

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM - 8899
2. NAME OF OPERATOR Benson Mineral Group, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 3200 Anaconda Tower, 555 17th St., Denver, CO 80202		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' FNL & 790' FEL Section 26-T22N-R7W		8. FARM OR LEASE NAME Federal 26-22-7
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6784 GR		10. FIELD AND POOL, OR WILDCAT Rusty Chacra Extension
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 26-T22N-R7W
		12. COUNTY OR PARISH Sandoval
		13. STATE N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

8-29-78: Perforate 1526-31; 1537-39; 1543-48; 1551-65; 1612-16; 1619-22;
1713-18; 1725-30 with 1 shot per foot. Foam fracture with 30,000 #
10-20 sand and 15,000 gallons 70 quality foam.

18. I hereby certify that the foregoing is true and correct

SIGNED

Paul C. Ellison

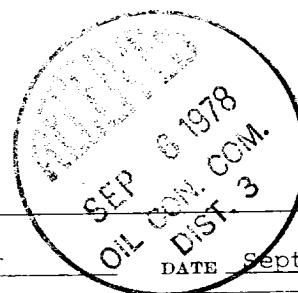
TITLE Production Manager

(This space for Federal or State office use)

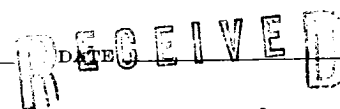
APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE



DATE September 1, 1978



SEP 5 1978

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
DENVER, COLO.