

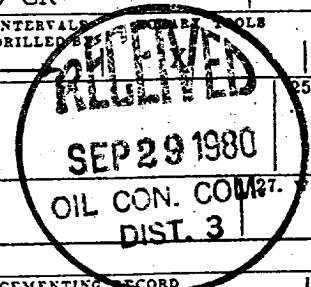
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

(See instructions on reverse side)

Budget Bureau No. 42-4559.0.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____				5. LEASE DESIGNATION AND SERIAL NO. NOOC-14205 592	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
2. NAME OF OPERATOR Benson Mineral Group, Inc.				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 1726 Champa St., Suite 600, Denver, CO 80202				8. FARM OR LEASE NAME Navajo 9-22-7	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1700 FWL & 1590 FNL, Sec. 9-T22N-R7W At top prod. interval reported below At total depth				9. WELL NO. #1	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Wildcat	
15. DATE SPUDDED 8-3-78				12. COUNTY OR PARISH Sandoval	
16. DATE T.D. REACHED 8-7-78				13. STATE NM	
17. DATE COMPL. (Ready to prod.) --				19. ELEV. CASINGHEAD 6805 GR	
18. ELEVATIONS (DF, REE, RT, GR, ETC.)*				20. TOTAL DEPTH, MD & TVD 1975	
21. PLUG, BACK T.D., MD & TVD 1940				22. IF MULTIPLE COMPLEMENTS, HOW MANY? None	
23. INTERVALS DRILLED None				24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Rusty Chacra	
25. WAS DIRECTIONAL SURVEY MADE NO				26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Log	
27. WAS WELL CORED NO				28. CASING RECORD (Report all strings set in well)	
28. CASING RECORD (Continued)		29. LINER RECORD		30. TUBING RECORD	
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"		89'	8 3/4"	50 sx Class B Neat	None
4 1/2"		1940'	6 1/4"	225 sx 50:50 POZ, 6% cel w/50 sx Class B Neat	None
31. PERFORATION RECORD (Interval, size and number) 1636-84; 1732-37; 1740-43; with 1 SPF.			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED		
1636-1743			40,000# 10-20 sn with 20,000 gal 70 quality foam		
33. PRODUCTION					
DATE FIRST PRODUCTION WOP		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flow		WELL STATUS (Producing or shut-in) SI	
DATE OF TEST 11/18/78	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
				18 MCFD	30 BWPD
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold					TEST WITNESSED BY
35. LIST OF ATTACHMENTS					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED <u>Paul C. Ellison</u>		TITLE <u>Vice President</u>		DATE <u>July 25 1980</u>	



*(See Instructions and Spaces for Additional Data on Reverse Side)

FARMINGTON DISTRICT

BY 2

NMOCC

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws 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, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. For separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s), and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attach and supplement records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAN. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs	1245	1287	Sandstone & Shale		
Chacra	1636	1745	Sandstone and Shale		