned for final inspection looking for approval of the abandonment. If the proposal will involve **hydraulic fracturing operations**, you must comply with 43 CFR 3162.3-3, including providing information about the protection of usable water. Operators should provide the best available information about all formations containing water and their depths. This information could include data and interpretation of resistivity logs run on nearby wells. Information may also be obtained from state or tribal regulatory agencies and from local BLM offices.

NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

EFFECT OF NOT PROVIDING THE INFORMATION: Filing of this notice and report and disclosure of the information is mandatory for those subsequent well operations specified in 43 CFR 3162.3-2, 3162.3-3, 3162.3-4.

The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002564932

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

A & S MINERAL DEVELOPMENT CO, LLC

3a. Address

PO. Box 1027 POPPAUL MT 59255

3b. Phone No. (include area code)

406 768 2314

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

NE NW Sec. 15-30N-45E 604 FNL 2113 FWL

7. If Unit of CA/Agreement, Name and/or No.
MTM97689X

8. Well Name and No. Grey Bear Heirs 1

9. API Well No. 25105213660000

10. Field and Pool or Exploratory Area
MidFork

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by:

A & S MINERAL DEVELOPMENT CO, LLC
PO. Box 1027
POPPAUL, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

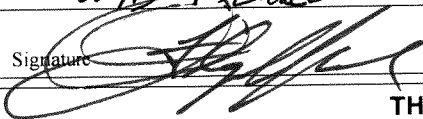
Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZUAE

Title CHAIRMAN OF SOLE MANAGING MEMBER.

Signature



Date

10/12/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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.

Office

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GENERAL INSTRUCTIONS

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SPECIFIC INSTRUCTIONS

Item 4 - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

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NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
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5. Lease Serial No. 142002564802

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.

2. Name of Operator **A & S MINERAL DEVELOPMENT CO, LLLC**

8. Well Name and No. Iron Bear Heirs 2

3a. Address **PO Box 1027, Poplar, MT 59255** 3b. Phone No. (include area code) **406 768 2314**

9. API Well No. 25105213070001

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW SE Sec. 13-31N-43E 660 FSL 1980 FEL

10. Field and Pool or Exploratory Area
Lustre

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
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Effective Oct 12, 2020, operation of this will be taken over by:

A & S MINERAL DEVELOPMENT CO, LLLC
PO. Box 1027
POPLAR, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/6/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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Office

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **FEE**
6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
A+S MINERAL DEVELOPMENT CO, LLC

3a. Address
P.O. Box 1027 POGONIA MT 59255

3b. Phone No. (include area code)
406. 768. 2314

7. If Unit of CA/Agreement, Name and/or No.
MTM97689X

8. Well Name and No.
JR 1-15

9. API Well No.
25105214230000

10. Field and Pool or Exploratory Area
MidFork

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA


| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
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Effective Oct 12, 2020, operation of this well will be taken over by:

A+S Mineral Development Co, LLC
P.O. Box 1027
POGONIA, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102

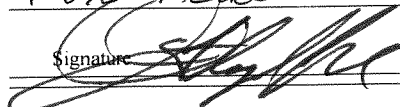

Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
FLOYD ABRAHAM

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

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NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **FEE**
6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator **A&S MINERAL DEVELOPMENT CO, LLC**

3a. Address **PO Box 1027 Poplar MT 59255** 3b. Phone No. (include area code) **406.768.2314**

7. If Unit of CA/Agreement, Name and/or No. **MTM97689X**

8. Well Name and No. **Kathryn Hawkins 1**

9. API Well No. **25105213780000**

10. Field and Pool or Exploratory Area
MidFork

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by: **A&S MINERAL DEVELOPMENT CO, LLC**
PO Box 1027
POPULAR, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102

Travis L. Williams
Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) **FLOYD AZURE**

Signature *[Signature]*

Title **CHAIRMAN OF SILE MANAGING MEMBER**

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

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.

Office _____

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GENERAL INSTRUCTIONS

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NOTICES

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AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **FEE**

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No. **Kenneth Dahl 1-8**

2. Name of Operator

A&S MINERAL DEVELOPMENT CO, LLC

9. API Well No. **25105213930000**

3a. Address

P.O. Box 1027, Poplar, MT 59255

3b. Phone No. (include area code)

406 768 2344

10. Field and Pool or Exploratory Area
MidFork

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

NW SE SW Sec. 8-30N-45E 750 FSL 1400 FWL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
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Effective Oct 12, 2020, operation of this well will be taken over by: **A&S Mineral Development Co, LLC**
P.O. Box 1027
Poplar, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

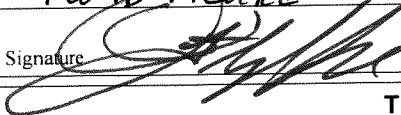
Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title **CHAIRMAN OF SOLIC MANAGING MEMBER.**

Signature



Date

10/12/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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FORM APPROVED
OMB No 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. **FEE**

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No. **C. Reddig 1-32 SWD**

2. Name of Operator **A+S MINERAL DEVELOPMENT CO, LLC**

9. API Well No. **25105212230000**

3a. Address **PO. Box 1027, Poplar, MT 59255**

3b. Phone No. (include area code) **406. 768. 2314**

10. Field and Pool or Exploratory Area
Lustre

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SE NW Sec.32-31N-44E 1888FNL 1926FWL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA


| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
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The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
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Travis L. Williams, Vice President - Accounting

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FLOYD AZEVE

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

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Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator **A&S MINERAL DEVELOPMENT CO, LLC**

3a. Address **P.O. Box 1027 POPUL, MT 59255** 3b. Phone No. (include area code) **406.768.2314**

7. If Unit of CA/Agreement, Name and/or No. **MTM97689X**

8. Well Name and No. **Ruggles 1-15**

9. API Well No. **25105214200000**

10. Field and Pool or Exploratory Area
MidFork

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA


| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
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The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD DEWARS

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

| | | |
|---|--------|------|
| Approved by | Title | Date |
| 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. | Office | |

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GENERAL INSTRUCTIONS

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SPECIFIC INSTRUCTIONS

Item 4 - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

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NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

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Response to this request is mandatory.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002564794

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No. M. Standing Heir 1

2. Name of Operator

A 4 S MINERAL DEVELOPMENT CO, LLC

9. API Well No. 25105212770000

3a. Address

P.O. Box 1027, Poplar Mt 59255

3b. Phone No. (include area code)

406-768-2314

10. Field and Pool or Exploratory Area
Lustre

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SW SW Sec.35-31N-43E 867 FSL 573 FWL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 recomplate 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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomplate in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by:

A 4 S MINERAL DEVELOPMENT CO, LLC
P.O. Box 1027
POPULAR - MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title Chairman and Sole Managing Member

Signature

Date

10/12/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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.

Office

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NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

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The Paperwork Reduction Act of 1995 requires us to inform you that:

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Response to this request is mandatory.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002564579

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No. Sun Tribal 2

2. Name of Operator

A&S MINERAL DEVELOPMENT CO, LLC

9. API Well No. 25105212800000

3a. Address

PO Box 1027, POPLAR MT 59255

3b. Phone No. (include area code)

406.768.2314

10. Field and Pool or Exploratory Area
Lustre

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SW SE Sec.32-31N-44E 510 FSL 1830 FEL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
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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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by: A&S MINERAL DEVELOPMENT CO, LLC

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102

Travis L. Williams
Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZEVEDO

Title CHAIRMAN OF SOLE MANAGE MEMBER

Signature

Date

10/12/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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(Instructions on page 2)

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002564579

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.

2. Name of Operator *A+S Mineral Development Co, LLC*

8. Well Name and No. *Sun Tribal 14-32*

3a. Address
P.O. Box 1027, Poplar, MT 59255

3b. Phone No. (include area code)
406.768.2314

9. API Well No. 25105213800000

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW SW Sec.32-31N-44E 660 FSL 660 FWL

10. Field and Pool or Exploratory Area
Lustre

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
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POPULAR MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102

Travis L. Williams
Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____ hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) *FLOYD AZURE*
Signature *[Signature]*
Title *CHAIRMAN of SORE MANAGING MEMBER*
Date *10/12/2020*

THE SPACE FOR FEDERAL OR STATE OFFICE USE

| | | |
|---|--------|------|
| Approved by | Title | Date |
| 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. | Office | |

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

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5. Lease Serial No. **FEE**
6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
A+S MINERAL DEVELOPMENT CO, LLC

3a. Address
PO Box 1027 Poplar, MT 59255

3b. Phone No. (include area code)
406 768 2314

7. If Unit of CA/Agreement, Name and/or No.
MTM97689X

8. Well Name and No.
Suzanne 1-15

9. API Well No.
25105214260000

10. Field and Pool or Exploratory Area
MidFork

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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 BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Effective Oct 12, 2020, operation of this well will be taken over by:

A+S MINERAL DEVELOPMENT CO, LLC
PO Box 1027
POPULAR, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102



Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____ hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
FLOYD A. ARNOLD

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

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. Office _____

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GENERAL INSTRUCTIONS

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NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

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The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

BURDEN HOURS STATEMENT: Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002564578

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No. G.E. Wilder 2

2. Name of Operator **AAS MINERAL DEVELOPMENT CO, LLC**

9. API Well No. 2510521289000

3a. Address **P.O. Box 1027, Pomeroy, MT 59255**

3b. Phone No. (include area code) **406.768.2314**

10. Field and Pool or Exploratory Area
Lustre

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
NE SE Sec. 31-31N-44E 1950 FSL 838 FEL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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Effective OCT 12, 2020, operation of this well will be taken over by: **AAS MINERAL DEVELOPMENT CO, LLC**

**P.O. Box 1027
POMEROY, MT 59255**

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZULRE

Title **CHAIRMAN OF SOLE MANAGING MEMBER.**

Signature

Date

10/12/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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NOTICES

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002564578

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No. Wilder-Clark 1

2. Name of Operator **A&S MINERAL DEVELOPMENT CO, LLC**

9. API Well No. 2510521383000

3a. Address **PO. Box 1027 POPLAR, MT 59255**

3b. Phone No. (include area code) **406.768.2314**

10. Field and Pool or Exploratory Area
Lustre

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW NW Sec. 31-31N-44E 2180 FNL 605 FWL

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

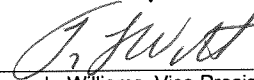
| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
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Effective Oct 12, 2020, operation of this well will be taken over by: **A&S MINERAL DEVELOPMENT CO, LLC**

**PO. Box 1027
Poplar, MT 59255**

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____ hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURG

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. 142002564573

6. If Indian, Allottee or Tribe Name
Fort Peck Assiniboine & Sioux

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.

2. Name of Operator **A+S MINERAL DEVELOPMENT CO, LLC**

8. Well Name and No. William Clark A-3

3a. Address **P.O. Box 1027, POPCAMP MT 59255**

3b. Phone No. (include area code) **400-768-2314**

9. API Well No. 25105213230000

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW SE Sec.25-31N-43E 690 FSL 1790 FEL

10. Field and Pool or Exploratory Area
Lustre

11. Country or Parish, State
Valley County, MT

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
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| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
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Effective Oct 12, operation of this well will be taken over by: **A+S MINERAL DEVELOPMENT CO, LLC**
P.O. Box 1027
POPCAMP, MT 59255

The previous operator was: Anadarko Minerals, Inc.
100 N Broadway Ave Suite 2110
Oklahoma City, OK 73102


Travis L. Williams, Vice President - Accounting

Effective _____, 2020, _____, hereby certifies that it is authorized by the proper lease owners to conduct operations and is responsible under the terms and conditions of the lease associated with this well.

Bond Coverage pursuant to 43 CFR 3104 for lease activities is being provided by _____ under BIA bond No. _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

FLOYD AZURE

Title **CHAIRMAN OF SOLE MANAGING MEMBER**

Signature 

Date **10/12/2020**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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Response to this request is mandatory.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

BURDEN HOURS STATEMENT: Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240